Draft

Essex Supporting People Strategy

2003 - 2004

supportingpeople
supporting independence in Essex

Version	Date	Author
7	13/6/02	Ian Christmas–
7.1	16/07/02	Martin Cooper
7.2	7/8/02	Ian Christmas
7.3	24/8/02	Martin Cooper
Final Consultation Version 7.4	5/9/02	Martin Cooper

8 Foreword

Supporting People is a major new Government programme to improve the quality of life for vulnerable people who need help.

It is important that services meet people's needs and that, within available resources, reflect the wishes of vulnerable people about how best to deliver that help to them.

This document is the first strategic statement that Essex has to provide for Central Government setting out how Supporting People will work locally, what is the current supply of support services and how we anticipate these services changing in the future.

It is important that this shadow strategy links to the work of agencies delivering health and social care, housing and crime reduction.

Most importantly, we wish to consult service users and tenant groups over the coming year about their views of existing services and the challenges to be met in implementing Supporting People.

Your input into the process is really important. We have all been given the opportunity to reshape services for vulnerable people, it is crucial that we take this opportunity to reshape services in a way that is relevant to the people who use services.

Local agencies have recognised the need to give greater importance to practical support services to help people mange and keep a home of their own. This is an opportunity for you to help shape the services that do that.

The draft Shadow Strategy has been published for consultation to all District Authorities, Essex Probation Service, Primary Care Trusts, Essex County Council, Providers and Service User Group representatives.

We look forward to receiving your views and engaging in the difficult debate and choices that we will face in responding to the need for support across Essex.

9   What is Supporting People?

Supporting People is a major new Government programme to improve and reorganise ways of helping vulnerable people living in the community. It involves the biggest transfer of resources from Central to Local Government since the introduction of the Community Care system.

Supporting People is targeted at delaying or preventing people from requiring more acute, expensive forms of care by changing the way that practical, housing related support is planned, commissioned and funded.

Central Government will determine the funding for Supporting People and allocate it to Local Authorities as an annual grant from April 2003.

Supporting People will help a range of people with support needs, including older people, people with mental health problems, people with learning, physical or sensory disabilities, ex-offenders, women escaping domestic violence, vulnerable 16 and 17 year olds by providing housing related services which complement existing care services.

Service users will have more chance of obtaining help in their own home without having to move into specialist accommodation. The Government has also made a number of guarantees to service users and providers to ensure stability in service provision through the changeover.

Supporting People will bring together a variety of local strategies aimed at promoting economic and social well being. Developing services will be an important step in meeting the objectives of local authorities, health services and other agencies in Essex.

The full implementation of Supporting People is going to take a number of years. The initial work to date has been focused on establishing new Supporting People teams and creating new joint decision-making structures and County Council and District/Borough Council levels to oversee implementation.

The Government has identified three further main phases for introducing Supporting People:

- **April 2003 –** Ensuring all service providers are paid under the new system.
- **April 2004 –** Introducing new performance monitoring and scheme review systems.
- **April 2005** – Introducing new needs assessment and internet based IT systems.

It is our intention to deliver Supporting People by involving all those with an interest in how we plan to address it.

10 Management Summary

This first County Shadow Supporting People strategy sets out our vision for Supporting People in Essex.

Vulnerable people have a wide range of needs and our draft strategy sets out a framework within which we look to meet those needs by developing good quality support services.

Our overall objectives for the supporting people programme in Essex are:

- **To ensure continuity in support services**
- **To respond to the needs of the County**
- **To improve the quality of services**
- **To co-ordinate assessments and referrals to services**
- **To develop new 'spend to save' strategies.**

Ensuring Continuity

The Essex Supporting People Team, including the Local Supporting People Officers, has co-ordinated and undertaken the activities required by the Office of the Deputy Prime Minister. We are therefore confident that Supporting People in Essex will be delivered within the timescales and framework set out by central government to ensure a smooth transition from the current arrangements to Supporting People in April 2003 and beyond.

Measuring Supply and Identifying Needs

Our extensive research into the existing supply of supported housing in Essex has catalogued a wide range of services meeting the diverse needs of vulnerable people. Similarly, we have undertaken an initial review of the need for supported housing, as expressed through the experience, views and understanding of service providers, service users and their representatives.

Each of the twelve district/borough councils in Essex have examined the range of services operating in their areas and this information, in company with information supplied by the Office of the Deputy Prime Minister, has been used to assess the need for services in each area of Essex.

By far the largest proportion of supported housing in Essex is for older people with support needs, making up 81% of the services available in the County. Yet within this, only 1% is targeted at frail elderly people.

Excluding older people services, the largest proportion of services are those targeted at people with learning difficulties (24%), generic services that are not targeted at specific client groups (20%), services targeted at single homeless people (18%) and services targeted at young people at risk or leaving care (14%).

A very small proportion of the supported housing services available in Essex are targeted at groups of people who often have high levels of support needs and are at greatest risk of suffering problems or causing problems without appropriate support. These include people with drug problems (1%), people with alcohol problems (0.2%) and teenage parents.

There are currently no services in Essex offering support specifically for People with HIV/AIDS, rough sleepers, refugees, mentally disordered offenders, offenders or people at risk of offending or older people with mental health problems or dementia.

From the results of these pieces of work, we draw conclusions about the extent and range of unmet needs that exist in the County, as a basis for deciding what new services should be developed, for whom and where.

Links to Other Strategies

Supporting People cannot stand apart from other national strategic objectives for Health, Social Care, Housing, Regeneration and Renewal, Community Safety. Supporting People is integral to the delivery of many of these objectives and is a critical part of the programme to include all members of our community. In part 8.1 of the strategy, we detail how Supporting People fits with and complements the objectives of wider strategies.

Partnership, Consultation and Involvement

This strategy has been developed and agreed with the inclusion of all the major stakeholders in Supporting People in Essex. The strategy has been constructed and agreed by the partners to the Supporting People commissioning process in Essex, following extensive consultation with customers and providers of Supporting People services. Further details can be found in section 9, page 37.

Service Reviews and Performance Management

We aim to ensure that all services are customer-focussed and provide value for money. We will work with providers in a spirit of collaboration to develop and share best practice, encourage innovation and nurture those organisations that are meeting service user aspirations. We will challenge existing services within the principles of Best value.

The strategy details how we plan to review supported housing schemes, how our Best Value review processes will deal with issues related to housing support and the mechanisms we intend to employ to monitor performance of services.

This strategy also details how we intend to monitor our performance in achieving the goal of preventing people falling into crisis or social exclusion by the implementation of early low level practical advice and support.

Cross Authority Working

Essex sits between large adjoining counties and outer London boroughs. It also neighbours the new unitary authorities of Southend and Thurrock. There is significant movement out of London and across county borders for certain service user groups.

In this strategy, we identify the systems and protocols that we (with the help of Government departments) will need to put in place to ensure that services for these groups are commissioned, funded and delivered.

Risks and Contingencies

We will protect the safety of individual service users and quality of services needed by individual service users at all times. In the event of immanent service failure or collapse, we will seek to redirect resources to providers and services that have the capacity/capability to provide for the customers at risk.

We will put in place a robust risk management framework incorporating regular performance monitoring and dialogue with providers and stakeholders.

We will implement the detailed guidance from the Office of the Deputy Prime Minister on how we should plan for major service failures or collapses, once this is received.

Summary of Annual Statement

Accompanying this strategy is a document called the Annual Investment Statement. It sets out the new , expanded or enhanced services that we plan to introduce as pipeline schemes or to prioritise as bids for new Supporting People Grant for 2003-04.

The Annual Investment Statement reflects the action plans, objectives and priorities that can be found in part 11 of this strategy below.   A summary of the planned services by service client user group can be found in part 11.1 of this strategy.

Overall Priorities

The key targets against which the Commissioning Body will prioritise any new funding to be made available by ODPM are to: -
- Reduce Homelessness
- Reduce Recidivism
- Reduce Delayed Hospital Discharges
- Promote longer independence and choice for Older People

11 Our Vision & Key Objectives

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

It will address the problems associated with poor health, homelessness, crime and other aspects of social exclusion.

We aim to work in productive partnership to maximise the opportunities presented by Supporting People. The programme represents a central element to our aim of ensuring that all individuals are fully included within our community.   Equally, Supporting People is central to the aim of ensuring that people are sustained within the community, preventing them needing high levels of personal or medical care and managing the impact of people with disruptive or chaotic lifestyles.

Key Objectives

There is a need for further development of our partnership work, including needs assessment to ensure that emerging needs are addressed in future.

The various agencies responsible for implementing the Supporting People programme in Essex have agreed the following five main objectives for our work in implementing Supporting People. We will: -

- **Ensure the continuity of the support services**

Thousands of people in Essex rely on the existing services for vital day to day support. It is crucial that we do nothing to disrupt services to these people as we introduce the changes to the funding regime.

- **Respond to the needs of the County**

We recognise the importance and the value of existing services.

The Government has also given us a clear message to increase the range of services available to meet the needs of vulnerable people.

We aim to increase the scope and volume of housing related support services for all service user groups funded by the Transitional Housing Benefit Scheme.

The principal aim will be to expand practical day-to-day support through extending services such as Floating Support or Community Support. These services will be for existing residents as well for resettling homeless people and families.

These service developments will: -

- Emphasise the role of prevention and diverting people in need from more costly and sometimes inappropriate institutional services
- Contribute to meeting the Community Safety targets by providing more support services for ex offenders, including potentially dangerous offenders
- Contribute to developing appropriate responses to the Homelessness Act 2002
- Contribute to the social inclusion agenda (*or some similar wording*)

We will continue to develop the needs assessment tools required to quantify the large amount of unmet need that we believe exists within groups, particularly the hard to reach groups, such as Offenders or people with Substance Misuse problems, and those groups newly able to access Supporting People services such as Older people who are owner occupiers. ?Any reference here to vulnerable families?

- **Improve the Quality of services**

Supporting People requires, for the first time, all support services to be made subject to a quality assurance programme.

We will regularly review services within the strategic context to see that the communities resources are being spent on the right service in the right place to meet the most pressing local need for support services. These reviews will involve service users and providers. They may lead to: -

- Investment to upgrade buildings no longer able to meet tomorrow's standards;
- Change of user group to reflect the changing pattern of needs since schemes or services were first opened;
- Moving service provision to more flexible services provided in people's own homes.
- ? also to Direct Payments?

- **Co-ordinate assessments and referrals to services**

It is important, whichever agency a person first approaches, that their support needs are identified. These needs have to be brought to the attention of the appropriate service providers and the Supporting People Commissioning Body so that we may: -

- Direct them to the most appropriate service that has the capacity to meet their needs

- Build up a more comprehensive picture of needs for further service development.

This will require Health Organisations, Social Services, Housing Agencies, Probation and other voluntary advice and support providers to collaborate in developing and maintaining a common, initial assessment system.

We will review the Joint Planning arrangements to co-ordinate needs assessments; housing allocation and support policies; capital and revenue investments in new or remodelled services.

We will develop common checklists of issues to cover whatever the professional background of the staff, backed by training in assessing support needs and identifying housing needs. Finally, it will require the development of joint information sharing protocols for all the groups of people who receive services.

- **Develop new "Spend to Save" strategies**

The Government is looking to Local Authorities to identify the level of need for support services through these strategies. Successful bids for new Government resources will result in further growth of preventative services through the Supporting People programme.

We already have evidence from case studies of the substantial costs imposed on local agencies of failing to provide practical support services. These arise from: - handling evictions; re-instating damaged or vandalised properties; lost income due to abandoned tenancies; the increased health costs of homelessness; making crisis admissions to residential care; revolving door admissions to hospital; dealing with re-offending and taking people through the courts and to prison.

We aim to ensure that agencies adopt more long-term policy costing approaches. Long term investment in low cost preventative services, which are effective and properly targeted, is far more cost effective than continuing to focus resources on acute or crisis response services.

- **Co-ordinated Strategic Planning**

The Supporting People programme in Essex is a partnership between 27 statutory agencies. At both County and Borough / District Council level, the Supporting People strategy and district level position statements are key elements underpinning the objectives set out in corporate plans on housing, regeneration, community safety and social inclusion, emerging community strategies and cross-agency strategies

12 Planning, Involvement & Consultation

12.1 Stakeholder Involvement and Consultation

The development of this strategy and our approach to Supporting People in Essex has been undertaken through the direct involvement of and consultation with stakeholders -

- Local involvement and strategic development

  Each of the twelve district /borough council's in Essex have developed their own local core strategy groups, involving statutory agencies, the voluntary sector, providers and customers at a local level and resulting in the production of district/borough level position statements, setting out local supply, needs and priorities.

- Service Commissioning Input

  We have drawn in the views, priorities and objectives of others who commission health, social care and probation services through discussions, workshops and other forms of consultation.

- Specific Customer Group Focused Work

  We have sought views and input through a series of workshops, including the Annual County Conference, targeted at specific customer groups to examine the needs and aspirations of particular groups in depth. These have involved service users (is a more generally accepted phrase in SS, as not all recipients of services really want to have them!), service providers, statutory and voluntary agencies.

- Service Provider Input

  We have operated a series of provider forums and workshops drawing representation from a wide spectrum across the sector to encourage comment, observation and to draw in provider perspectives into the process.

- Multi Agency Agreement

  Each of the twelve Borough / District Council level position statements have been agreed by the local core strategy groups and by the Members of the twelve Borough / District Councils. These statements have then been drawn together into this strategy.

In all of our consultative arrangements, we have used structured feedback systems to enable the product to be evaluated and incorporated into to the development of this strategy.

12.2 Monitoring Implementation and Agreeing the Strategy

12.2.1 The Essex Supporting People Commissioning Body

In July 2002, the Association of Essex Authorities formally agreed the establishment of the Commissioning Body for Essex. Each of the twelve district / borough councils have nominated one elected member to sit on the Commissioning Body. The Primary Care Forum and Essex Probation Board have nominated one representative. The new Essex Health Authority has asked the Commissioning Body to invite the Essex Primary Care Forum to nominate a second Non-Executive Director. The County Council will have three members, one of whom will be the Chairman.

The relationship between the Commissioning Body and the County Council (as the Administering Authority for Supporting People in Essex) will be set out in a formal Memorandum of Agreement, which is being developed on the basis of the Commissioning Bodies formal terms of reference. This will clearly allocate responsibilities and accountabilities in order to ensure the effective co-ordination of the programme.

Essex County Council as the Administering Authority will have responsibility on behalf of the commissioning Body for entering into contracts and making payments to providers for Supporting People services. The County Council will also be responsible for advising the Commissioning Body on any relevant financial and compliance issues.

The Commissioning Body retains responsibility for executive decisions in relation to the governance of the Supporting People programme in Essex. It will sign the Shadow Strategy and Annual Investment Statement for submission to the Office of the Deputy Prime Minister by October 2002.

12.2.2 Chief Officer Steering Group

The Chief Officer Steering Group oversees the progress and development of all aspects of the Supporting People programme in Essex. The membership is as follows: -

The Chief Probation Officer for Essex (Chair until September 2002)
The Chief Executive of Essex County Council
The Head of Community Care Services
The Chief Executives of Rochford and Uttlesford District Councils
The Chief Executive of Uttlesford Primary Care Trust (representing Primary Care Trusts across Essex)
Two Customer Representatives

The Chief Officer Steering Group will hold responsibility for regularly monitoring progress in the delivery of the strategy and the implementation of Supporting People in Essex. It will report progress against action plans and objectives to the commissioning Body.

13 Supported Housing Supply in Essex

13.1 Background

With the help of our partners in district/borough councils, the health sector, social services, probation services and the providers of services themselves, we have undertaken extensive research into the supply of housing related support services across Essex. The result of this activity provides an essential 'map' of the current type, target 'audience' and location of services in our community.

The mapping of supply was undertaken using the Supporting People service mapping forms and IT system provided by the Office of the Deputy Prime Minister. This statistical information was complemented by the wealth of local information provided by our partners on the extent, nature and distribution of supported housing services. Local Supporting People Officers have contacted all providers.

The Supply Map produced cannot take into account the continuing work to develop floating support services and other new services with Primary Care Trusts, Social Services and Essex Probation as either Transitional housing Benefit funded developments or revenue only match funded, pipeline proposals.

13.2 Supply Comparison

13.2.1 Supply Mapping

The analysis of the supply of supported housing services in Essex, drawn from a detailed data collection exercise (using SP3 forms), is shown in detail in the tables in section 13.1.

By far the largest proportion of supported housing services in Essex is targeted at older people with support needs, making up 81% of the services available in the County. Yet within this, only 1% is targeted at frail elderly people.

As support services for older people dominate the supply so heavily, it is necessary to remove these services from the picture to avoid distortion before examining the relative proportions of other services.

With older people services removed, the largest proportion of services are those targeted at people with learning difficulties (24%), generic services that are not targeted at specific client groups (20%), services targeted at single homeless people (18%) and services targeted at young people at risk or leaving care (14%).

By contrast, a very small proportion of the supported housing services available in Essex are targeted at groups of people who often have high levels of support needs and are at greatest risk of suffering problems or causing problems without appropriate support. These include people with drug problems (1%), people with alcohol problems (0.2%) and teenage parents.

There are currently no services in Essex offering support specifically for people withHIV&AIDS (is the politically correct spelling), rough sleepers, refugees, mentally disordered offenders, offenders or people at risk of offending or older people with mental health problems or dementia.

13.2.2 Comparison with Supply Profiles

The Office of the Deputy Prime Minister has provided each Administering Authority in England with a set of supply profiles. These drew on research conducted with pilot authorities and incorporated a variety of data sources to present a 'picture' of the typical levels of supply in comparable authorities. The table below reproduces the supply profile for Essex and compares it with information drawn from the supply mapping exercise undertaken as part of the Supporting People programme:

As the table below shows, the supported housing supply in most categories in Essex sits within the ranges that the ODPM's profile indicates for an area like Essex.

The exceptions are:

- Sheltered housing – This figure is below the level indicated for an area of Essex type and below figures provided by housing organisations in other statutory returns to central Government. This discrepancy is caused by the different definitions used in the ODPM designed supporting people supply mapping exercise. As a result, many sheltered housing services have appeared under the floating support category, because they operate on a call out/peripatetic basis.

- Home Improvement Agencies – The figure for Essex falls significantly below the number of clients that ODPM expect to be offered such a service in an area of this type. This difference will be reflected in discussions with Home Improvement Agency providers over the capacity and organisation of existing services and in the development of new services in the future.

- Community Alarm Services – there has been a significant under recording through the supply mapping process because of delays by the ODPM in issuing specific guidance on Community Alarms and Supporting People. This is currently being rectified, but collection of data from these services will not be complete before this strategy is published.

- There has been a delay in mapping services for Travellers as these are a late addition to the programme.

13.2.2.1   Supply Profile Comparison for Essex

Accommodation Mix According to number of household units	DTLR Supply Profile		Essex Supply Mapping Data[1]
	Number of clients/bedspaces for area (based on population size)		No Of Household Units
Accommodation based provision:	Range		
	Lower	**Higher**	
Supported housing (shared or self contained)	181	3211	**1,837**
Homeless hostel, B&B or other temporary accommodation.	34	1621	**156**
Women's Refuge	33	207	**105**
Adult Placement – Registered	31	52	**19**
Sheltered housing for older people	9885	17247	**8603**
Very sheltered housing for older people	543	1658	**1109**
Other Accommodation including Foyer for young people	66	885	**618**
Teenage parent	Not previously recorded		**N/a**
Almshouses	Not previously recorded		**204**
Leasehold schemes	Not previously recorded		**160**
Supported Lodgings	Not previously recorded		**0**
Total Accommodation Based Services	**10773**	**24881**	**12,811**
Outreach/Umbrella Provision:			
Home Improvement Agencies	4239		**655**
Floating Support	Not previously recorded		**1755**
Resettlement Services	Not previously recorded		**12**
Outreach Services	Not previously recorded		**0**
Community or Social Alarm Service	3971		**420**
Total Non-Accommodation Based Services	**8210**		**2,842**

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[1] Information drawn from SPINTLS system with approx 70% of Essex data inputted. These figures will be updated in September but the conclusions are unlikely to change radically.

14 The Need for Supported Housing in Essex

14.1 Identify Needs and Priorities

We have undertaken a detailed information gathering and consultative exercise, including a series of client group orientated workshops, involving statutory bodies, providers, representative organisations, advice/advocacy agencies designed specifically to draw out information and opinions about need and service priorities.

Each of the local Supporting People Core Strategy Groups have been examining needs in their areas and this information has been combined with a wide range of other local and county-wide sources of data into the 12 district level position statements, which have informed the priorities identified in the Annual Investment Statement.

The information on need and the demand for new or realigned services has been informed by the work that has been undertaken/is being undertaken through Best Value reviews of services at both County and District/Borough Council levels.

We have received a report from SITRA on Commissioning Services for Less Welcome Groups. We will as recommended continue to develop the needs assessment tools required to quantify the large amount of unmet need that we believe exists within groups, particularly the hard to reach groups, such as Offenders or people with Substance Misusers, and those groups newly able to access Supporting People services such as Older people who are owner occupiers.

14.2 Service Client Group Information

Building on the work outlined above, we have drawn up a short overview for each service client group identifying the policy context and main concerns. These sections give a sense of the problems to be tackled. They begin to show how Supporting People can play its part in meeting the partners' overall objectives to support more people at home; to reduce anti-social behaviour and crime; to keep people out of unnecessary stays in institutions by earlier interventions; and to make better use of existing resources.

We recognise that the majority of people with support needs do not fit into defined user group categories and that many have multiple needs. For example, the levels of substance misuse and related mental health problems are very high amongst the single homeless. We are committed to commissioning housing related support services which are capable of responding appropriately to the diverse range of needs and issues that people with multiple needs present.

14.3 Older People

Context

The National Service Framework for Older People creates quality criteria and targets to enable older people to access better services in a more equal way. This reflects the changing aspirations of older people. They increasingly wish to maintain their independence, stay in their own home and have choice and control over their own lives.

Increasing numbers of people are living into old age. The greatest rise in the next 10 years will be among those aged over 80, who make the heaviest call on services.   Preventative services are a necessity not a luxury.

Supporting People, linked to the preventative agenda and re-directing existing spend, offers the opportunity to begin to build up low-level practical services and also thereby pay attention to the voices of older people themselves.

Issues arising from the Consultation on Needs

The consensus is that practical additional help should be made available as pensioners get older e.g. housework, maintenance and gardening.

Around 95 per cent of all older people live in mainstream housing, much of it owner-occupied. It is possible to extend support to owner-occupiers but there is as yet no new money, to provide support to anyone currently unsupported.

Supporting People promotes the desirability of giving more, low intensity support and the opportunity with Primary Care Trusts to commission or boost low level housing-related support services that have a beneficial and preventative effect: housework, gardening, home maintenance, decorating and repair and handy person services. Floating support can help to: -
* Meet the owner occupier requirements
* Create more short break opportunities for those caring for older people
* Facilitate Hospital Discharge by providing intensive floating support

There are concerns about the quality of existing supply of sheltered housing. Many Local Authorities and RSL's have identified problems with the large number of bed sit schemes, which are increasingly hard to let, have upper floors and no lifts. The location of schemes does not always allow for easy access to the community or the tenants wider social networks.
There are increasing numbers of older people with mental health problems living in sheltered housing. Sheltered housing services are increasingly required to provide for the needs of an ageing population. Difficult decisions will need to be taken to reshape provision to better meet local needs.

Extra Care sheltered housing schemes prevent people moving into residential and nursing homes when the older person is not ready to or does not require it. Housing and social services authorities in Essex are working on or have

already identified need for increased provision of very sheltered/extra care accommodation. Very sheltered housing provision fits very neatly with the 'Supporting People' proposals.

Social Services are looking to develop a pipelines scheme for a Floating Support service for Older People with Mental Health Problems as this is a major gap in the support services for Older People.

Home Improvement Agencies (HIA's) and handyperson services are valued. There is full countywide coverage due to the collaboration of the Local Authorities and other partners. In future we will look for ways to expand the capacity of the schemes and minimise the overheads in running services.

14.4 People with a Learning Disability

Context

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 Learning Difficulties Partnership Board is currently working towards ensuring that the requirements of the Government's Valuing People paper are being met. Through the Way Ahead Strategy, Essex has, over the past three years, placed fewer people in residential care and supported more people in their own flats or houses with tenancies or home ownership. The pace of this change will need to increase, recognising that different people require different approaches to their housing. These approaches will be through Supported Living and need to include:

- Tenancies with floating support, concierge and intensive Community Support amongst the options to support people; Shared ownership; Owner occupation

- Housing locations which enable people to sustain their existing friendships and social networks

- Access to local facilities including work and education opportunities and being able to move freely around their chosen community

- Housing locations and support arrangements which incorporate assessment of risks and vulnerability of the person moving

- A range of housing options, which enable people to have choice of who they live with.

Strategic Issues

There is a high need in the majority of Local Authority areas and a pan Essex approach to affordable housing would ensure consistency of access to services across the County and improve our prospects of bidding for capital against Regional Priorities.

- **People living in Out-County residential placements**: Essex currently has a large number, around 600, of out of County placements. 250 have requested a move back to their area of origin.

- **Adults seeking independent living**: In addition the number of 18+ people with learning disabilities requiring housing with support over the next 2 years is 228 across the County.

- **School Leavers and those in Transition:** The number of young people with learning disabilities going through transition looking for housing with support across the County over the next 2 years stands at 100, with 53 in 2003 and 47 in 2004. Many young people and their families are unaware of what choices and opportunities are available. A high proportion of these young people would benefit from temporary placement e.g. 18-24 months in schemes where support is provided to help them gain the skills required to live more independently in the community. Strategic schemes serving more than one District would provide a continuing resource to be available for young people going through transition.

- **Older family carers**: There is no consistent system to identify and plan long term housing needs with people who live with older family carers. This is crucial, as we know that the length of time these family carers can continue caring for their son or daughter is limited.   There are 343 clients aged over 45 and 211 clients aged over 50 currently living with older carers. Supported Housing will be required for a high proportion of these over the next 20 years. Social Services are working towards moving people on from the family home at a younger age to reduce the incidence of crisis intervention.

- **Housing Supply:** Local Authorities have been working more closely with Social Services and Health partners to gain access for people with Learning Disabilities into their own and RSL partners general housing stock and continued access will be required. However, for a number of clients dispersed independent housing does not meet their needs.

14.5 People with a Physical Disability or Sensory Impairment

Context

Our aims are that 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. To promote 'independent living' – that is choice and control resting with disabled people – as the value base for future services for people with physical and sensory impairments.

It is estimated that more than 1 in 6 adults have some form of impairment – that is 215,800 people in Essex.

Strategic Issues

Across Essex, there are highly variable level of reported demand or need from households requiring specialised dwelling or wheelchair access.

The need for specialised housing schemes for some groups has still to be fully scoped. The majority of people with a Physical Disability or Sensory Impairment will wish to live in their own home but for some a supported housing scheme may be a necessary transitional step from residential school, hospital or residential care.

Residential models of service for the blind and profoundly deaf do not offer the level of choice that people want for themselves. Future assessments of need will have to respond to these changing expectations.

Access to move on accommodation is one of the biggest barriers to an independent life in the community. Disabled people often require an extra bedroom for a live-in carer, which makes it harder still to secure move-on accommodation.

There is a clear need to work on developing single assessments and follow the social and not medical model of disability - housing will play a key part in this. Similarly, there is the need to develop more choice and control for people choosing their housing support.

It is clear that Home Improvement Agencies can be very cost effective because adaptations can reduce need for intensive support.

The important role of carers will need to be included in future priorities. The origins and means of funding for Supporting People mean that their needs have not so far been recognised. However if carers are not given support they may give up caring with consequent heavier burdens on social care services. Respite care covers the whole care and support continuum.

14.6 Young People at Risk

Context

Vulnerable young people will tend to leave home at an early age and lack the skills, education or opportunities to make a successful transition to adulthood without further support.

Whilst it is difficult to be accurate about the numbers we believe that some 500 care leavers, 40 young Offenders and some 120 –130 young people on the Child Protection Register may be in need of housing.

Local Housing Authorities are to be required to draw up Homelessness Strategies including a review of local provision to tackle the problem. The Government are presently consulting on extending the Priority Needs for accommodation to young people leaving care and vulnerable 16 & 17 year olds who are unintentionally homeless.

The Ministerial Strategic Steer for Supporting People reinforces the message that the Government is keen to see the provision of support extended to those clients whose needs have historically been less well met. This reinforces the need to link these strategies together in developing Supporting People to ensure that young people at risk can access a comprehensive range of support services.

Strategic Issues

Young People say they want housing near to town centres, preferably in 1 and 2 bed-flats, help with the deposit and rent in advance, help with buying furniture etc, support in accessing training, and help with budgeting, filling in forms etc. They also need support outside the normal office hours of 9-5.

Young People with complex needs are likely to be well known to the specialist services and so with some effort at co-ordinating information we can identify their accommodation needs. However, this group are difficult to help because of their previous experiences of failing services, their attitudes to services and their own problems, including lack of insight into their abilities, chaotic lifestyles, substance misuse, offending behaviour, "conduct disorders", etc. This makes it difficult to access appropriate accommodation and increases the likelihood of further offending.

The clear issues that have emerged are the need for more refined cross agency working, more robust planning processes, quicker access to ordinary housing with support for 16 & 17 year olds, more emergency short stay accommodation, supported hostels and lodgings with 24 hour support and floating support services that offer a range of intensity of support.

There are no routine data collections, which will capture the required planning information on the accommodation or support needs of the vulnerable 16 & 17 year olds. Essex has previously supported an annual one-off single homelessness survey but it was discontinued by NACRO because of a shortage of funds. Consequently, we will be re-visiting the need to undertake a study of some basic information about the accommodation needs and "disposal / referral" decisions taken by the agency in touch with the Young Person.

14.7 People With Mental Health Problems

Context

The majority of people with mental health problems live in general needs housing in the community. However, a significant minority become homeless as a result of their mental health problems and in some instances their homelessness is linked to prolonged hospital stays.

The National Mental Health Strategy, National Service Framework, new Mental Health Policy Statement for implementing the NSF and the mental health component of the NHS Plan set the major policy direction. It is imperative that housing and support are seen as an integral part of the local multi-agency approach to meeting the NSF targets for Mental Health.

A range of different types of accommodation and support are required to maintain people living in the community. The principles for the provision of housing and support are that it should be safe, sound and supportive

The gross need for Essex has been estimated at 1,000 properties comprising 250 independent flats or bed sits, 500 clustered flats or minimally staffed homes, and 250 supervised hostel places using research by the National Schizophrenia Fellowship.

Strategic Issues

Currently there is a gap in schemes offering support to recovering clients who work or want to work. Clients can't afford to stay in supported schemes but without the support they can't function well enough to work hence catch 22. Supporting People will overcome this problem as it will lead to splitting the cost of support from the rent and for people living in temporary supported housing support will be provided free of charge.

Those people with a dual diagnosis with the most serious needs present with chaotic lifestyles. Typically they move in and out of accommodation and are difficult to help. A range of accommodation is necessary, including hostel type accommodation, housing linked to assertive outreach and more secure placement. Services are needed to assist with stabilising lifestyles, providing appropriate support with a focus on harm minimisation and risk reduction.

There are over 1,000 single homeless people across Essex. At present there is limited co-ordination across agencies and closer co-operation between providers is needed. More systematic support is needed to assist and advise staff working in homeless shelters.

People with personality disorder frequently require special support because of their history (often involving abuse). They are frequently in trouble with the criminal justice system, unemployed and lead very chaotic lifestyles.

Crisis (safe) housing and respite provision is needed for both service-clients and carers. This provision is needed for extremely vulnerable people, people not known to agencies, people with dual diagnosis and transient people.

There is general agreement that significant increases in Floating Support are needed. Generic floating support schemes providing intermittent and low level sustainment services are needed for people successfully completing a support plan but requiring ongoing contact to maintain their housing.

Specialist floating support schemes should be available for people with severe mental health problems, in all tenures. 24 hour supported accommodation should be available in each locality. Specialist housing and support services should be developed for people with complex needs.

There needs to be a way of maintaining tenancies whilst people are in hospital. More effective arrangements are needed for people who have been discharged from hospital or are waiting to be discharged from hospital.

To pick up those individuals not eligible for help from a Community Mental Health Team low level support schemes are needed with referrals straight from primary care.

Improvement in needs mapping for this client group is a priority.

14.8 Offenders and those at risk of Offending

Context

The overall policy objectives for the National Probation Service emphasise the appropriate supervision of offenders in the community; the protection of the public; and the assessment and management of the risk presented by offenders to past victims and to potential victims. An additional aim is the reduction in the risk of further offending.

The Area Plan for Essex for 2001-2002 particularly identifies: -
- Early identification of Accommodation needs for High Risk Offenders
- Developing a Public Protection housing protocol
- Developing target and risk measurement systems in relation to Housing.
- Integrating use of the Probation and Bail Hostel into a systematic provision for high risk offenders.
- Work to ensure that offenders have appropriate access to SP provision.

Offenders are particularly disadvantaged by their histories and by perceptions of public risk resulting in the low level of access to existing provision. The Ministerial Steer for Supporting People emphasises the need to develop services for this group. The Homelessness Act 2002's requirement for local housing authorities to prepare homelessness strategies should help to identify new services to fulfil the different strategic aims of the various local strategies.

Strategic Issues

Ex-offenders are a very disparate group, and a disproportionate number of offenders and ex offenders are also homeless people, socially excluded, unemployed, suffering financial difficulties, victims of abuse, physically and mentally unwell, lacking educational qualifications and basic skills, from black or minority ethnic communities, young, substance and/or alcohol misusers.

Considerable good multi-agency working has taken place in Essex to develop the draft public protection protocol for housing serious offenders, and for Information-sharing between the Police and housing providers.

There is a severe shortage of accommodation and that which is available is not always suitable. There is very little choice available to the ex-offender and access the private-rented sector rent deposit guarantee schemes are required. Move on accommodation is also needed.

The disrupted lifestyles of some offenders increase the need for housing that can be accessed quickly, directly and that is affordable. There are insufficient 'crisis' beds and night shelter accommodation across the county.

Homelessness or poor housing and re-offending rates are often linked but there are still difficulties in matching up priority systems for re-housing with prison discharge arrangements and with ex-offender rehabilitation programmes. Direct access or crisis provision is likely to be needed by persons who have problems involving several different agencies giving the opportunity to develop a more planned response.

Staffing levels need to be higher in projects to enable them to be able to provide a sufficiently safe and supportive environment. Higher support schemes could deal with those excluded from existing services.

Self-contained accommodation is needed but <u>also</u> some shared as well. More schemes are needed for those in early stages of overcoming substance dependency and for those who would benefit from a 'harm reduction' facility. This is applicable to offenders subject to Drug Testing and Treatment Orders.

14.9 People with Substance Misuse problems

Context

This strategy is concerned with those people whose ability to maintain an independent lifestyle is at risk or those who are seeking help to live more independently in the community. Others will not want to change or seek help.

Feedback from clients is that there is some good provision within Essex hampered by lack of co-ordination and partnership. The Home Office and DTLR have published "Tackling drugs in rented housing", which seeks to

stimulate provision for this client group. There is also a Ministerial Steer to identify ways of increasing support for this client group.

We know that many people using drugs and alcohol are living in their own homes. Yet, there is a lack of quantitative data about support needs on which to plan. We know little of the level of preventative work that might enable people to stay in their existing accommodation.

This strategy emphasises improving our knowledge of needs as well as broadening the spectrum of available services. Further work to identify basic service standards is underway.

Strategic Issues

Key issues to emerge from our consultation work are: -

- People are facing multiple problems and need help to maintain tenancy.
- People need somewhere to live – to be able to recover and to sustain their recovery.

People misusing drugs are sometimes characterised by a chaotic lifestyle. They are potentially disruptive and unwelcome neighbours. However at the point they seek help there are often no services available or services are in an unacceptable setting. We need appropriate accommodation and support properly co-ordinated. Drug action cannot be just housing support. There is a need for effective partnerships. The apparent success of Drug Treatment and Testing orders could offer additional benefits if used in partnership with RSL's.

The hidden costs arising from lack of or inadequate provision are not always recognised. There is a need to spend to make the savings that will come from reduced tenancy breakdown, lower use of acute services and reduced drug related offending.

Many services do not exist. Where they do exist, there is inadequate publicity and there is a variable level of access. There is no consistent approach across the County to assessment or prioritisation in social housing allocation process. There are not close enough links between Community Drug Action Teams and housing/homelessness teams.

Night Shelters are inappropriately bearing the brunt of immediate housing demand, being the first stage back for clients in engaging with services Move-on accommodation is needed. This would provide the link between institutions, direct access hostels, rehabilitation and independent living.

The existing small-scale of floating support provision in the County is based on a resettlement model delivering an average of 2-3 hours of support per week for a period of 9-18 months. Other models are needed.

There is little specialist provision for this group. There are no specialist schemes providing for direct access when individuals are ready to try to make a change. There is little or no specialist, small-scale provision for people with a chaotic lifestyle.

14.10   **People Escaping Domestic Violence**

Context

Essex has been well served by its network of existing domestic violence services, linked together in the Essex Association of Women's Refuges. Current service users do value Essex's existing network of refuge provision very highly.

1 in 4 women will experience domestic violence in their lifetime. Many men who abuse women also abuse children. The overlap is estimated at between 45% and 70%.   On average a woman will suffer serious abuse and assault around **35 times** before she reports it to the Police.

Potentially, this information is key to Supporting People's relevance to wider strategic priorities. Supporting People is about *prevention:* investment in support services at the right time can help prevent costs falling on other services, such as the Police or NHS, and aid achievement of the objectives of wider Community Plans.

Recent SITRA research identifies existing exclusions from refuges in Essex: these are recorded as being those with additional needs such as mental health, drug or alcohol. Secondly, it records providers' views on 'missing services': drop in/advice services for women after they have left refuge and moved on were particularly highlighted. A focus group with service users highlighted the need for better access and referral arrangements – particularly via the Police and NHS.

Women did recognise the potential loneliness facing them when they moved out and argued that people need on going befriending/ drop in services. This is at least consistent with the evidence from the focus groups, and argues in favour of floating support type services being a development priority. Some kind of floating support/ day centre/ child care group hybrid service would be a more accurate reflection of expressed need.

Children's services are, in general, ineligible for Supporting People Grant. Yet it must be recognised children account for 2/3rds of residents in refuges; support services for children are often charitably funded or paid for by local social services and / or health funding streams. Similarly drop-in and outreach services are not eligible for Supporting People funding. It is vital that District Authorities and Social Services continue to fund these elements of the overall service to the victims of Domestic Violence.

Draft Vision and Statement of Intent

Essex wishes to promote a situation where all women and children suffering from domestic violence:

- Are given the maximum possible help to be able to stay in their existing accommodation wherever possible. This may involve:

  - o   Making fast track arrangements for injunctions to exclude violent partners.
  - o   Educating associated professionals such as the Police and NHS staff how best to link into the range of services for victims of domestic violence in Essex

- Can immediately access good quality emergency housing and support services in a place of safety should they feel forced to leave the family home.

- Have access to good quality childcare provided in such a way as to best enable women fleeing domestic violence to maintain, or take up work if appropriate

- Can access mainstream health, social care and educational services with the minimum of difficulty

- Provided with a range of suitable opportunities for moving out of emergency accommodation into a more stable housing environment as soon as practicable and to ensure that such moves are not delayed for want of appropriate support services available in their new homes.

- Can move as quickly as practicable to a situation where all Essex domestic violence services fully meet the national standards framework for such services promoted by ODPM. These standards will provide a basis from which both commissioners and providers can frame discussions over funding improvements in quality levels if deficiencies exist.

Strategic Issues

The information on needs such as quoted above will be used during scheme reviews to identify required changes to existing practice, possibly on the basis of additional funding, or definite development priorities for new services. .

We will seek to work within other statutory agencies – for instance, Children's Services – to ensure not just joined up thinking but joined up action.

It is vital that this work is taken beyond the boundaries of Essex itself. Women fleeing domestic violence do not stop to think about local government boundaries. We know that, year on year, around 1/3rd of all users' of refuge

services in Essex, Southend and Thurrock come from outside these areas. We can only imagine there is a balancing flow of Essex women out of county.

Our aim is to sustain the best possible network of services for service users from Essex, or who come to Essex, but without co-operation on a cross authority basis this will not be achieved.

14.11 People Living With HIV And Aids

Context

The number of people diagnosed as HIV positive is continuing to rise. The Public Health Laboratory Service stated an increase of 7% between February 2000 and February 2001. 3,300 people were tested positive in the UK in 1999. These represent new cases. The number of people with HIV in the UK is set to increase by 50% over the next 5 years. (The Terrence Higgins Lighthouse Trust, 2000.)

It is generally accepted that people may choose out of area testing (NB the figures are now collated by post code, so even if people go out of the area for testing, they are still included in the Public Health figures for their home authority) or who decide not to be tested. Also many people access services in London and elsewhere out of Essex.

There are effective treatments such as the anti-retroviral therapies that did not exist 10 years ago. This has reduced the immediate pressure on accommodation-based services, as people are able to prolong an independent lifestyle. There is an emerging concern that these therapies may become less effective over time. For the present it remains true to say that the majority of people want (and are able) to remain at home, with the support of carers and adaptations if necessary. When people are very ill or they go into decline, then they would access health services and hospices.

Health Services and Care agencies report that access to social housing is handled sensitively and sympathetically. There was no sense of a shortfall in provision for this group.

There is no evidence of a need for specialist accommodation for people with HIV&AIDS. It is expected that people's needs will be met through mainstream housing solutions, with floating support and personal care in their own homes where necessary.

The general needs of people living with or affected by HIV&AIDS relate to changes in lifestyle, the loss of income, the need for advice and information, the need for counselling, help in accessing benefits and with general finances, discrimination and confidentiality.

Strategic Issues

The key housing issues relating to people with HIV&AIDS have been well documented in other publications and strategies. These relate to confidentiality, stigma, discrimination, the affect of housing conditions on physical and mental health is a key issue in ensuring that people with HIV&AIDS have access to housing which is appropriate to their needs and which will assist them in remaining independently in the community for as long as possible. Most people living with HIV&AIDS spend the vast majority of their time in the community and not in hospital. They need to live close to sources of community care or health services.

The issues that need to be reviewed by all partners in the Supporting People programme are;

- Should more ground floor properties be made available for people living with the virus? Is there a demand for more 2-bedroom properties that can accommodate carers?

- Do people living with HIV&AIDS have adequate (and quick) access to adaptations and adapted properties?

- Is there a need for support services specifically aimed at older people with HIV&AIDS? 11% of all people who have received an AIDS diagnosis in the UK were aged 50 or over at the time of diagnosis. (Community Care).

7.12 Homelessness

Context

Being a large county, Essex has a range of housing and homelessness issues to address. Basildon or Colchester will have different types of homelessness issues than Maldon or Uttlesford, which are largely rural in character.

Beyond those people sleeping rough, many single people without a home find themselves in something of a grey area, and may be referred to as 'hidden' or 'invisible' homeless. It is difficult to quantify the scale of the issue either locally or nationally.

The Homelessness Act 2002 requires housing authorities to prepare strategies to address the extended number of groups classed as having a 'priority need'. These changes in legislation may place increasing pressure upon local authorities, as they will have to arrange suitable accommodation for these groups if they are homeless through no fault of their own.

Particular groups facing an increased risk of becoming homeless include those leaving care, drug clients, people leaving mental institutions with mental

health problems, those leaving the armed forces or prison. Homelessness is closely intertwined with other aspects of social exclusion.

Strategic issues

The strategic issues needing to be addressed are: -

- Foyers having low levels of unemployed people and having differing criteria throughout County
- Restrictions on access to night shelters and emergency access accommodation
- The high cost of housing generally and or rents in the private sector and the decline ins availability of private rented housing
- The shortage of self contained, one bed roomed accommodation in some districts
- Housing Authorities forced to resort to the use of bed and breakfast accommodation for homeless families and single people.

The following gaps in service have been identified: -

- Lack of direct access to hostels for non-statutory homeless
- Limited or no provision for homeless people with an associated special need, e.g., mental health, drug / alcohol, behavioural problems
- Families experiencing 'revolving door' homelessness, which hides underlying problems requiring support from other agencies
- Accessing furniture provision and welfare rights advice, lack of move on or lack of desire to move on due to finances
- Provision for 16 / 17 year olds.
- Shortage of accessible accommodation for homeless people with mobility problems since many hostels do not meet accessibility standards

There is tension between the statutory agencies responsibilities and the existing protocols are in need of review. There is a clear need for help in maintaining tenancies via floating support, yet floating support schemes can cause problems to landlords if contacts with Probation, Social Services, etc break down.

14.13   Teenage Pregnancy

Context

The Social Exclusion Unit launched a Teenage Pregnancy Strategy and Action Plan in June 1999.

It set out two main goals:

- ◆ Reducing the rate of teenage conceptions (with the specific aim of halving the rate of conceptions among under 18s by 2010).
- ◆ Getting more teenage parents into education, training or employment, to reduce their risk of long term social exclusion.

The Government's policy is that, by 2004, all under 18 teenage lone parents who cannot live with family or partner should be placed in supervised semi-independent housing with support, not in an independent tenancy. Suitable accommodation will normally include on-site support. Where this is not feasible, floating support should be provided. This would not be appropriate for teenage parents with intense support needs. The revised Code of Guidance on Allocation of Housing and Homelessness reflects this policy.

Teenage parenthood often results in problems for the mother and child. 40% of teenage mothers suffer from post-natal depression (a rate 3 times higher than for other mothers). The infant mortality rate for babies born to teenage mothers is more than 50% higher than the average. Birth weights are more likely to be below average for children of teenage mothers and 1 - 3 year olds are twice as likely to be admitted to hospital as a result of an accident or gastro-enteritis. Teenage parents are more likely than their peers to live in poverty and unemployment.

Strategic Issues

Essex's Strategy recognises that not all young people are the same and that they come from different socio-economic, cultural, religious and ethnic backgrounds. The strategy is pragmatic in recognising the realities of young people's lives, and the importance of providing support and services while at the same time not condoning sexual behaviour outside the law.

Tackling teenage pregnancy is not the responsibility of the health service alone. It requires input and commitment from a variety of agencies, both statutory and non-statutory. The Supporting People programme has an important role to play in successfully implementing the strategy.

It is also recognised that the highest levels of teenage pregnancy occur in areas of deprivation and poverty. Whilst all areas in Essex are receiving attention, the emphasis is being placed in those areas of greatest need.

Braintree, Castle Point, Chelmsford, Epping Forest and Rochford are reported to have an adequate supply or to be on target to achieve this by 2004. Basildon, Harlow and Maldon are looking to increase the number of units. Brentwood, Colchester and Tendring have the position under review whilst Uttlesford has no plans for providing supported housing for this user group.

Local housing authorities are identifying priority needs for new supported housing schemes in time for the ADP bid round in October. This will be the

last opportunity to bid for new build or refurbished schemes in time for them to come on stream with access to 'pipeline' Supporting People revenue funding.

Local information has shown that young people often do not know where services are or are uncertain how to access them. This will be addressed in part through the impact of the national media campaign and will be enhanced by specific actions in the local media strategy.

We recognise the importance of reviewing the needs of smaller groups at higher risk and/or harder to reach, for example: Black and ethnic minority communities, Asylum seekers, Travellers, People with learning difficulties, People with disabilities (including physical and sensory), Those outside of mainstream education – EOTAS (education other than at school), Young offenders, Children in, and leaving, public care.

Money has been made available to recruit a Partnership Co-ordinator based with the Connexions Partnership in Essex to co-ordinate the linking of service provision between Health, Social Services and Housing.

In some areas, the TP Local Implementation Co-ordinators have been slower to engage with housing than they would have liked. In other areas housing officers have bid for and secured supported housing schemes for young mothers and families. The Supporting People Team have made good links with the Teenage Pregnancy Local Implementation Co-ordinators.

7.14 Traveller Families

Context

The County Council is responsible for the provision and management of twelve permanent sites for Travellers across the County, accommodating over 200 Gypsy / Traveller families. There are also many unauthorised encampments that resort to the County during the year.

There is clear evidence from a number of agencies that travellers experience social exclusion and deprivation as well as difficulties in accessing services and support. The children have low levels of educational attainment. There is a high level of unemployment and benefit dependency. There is poor health and significant clusters of poor mental health and substance misuse problems. Travellers have been identified as a specific target group for help within the Teenage Pregnancy Strategy.

The County site managers have been identifying the level of support they provide over and above basic site management duties such as rent collection. Some sites are difficult to manage as some families present particular challenges. We are therefore looking to enhance the level of support whilst enforcing site rules and working with the Police to enforce the law.

This work is broadly concerned with managing behaviour on the site to reduce problems and to encourage a more stable lifestyle; encouraging engagement with local services including schools and Educational Welfare; dealing with rent arrears and other welfare issues. The Warden's role also makes a contribution towards crime reduction in the area.

Strategic Issues

The future development of Supporting People services for Traveller families will facilitate, where appropriate: -
- Moving from a nomadic to a settled lifestyle
- Moving from site to mainstream accommodation
- Reducing the dependency on Benefits by developing life and vocational skills.

Enforcement of the laws is part but not the whole solution to managing difficult Travellers sites and making a sustainable long-term difference to reducing the local communities' fear of crime and to the quality of life for the Travellers themselves. This work requires more support for Travellers.

7.15 Summary and Conclusions

Essex has a wide range of existing supported housing services. There are however many gaps, which will need to be addressed. For example, there is:

- No floating support for older people with mental health problems
- Inadequate provision for offenders and those at risk of offending
- No specific accommodation-based services for drug users
- A lack of support for people with a learning disability
- Limited provision of support for people with complex needs or more chaotic lifestyles
- Inadequate range of services for people with mental health problems
- Little direct access provision for single homeless with support needs
- A lack of supported housing for people with a physical disability or sensory impairment
- Lack of access for move-on accommodation for all service user groups
- A need to expand the general tenancy support services if we are to prevent more abandonment and homelessness than is unavoidable

Support services will need to be extended to a range of service users who have not previously had access to housing related support services due to their tenure and the funding regime. This is particularly true of private sector tenants; leaseholders and owner-occupiers who need such support to maintain their independence.

8 Strategic Links and Cross Authority Groups

8.1 Links with Wider Strategic Objectives

8.1.1 Supporting People and the Essex Community Plan

Essex is at a relatively early stage in preparing its Community Plan.   The work of formulating a community strategy is building in stages on the success of the many valuable partnerships, which already exist.

The County Council has produced a consultation paper, which sought the community's views on:

- The most important issues affecting the quality of life in Essex over the next twenty years.
- A vision of what the future of Essex should be.

Once we have crystallized the vision in an agreed community strategy, the next step will be to develop an action plan to achieve measurable results.

The most relevant issues to the Supporting People programme are: -

- Reducing crime and the Fear of crime
- Promoting healthy active lifestyles
- Good quality, accessible health services
- Support networks for longer lives and independent living
- ? social inclusion?

The Supporting People strategy and its objectives are being drawn into the Community Plan for Essex and into the Essex Approach – the County Council's statement of its strategic objectives.

The Shadow Strategy for Supporting People in Essex will contribute directly to achieving the County Council's Strategic Objective to make Essex a better place to live and work as well as to the recently agreed strategy for tackling Social Exclusion. It 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.

Similarly, each of the twelve Borough / District Council Supporting People position statements, which underpin this strategy, are linked into the community planning processes within each authority.

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

8.1.2 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, targets and objectives set out in these strategies and policies.

This strategy identifies the wide range of accommodation and related support services enabling people to live healthier lifestyles, preventing crises and reducing risk.

County Managers are working on a number of new pipeline schemes, which will 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.

8.1.3 Housing Strategy

The Supporting People strategy and its priorities are directly linked to the twelve local housing strategies. Each Borough or District Council has produced its own Supporting People position statement incorporating local level needs and supply analysis.

8.1.4 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. This is reflected within this strategy by the prioritisation of developing new services and expanding existing services to meet this need.

8.1.5 Regeneration & Renewal

As detailed above, the Supporting people strategy is directly linked to the both the Community Planning at a 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

8.1.6 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 form black and minority ethnic communities.

Similarly, the consultation and information gathering exercises undertaken as part of producing this strategy have failed to identify any clear picture of the needs of black and minority ethnic communities.

However, as part of the dialogue we are developing with providers in the preparation of contracts for services, we are discussing the approach that providers of existing and pipeline services take to meeting a wide range of cultural and religious needs.

In addition, the Essex Housing Officers Group has commissioned research into the housing and support needs of black and minority ethnic groups. The outcome of this research will provide the basis for investigating the development of specifically targeted Supporting People services in Essex.

8.2 Cross Authority Groups

8.2.1 The Essex Situation

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.

In the specific local context there are three levels in which cross authority issues will emerge:

Links With Essex Unitary Authorities– Thurrock and Southend are relatively recently established unitary authorities and therefore will be creating their own *Supporting People* plans and structures. A joint statement between all three authorities has been produced (see below).

The Neighbouring Counties – Hertfordshire, Cambridgeshire and Suffolk all border Essex and a structural link between these Counties and Essex will be developed to compare priorities and synchronise funding. It is possible that this will emerge from the Regional Implementation Group. We are an active member of the group and currently chair the meetings. The Group is working up a regional response to the National Training Framework to develop shared training workshops for Supporting People staff and providers.

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.

8.2.2   Essex Area Cross Authority Statement

This draft statement has been produced by the Lead Supporting People Officers for Essex, Southend and Thurrock for approval by their respective Commissioning Bodies.

The key concerns for cross-authority services relate to single homelessness and domestic violence services. There is one supported housing scheme for people with mental health problems based in Southend but for which Essex County Council has two nomination rights for people from Castle Point and Rochford. We are committed to maintaining access and the appropriate level of support to this service.

The Essex Association of Women's Refuges supports seven refuges across Essex, Southend and Thurrock. The funding for the support costs for the refuges has resolved to the individual Commissioning Bodies with the creation of the Transitional Housing Benefit Scheme. Nevertheless, the refuges continue to see themselves as part of a wider network. This is crucial to the effective delivery of domestic violence services which may require a woman and her children to move out of their local area to achieve safety.

There is considerable movement of single homeless people from mid and south Essex as well as Thurrock and some London Boroughs into Southend. The Palace Hotel and the Homeless Action Resource Project – Night Services (HARP), previously known as Southend Night Shelter, offer much needed accommodation although the quality of the support provided needs to be reviewed. Essex County Council and Thurrock Council contribute from voluntary grant funding toward the Homeless Action Resource Project – Day Services (HARP) previously known as Southend Homeless Centre. It will be important to review the long-term provision of this service in Southend with a view to developing more local services where appropriate.

Southend and Thurrock helped to establish the Essex Strategic Reserve Programme which provides for development of supported housing schemes for service user groups that District Housing Authorities would not be able to justify or afford to develop on their own. The two unitary authorities withdrew from the voluntary partnership at the time of local government reorganisation.

The preparation of the Supporting People Shadow Strategies has re-awakened the interest in possible cross-boundary working. This is particularly opportune to ensure that the needs of vulnerable people are not overlooked in the renewal strategies emerging as part of the wider Thames Gateway developments. The Supporting People Teams are encouraged to work on identifying appropriate joint commissioning proposals for both ADP capital and new SPG reserve funding.

8.2.3 Cross Authority Services in Essex

The Office of the Deputy Prime Minister will be producing a Cross Authority baseline survey for Essex later this year.

We will then need to insert a new table from the Supporting People Interim Local System (SPINTLS) showing cross authority group services in Essex, the client groups covered, the funding streams & authorities participating in the service.

9 Consultation and Involvement

9.1 The Policy Context

We recognise the valuable and critical contribution that tenants / service users can make. This applies both in decision making, as well as in the consultation processes, including scheme reviews, Best Value Reviews, and the development of new services.

Tenants and Service users have told us that they want to be consulted about their services, but they also want to be involved at the higher decision making level, otherwise they feel excluded. In recognising this, we have already made the decision to invite service user representatives to participate in our decision making and planning groups. In addition an annual Countywide Inclusive Supporting People Forum has been set up to consult with a wide variety of partners as well as Tenants/Service users.

At Borough or District Council level, there are many local groups and we will build on their involvement and participation at local level to 'feed' into the overall structure of the participation strategy. This will be a key part of the work in developing the consultation framework.

9.2 The Essex Approach to Participation

We will be setting up of a Tenant/Service Client Strategy Development Group (which will comprise principally of Tenants/Service users lead by an Officer from the Essex County Council Supporting People Team), the initial purpose of this group will be to: -

- Develop the draft strategy for consultation.
- Develop a consultation framework
- Seek nominations of representatives for membership of the Chief Officer Steering Group
- Develop the local approach to the promotion and provide significant encouragement for groups to become involved at the local level.
- ensure that minority groups' needs and views are represented, and equality issues are addressed.
- ensure that difficult to consult groups, such as people sleeping rough, women escaping domestic violence, black and minority ethnic communities and others views are represented.

There are very many local groups across Essex, including Tenant and other Service User Forums, it will be important not to add to the complexity of local arrangements, or to add to the 'consultation overload'. It is important to ensure that Supporting People is put on the relevant agendas and discussed by the various groups the across the county, such as the OIL Housing Sub group, within a structured timetable.

10 Services Quality and Reviews

10.1 Review Process

All local authorities will be required to carry out periodic scheme reviews of all services funded by Supporting People. In the period from 1 April 2003 until the first scheme review all services will be contracted under an interim contract arrangement. Once the initial scheme review has been completed a decision will be made on whether to renew the contract with the provider.

The date of each scheduled review of services will be specified in the interim contract (for 'in house' service providers of the County Council, there will be a service level agreement) with the authority. The initial review must be completed no later than 1 April 2006, subsequent reviews will be on a periodic cycle as appropriate for the period of the contract.

Scheme Reviews will cover the full range of services that are within the Supporting People programme, including support linked to specific accommodation, floating support, home improvement agencies, local authority and other provider's community alarm services.

The scheme review is based on a 3-stage process of evaluation. The first stage of the review is principally a 'desktop' exercise. Services which do not meet the expected standards at the first stage will be subject to a second stage review, aimed at identifying and agreeing actions necessary to achieve changes or improvement to services.

The third stage of the process is to consider the withdrawing of funding and the implications of this decision. It may be appropriate to instigate the third stage if the service does not meet the strategic aims of Supporting People, demand is low, the quality of the scheme is below an acceptable standard, or the cost is unreasonably high.

The initial scheme review is an opportunity for commissioners to work with the provider to examine ways in which the service delivery might be changed to reflect the strategic objectives of the Commissioning Body and/or to improve service to clients. The outcome of the scheme review will form part of the evidence used when the letting a contract for the service is considered.

10.2 Developing the Review Programme

The Office of the Deputy Prime Minister (ODPM) requires all Administering Authorities to submit a three-year review programme in September 2002.

A programme of reviews for each of the areas in Essex has been prepared by our local Supporting People Officers, in consultation with relevant staff at a local level. These local programmes have then been collated into our overall countywide programme.

The methodology for developing the review programme has taken account of the ODPM guidance and been based upon the following broad criteria:

- Sheltered housing schemes will be spread equally over the whole timetable subject to a few local variations.
- Women's refuges in year two as agreed with the Essex Women's refuges representatives
- Home Improvement agencies in year three (as these services do not come into the programme until 2004)
- Floating support in year one
- Community alarms in year one (subject to some local variation)
- By sector
- The reviews should fit into existing review timetables (e.g. Best Value, Supported Housing Management Grant, Probation Accommodation Grant) where this is information is available.

In addition to the above we have considered the risk factor of services. These include:

- High risk clients such as mentally disordered offenders, or those which have committed violent or dangerous offences or are a risk to themselves or others in the community (where this information is known)
- Services where there is little knowledge
- The size of the scheme
- Services where there are performance concerns
- Services, which may not be cost effective.

We have not scheduled reviews funded by Supported Housing Management Grant from the Housing Corporation for residential care or leasehold for the elderly at this stage, as the ODPM are to provide further guidance.

We have consulted all providers, on our proposed three-year review programme for their organisation to ask them if they wish to raise points/issues, which may influence the Commissioning Body's decision on the proposed timetable, because for example of a scheduled best value review.

The ODPM are currently working on further guidance and plan to develop a 'toolkit' for supporting people officers to use for the review process, this should be available before the scheme review programme begins in April 2003.

10.3 Publishing the programme

Once the draft programme has been approved by the Commissioning Body this will be made available to all providers and stakeholders, and published on the Essex Supporting People Web site:
http://supportingpeople.essexcc.gov.uk)

11 The Options and Strategy

We have a number of priorities for the first twelve months of Supporting People. Firstly we are committed to delivering a number of pipeline schemes, which will come into operation after the sunset date for the Transitional Housing Benefit Scheme and ensuring that these are not disrupted by the changeover in funding systems. We have a number of capital schemes, which have already received Housing Corporation or other capital funding. We will submit the necessary returns and expect these schemes to be revenue funded.   They are summarised below and are listed in the attached Annual Statement.

Client group	Type of Service	SP Revenue Cost
Young People Leaving Care	Clustered self contained flats with on-site support	£240,000
People recovering from Drug and Alcohol Abuse	Clustered self contained flats with on-site support	£240,000
People with a Head Injury	Clustered self contained flats with on-site support	£60,000
Women Escaping Domestic Violence	Clustered self contained flats with on-site support	£?

We have also identified a couple of major opportunities for remodelling existing services which are providing an inappropriate institutional service with new supported housing services. An outmoded residential service for People with a Physical Disability in Chigwell is to be completely re-provided as new Supported Housing whilst the residential element of a mixed Sheltered Housing and Residential Care scheme in Manningtree is to be remodelled to provide Extra Care Sheltered Housing. The necessary capital funding has been identified and pipeline bids will be submitted.

Agencies are identifying further capital bids for Supported Housing schemes against the October 2002 round of Housing Corporation ADP funding. Local Authorities and Housing Associations are working hard to finalise our programme of deliverable schemes, which will stand a good chance of being funded under the Supported Housing Regional Investment Priority Theme, whilst meeting an identified priority need as set out in the Shadow Strategy.

Discussions are also continuing with the County agencies and the Primary Care Trusts to identify possible matching revenue funding for developing new General Counselling and Floating Support schemes for a variety of service user groups. It is still too early to report the scope of such a programme but we anticipate making a number of bids for revenue only pipeline funding.

We are keen to ensure that decisions about re-modelling services are taken in a strategic context and at a pace that is appropriate for service users, carers and service providers. This has limited the number of schemes coming forward before April 2003.

We have no evidence that our providers are inefficient or not delivering quality support services but we will be reviewing all schemes with an eye to improving the value for money of our support services. We are also keen to explore any opportunities that address our stated priorities and offer a chance to improve the quality of service for users.

As demonstrated in sections 6 and 7 above, we have undertaken considerable work to establish the supply of supported housing in Essex and to assess the needs and priorities for individual service client groups. The action plan for each category of service users and the priorities for new service developments are set out in the table below:

Service Client Group	**Action Plan and Priorities**
Older People	• Work with Locality Planning groups to improve our knowledge of need • Work with PCTs to develop 'low level' support services across all occupancy types, including developing Stroke/rehabilitation housing and support, developing short-term housing and support post hospital discharge through floating support or established accommodation • Work with social services, health and housing authorities/agencies to develop extra care sheltered housing schemes in line with local District / PCT level reviews and to develop services for older people with mental health problems. • Work with partners to expand the capacity, scope and organisation of Home Improvement Agency Services across Essex.
People with Learning Difficulties	• Work with housing, health and social care agencies to develop more robust planning partnerships, including the development of better planning information with Housing and Community Support agencies to meet the support needs for people to live in their own homes. • Develop services that better meet the housing with support needs of people whose family carers are vulnerable. • Develop services to better meet the needs of people with dementia for housing with support. • Develop new housing with support opportunities for people currently living in institutionalised settings. • Tender two supported housing schemes under the Essex Strategic Reserve programme for YPLD returning from residential care or schools

Service Client Group	**Action Plan and Priorities**
People with a Physical Disability / Sensory Impairment	• Review the use of existing floating support schemes to move services from support to empowerment in helping retake control of their lives and work with partners to expand the floating support options • Review the need for a Joint Housing Strategy Group or Task Group to work with the Independent Living Advocacy service in developing new options • Re-launch a simplified Supported Housing Index
Young People at Risk	• Encourage RSL's to bid for new Accommodation, which is required now, including Supported and move on accommodation. • Prioritise two schemes (in north-east and south Essex) for young people leaving care as part of the 2003/04 Essex Strategic Reserve Programme. • Work with partners to expand the floating support model of housing across the County. • Develop stronger links with the Connexions Service • Review the need for a Housing Task group to bring together a coherent multi-agency response to the complex needs of Young People at Risk. • Undertake a review the role of the Foyers across the County.
People with Mental Health Problems	• Review the need for a Joint Housing Task Group • Review the access arrangements to existing services to identify opportunities to improve the links with Primary Care Services. • Review the use of existing floating support schemes to move services from support to empowerment in helping retake control of their lives • Work with partners to assess the case for more specialised services • Re-launch a simplified Supported Housing Index • Develop more/expanded floating support places. • Develop support provision for people with complex/multiple needs.
Teenage Pregnancy	• Develop new supported accommodation including Floating Support schemes for those areas which do not yet meet the Government's target • Review the needs of high risk or hard to reach groups • Develop the links with the Connexions Service and the Partnership Co-ordinator to ensure that Young people are aware of the support available to them

Service Client Group	Action Plan and Priorities
Single Homeless People and Homeless Families	• Work with housing authorities to review the extent and appropriateness for direct access/emergency provision for people experiencing homelessness. • Work with partners to expand the range of floating support services and similar tenancy sustainment activities available in the County for those homeless people/families in temporary accommodation and as they are permanently rehoused • Work with partners to establish Supporting People funded services that compliment advice, advocacy and assessment services. • Work with partners to develop Supporting People funded services within private rented sector access services (such as rent deposit guarantee schemes).
People Escaping Domestic Violence	• Expand the refuge provision • Develop the Stay Safe and other floating support schemes for women being re-housed and extend them to people living in their own home • Work with the EAWR to develop Out reach and Drop in Services to complement the SP programme • Work with Learning and Children's Services to fund appropriate child centred work in refuges
People with HIV&AIDS	• Ensure that housing strategies reflect the needs of this group. • Ensure scheme review data collection addresses current providers of supported housing willingness to provide these services. .
Ex Offenders or People at Risk of Offending	• Review the need for a multi agency Housing Task Group • Investigate and develop additional options for housing dangerous offenders safely, in conjunction with the Multi Agency Public Protection Protocol. • Research the need for cross Authority re-housing of dangerous offenders • Work with partners to extend provision for offenders subject to Drug Treatment and Testing Orders • Major extension of floating support schemes for Offenders as required • Essex Probation Service has identified the provision of a Night Shelter in Harlow area as a top priority in 2003/4. • Work with partners to develop specific provision for young offenders

Service Client Group	Action Plan and Priorities
People with Substance Misuse Problems	• Develop a Joint Housing Strategy Task Group • Work with partners to review the access arrangements to existing services and the use of existing floating support schemes • Investigate the case for establishing more specialised services in the County. • Re-launch a simplified Supported Housing Index
People from Black and Minority Ethnic Communities	• Essex Housing Officers Group has commissioned research on the housing and support needs of black and minority ethnic communities in Essex. An action plan and priorities will be developed once this research has been completed and the results analysed.

11.1 Links to the Annual Statement

The action plan and priorities outlined above are reflected in the Annual Investment Statement that accompanies this strategy.

In the Annual Statement this, we detail the plans for new , expanded or remodelled services. Some of these schemes will commence during 2003/04 with pipeline funding.   Others will proceed if an additional 10% of revenue grant is made available, subject to further consideration and final prioritisation by the Commissioning Body.

The table below shows a summary of the new or enhanced services that are incorporated within the Annual Statement

Service Client Group	Services in Annual Statement / Planned number of household units
Older People	Extra Care Sheltered Housing – 170 household units across 5 districts. Floating support scheme for 120 properties in one district. Other – 14 Accommodation based units across two district areas for post hospital discharge rehab/intermediate care.
People with Learning Difficulties	78 accommodation based household units spread across 6 district areas
People with Physical Disabilities / Sensory Impairments	8 accommodation based units, plus access to generic floating support services (see below)

Service Client Group	Services in Annual Statement / Planned number of household units
Young People at Risk	69 accommodation based unit's spread across 11 district areas. One floating support scheme with 16 units, plus access to generic floating support services (see below)
People with Mental Health Problems	26 accommodation based units spread across 3 district areas, plus 56 floating support units spread across 3 districts and access to generic floating supports services (see below)
Single Homeless People and Homeless Families	125 accommodation based unit's spread across 8 district areas plus access to generic floating support services (see below). 38 place targeted floating support service across two districts
People Escaping Domestic Violence	28 accommodation based unit's spread across 4 district areas. 12 floating support units in one district area.
People with HIV&AIDS	No new services shown in annual investment statement
Ex Offenders or People at Risk of Offending	18 floating support units in one district area plus access to generic floating support services(see below)
People with Substance Misuse Problems	36 accommodation based units in 4 district areas.
Teenage Pregnancy	19 accommodation based units in 3 district areas. Access to generic floating support services (see below). 6 space floating support service in one district
People from Black and Minority Ethnic Communities	No new services shown in annual investment statement.
Cross Client Group Services	48 generic floating support units in 2 district areas covering young people at risk, people with learning difficulties, single homeless people, ex-offenders, people with substance misuse problems, people with mental health problems and teenage parents

Overall Priorities

The key targets against which the Commissioning Body will prioritise any new funding to be made available by ODPM are to: -
- Reduce Homelessness
- Reduce Recidivism
- Reduce Delayed Hospital Discharges
- Promote longer independence and choice for Older People

12 Other Innovations

Essex has a long history of joint planning and innovatory work between the Borough / District Councils and County agencies.

The **Essex Strategic Reserve** capital funding system is representative of our innovative approach to cross boundary and multi-agency planning and development.   This voluntary agreement between the local housing authorities, Housing Corporation and the County Council combines the necessary housing capital with Essex County Council property or funding to promote a tendered programme of supported housing schemes, which a single District could either not justify because of too small a population in need or could not afford to develop because of the specialist nature of the service. The scheme has developed over the years to target resources on hard to reach groups as well as other priorities such as Young People Leaving Care.

Essex has long developed the joint funding of a network of Domestic Violence services. We are using Transitional Housing Benefit to extend the **Stay Safe** scheme. This is a specialist Floating Support service to provide support for people who are the victims of domestic violence and who are moving on from the refuges, being re-housed as homeless families or increasingly in future staying put in their family home. The deficit funding released by the use of the Transitional Housing Benefit has been used to develop new Outreach and Drop in Services which users so value. It has also allowed Children's Services to fund the child related work that has become an increasing part of the refuge service over the past few years.

Essex Housing Authorities and RSL's are currently considering the introduction of an innovative common Public Protection Protocol and associated **Housing Relocation Scheme for the rehousing of dangerous offenders**. The draft protocol sets out the approach that all local authorities would take to rehousing the dangerous offender to maximise the public's protection, whilst assisting the Probation service to meet its obligations. This unique Housing relocation Scheme proposes mutual assistance, on a reciprocal basis, between local authorities who have a duty to house dangerous offenders but where the offender needs to be relocated.

We are piloting the development of a **Stroke Rehabilitation** service based on a Floating Support model to speed the return to ordinary domestic living.

Primary Care services provide an important access to engage with some of the hard to reach groups and also can help us identify those people who are at risk of slipping into social isolation or ill health problems but who cannot access mainstream care agencies because of the high dependency tariff they have to operate. We are working with a Primary Care Trust to pilot a general counselling and support service which will be aimed at preventing social isolation and avoidable ill-health amongst older people, people with mental health or substance misuse problems. The service will provide a Floating Support type service **accessible to GP's** for ease of referral to the scheme.

13 Risks & Contingency

The basic principle of our risk management approach is to identify the key events and contingencies which may pose a risk to the continued delivery of quality service and the safety of the service user.

We are developing a strategic risk map, which will identify the different categories of risks and contingencies, their likelihood of occurring, their significance and the management action we will take to mitigate the risk.

The key service risks relate to the physical facilities, service failures and fraud or financial mismanagement.

The plan for Essex involves a range of strategies including: -

Regular dialogue with providers and other funders
Continual monitoring of provider performance
Clear accreditation procedures
Policies and procedures for dealing with suspected abuse, user complaints, staff disciplinary offences, etc.
Robust procedures for dealing with fire ,floods, etc
Diverse market and up to date market intelligence so that Essex is not dependent on a single provider for any specific services

We need to develop crisis management procedures for reacting to the potential collapse of a service or provider to ensure that customers do not suffer as a result.   As the Supporting People programme does not have direct control over staff, buildings or support services, the only route for providing cover in the event of a disastrous collapse of service will be the redirection of money away from the collapsed service or provider to providers and services that have the capacity / capability to provide for the customers at risk.

ODPM are scheduled to publish guidance on risk and contingency planning for Commissioning Bodies in the near future. The Essex Supporting People Commissioning Body will refine its risk and contingency plan and accompanying processes once this guidance is available.

14 Annexes

14.1 List of Supported Housing in Essex Supply Tables

Service Type by Client Group

Service Type by Ethnic Origin

Client Group by Service Provider Type

Client Group Exclusions

Support Provision Capacity Summary

Property Registration Status Analysis

Cross Authority Group Services Analysis

Service Funding Analysis

Service Provider/Accommodation Manager Analysis

Service provider/Landlord Organisation Analysis

14.1.1 Service Type by Client Group

Client Group	Accommodation Based Service	based with floating/resettlement/outreach support	Community or Social Alarm Service	Floating Support Service	Improvement Agency (HIA) Service	Outreach service	Resettlement Service	Total	Percentage
Frail Elderly	173	0	0	0	0	0	0	**173**	**1.1%**
Generic	65	0	420	107	0	0	0	**592**	**3.8%**
Homeless Families with Support Needs	143	0	0	0	0	0	0	**143**	**0.9%**
Mentally Disordered Offenders	0	0	0	0	0	0	0	**0**	**0.0%**
Offenders or People at risk of Offending	0	0	0	0	0	0	0	**0**	**0.0%**
Older people with mental health problems/dementia	0	0	0	0	0	0	0	**0**	**0.0%**
Older people with support needs	10516	0	0	1400	655	0	0	**12571**	**79.6%**
People with a Physical or Sensory Disability	38	0	0	0	0	0	0	**38**	**0.2%**
People with Alcohol Problems	8	0	0	0	0	0	0	**8**	**0.1%**
People with Drug Problems	19	0	0	9	0	0	0	**28**	**0.2%**
People with HIV / AIDS	0	0	0	0	0	0	0	**0**	**0.0%**
People with Learning Disabilities	673	0	0	12	0	0	0	**685**	**4.3%**
People with Mental Health Problems	257	0	0	46	0	0	0	**303**	**1.9%**
Refugees	0	0	0	0	0	0	0	**0**	**0.0%**
Rough Sleeper	0	0	0	0	0	0	0	**0**	**0.0%**
Single Homeless with Support Needs	365	8	0	129	0	0	12	**514**	**3.3%**
Teenage Parents	22	0	0	0	0	0	0	**22**	**0.1%**
Traveller	0	0	0	0	0	0	0	**0**	**0.0%**
Women at Risk of Domestic Violence	97	8	0	46	0	0	0	**151**	**1.0%**
Young People at Risk	364	0	0	0	0	0	0	**364**	**2.3%**
Young People Leaving Care	32	0	0	6	0	0	0	**38**	**0.2%**
Total	**12772**	**16**	**420**	**1755**	**655**	**0**	**12**	**15630**	**99.0%**
Percentage	**80.9%**	**0.1%**	**2.7%**	**11.1%**	**4.1%**	**0**	**0.1%**	**99.0%**	

14.1.2 Service Type by Ethnic Origin

Ethnic Origin	Service Type							
	Accommodation Based Service	Accommodation based with floating/resettlement/outreach support	Community or Social Alarm Service	Floating Support Service	Home Improvement Agency (HIA) Service	Outreach service	Resettlement Service	Total
Any Other Asian Background	0	0	0	0	0	0	0	**0**
Any Other Mixed Background	0	0	0	0	0	0	0	**0**
Bangladeshi	0	0	0	0	0	0	0	**0**
Black - African	0	0	0	0	0	0	0	**0**
Black - Any Other Black Background	0	0	0	0	0	0	0	**0**
Black - Caribbean	0	0	0	0	0	0	0	**0**
Chinese	0	0	0	0	0	0	0	**0**
Indian	0	0	0	0	0	0	0	**0**
Not Stated	0	0	0	0	0	0	0	**0**
Other Ethnic Origin	0	0	0	0	0	0	0	**0**
Pakistani	0	0	0	0	0	0	0	**0**
White - Any Other White Background	0	0	0	0	0	0	0	**0**
White and Asian	0	0	0	0	0	0	0	**0**
White and Black African	0	0	0	0	0	0	0	**0**
White and Black Caribbean	0	0	0	0	0	0	0	**0**
White British	0	0	0	0	0	0	0	**0**
White Irish	0	0	0	0	0	0	0	**0**

14.1.3 Client Group by Service Provider Type

Client Group	Charitable Organisation	Local Authority - Housing Dept	Local Authority - Joint Social Services/Housing	Local Authority - Social Services Dept	LSVT(RSL)	NHS Trust	Other	Private Company	Private Individual	RSL	Voluntary Not for Profit Organisation	Total
Frail Elderly	0	73	0	0	0	0	0	0	0	100	0	**173**
Generic	0	14	0	0	0	0	0	0	0	158	0	**172**
Homeless Families with Support Needs	0	48	0	0	0	0	0	0	0	95	0	**143**
Mentally Disordered Offenders	0	0	0	0	0	0	0	0	0	0	0	**0**
Offenders or People at risk of Offending	0	0	0	0	0	0	0	0	0	0	0	**0**
Older people with mental health problems/dementia	0	0	0	0	0	0	0	0	0	0	0	**0**
Older people with support needs	576	7013	0	0	680	0	0	98	1	2225	1978	**12571**
People with a Physical or Sensory Disability	0	0	0	0	0	0	0	0	0	26	12	**38**
People with Alcohol Problems	0	0	0	0	0	0	0	0	0	8	0	**8**
People with Drug Problems	0	0	0	0	0	0	0	0	0	28	0	**28**
People with HIV / AIDS	0	0	0	0	0	0	0	0	0	0	0	**0**
People with Learning Disabilities	170	0	0	11	0	0	0	34	1	372	97	**685**
People with Mental Health Problems	38	0	0	0	0	0	0	0	29	205	31	**303**
Refugees	0	0	0	0	0	0	0	0	0	0	0	**0**
Rough Sleeper	0	0	0	0	0	0	0	0	0	0	0	**0**
Single Homeless with Support Needs	57	0	0	0	0	0	0	0	0	437	20	**514**
Teenage Parents	0	0	0	0	0	0	0	0	0	22	0	**22**
Traveller	0	0	0	0	0	0	0	0	0	0	0	**0**
Women at Risk of Domestic Violence	138	0	0	0	0	0	0	0	0	0	13	**151**
Young People at Risk	116	0	0	0	0	0	0	0	0	248	0	**364**
Young People Leaving Care	0	0	0	0	0	0	0	0	0	38	0	**38**
Total	**1095**	**7148**	**0**	**11**	**680**	**0**	**0**	**132**	**31**	**3962**	**2151**	**15210**

14.1.4 Client Group Exclusions

Client Group	All offenders	Couples	No specific exclusions: decided on case by case basis	Other	People at risk of self harm	People who misuse	People who misuse	People with a history of	People with arson conviction	People with challengin	People with dementia	People with mental	People with multiple	People with pers	Serious offenders	Women with dependent males over	Exclusions percentage of all Services)
Frail Elderly	0	0	5	0	0	0	0	0	0	0	0	0	0	1	0	0	**100.0%**
Generic	0	3	7	0	0	0	0	0	0	0	0	0	0	1	1	3	**100.0%**
Homeless Families with Support Needs	0	0	10	0	0	0	0	0	0	0	0	0	0	1	0	0	**71.4%**
Mentally Disordered Offenders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
Offenders or People at risk of Offending	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
Older people with mental health problems/dementia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
Older people with support needs	24	10	244	7	30	30	31	33	30	29	27	20	15	61	30	19	**67.1%**
People with a Physical or Sensory Disability	1	1	5	0	1	1	1	1	1	1	1	1	1	0	2	1	**70.0%**
People with Alcohol Problems	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	**100.0%**
People with Drug Problems	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	**100.0%**
People with HIV / AIDS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
People with Learning Disabilities	13	14	82	0	13	15	15	16	19	11	13	3	10	1	19	19	**74.0%**
People with Mental Health Problems	6	16	31	0	6	13	13	11	13	11	12	1	8	4	14	16	**85.1%**
Refugees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
Rough Sleeper	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
Single Homeless with Support Needs	0	7	36	0	0	1	1	1	3	0	5	1	1	4	3	7	**82.7%**
Teenage Parents	0	0	3	0	0	0	0	0	0	0	0	0	0	3	0	0	**100.0%**
Traveller	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0.0%**
Women at Risk of Domestic Violence	0	15	3	0	0	0	0	6	3	0	0	0	0	9	2	11	**90.0%**
Young People at Risk	0	10	12	0	0	0	0	0	0	0	2	1	0	9	0	8	**100.0%**
Young People Leaving Care	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	**100.0%**
Total	**44**	**76**	**448**	**7**	**50**	**60**	**61**	**68**	**69**	**52**	**60**	**27**	**35**	**94**	**71**	**84**	**69.4%**

14.1.5 Support Provision Capacity Summary

Support Provision	Household Units	Percentage
24 hour cover with Sleep in Staff	3643	23.1%
24 hour cover with Waking Night Staff	851	5.4%
Alarm/On Call System	10580	67.0%
Day Time Staff on Site with Emergency Call Out	3515	22.3%
Floating/Visiting Support	4498	28.5%
Live in Landlady / Landlord	6	0.0%
Other	2986	18.9%
Peripatetic Warden	3831	24.3%
Warden Support on Site	9380	59.4%

14.1.6 Property Registration Status Analysis

Client Group	Registration Status						
	Dual Registered care/nursing home	Fully Registered as a nursing home	Fully Registered as a residential care home	Not Registered	Part Registered as a nursing home	Part Registered as a residential care home	Total
Frail Elderly	0.0%	0.0%	33.3%	66.7%	0.0%	0.0%	**100.0%**
Generic	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	**100.0%**
Homeless Families with Support Needs	0.0%	0.0%	0.0%	93.3%	0.0%	0.0%	**93.3%**
Mentally Disordered Offenders	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Offenders or People at risk of Offending	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Older people with mental health problems/dementia	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Older people with support needs	0.0%	0.0%	0.5%	98.0%	0.0%	0.0%	**98.5%**
People with a Physical or Sensory Disability	0.0%	0.0%	9.1%	81.8%	0.0%	0.0%	**90.9%**
People with Alcohol Problems	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	**100.0%**
People with Drug Problems	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	**100.0%**
People with HIV / AIDS	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
People with Learning Disabilities	0.0%	1.5%	8.8%	88.5%	0.0%	0.4%	**99.2%**
People with Mental Health Problems	0.0%	1.2%	4.7%	90.6%	0.0%	1.2%	**97.6%**
Refugees	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Rough Sleeper	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Single Homeless with Support Needs	0.0%	0.0%	0.0%	99.0%	0.0%	0.0%	**99.0%**
Teenage Parents	0.0%	0.0%	0.0%	77.8%	0.0%	0.0%	**77.8%**
Traveler	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Women at Risk of Domestic Violence	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	**100.0%**
Young People at Risk	0.0%	0.0%	0.9%	88.6%	0.0%	0.0%	**89.5%**
Young People Leaving Care	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	**100.0%**

14.1.7 Cross Authority Group Services Analysis

Client Group	Accommodation Based Service	Accommodation based with floating/resettlement/outreach support	Community or Social Alarm Service	Floating Support Service	Home Improvement Agency (HIA) Service	Outreach service	Resettlement Service	Total
Frail Elderly	0	0	0	0	0	0	0	**0**
Generic	0	0	0	0	0	0	0	**0**
Homeless Families with Support Needs	0	0	0	0	0	0	0	**0**
Mentally Disordered Offenders	0	0	0	0	0	0	0	**0**
Offenders or People at risk of Offending	0	0	0	0	0	0	0	**0**
Older people with mental health problems/dementia	0	0	0	0	0	0	0	**0**
Older people with support needs	40	0	0	1400	0	0	0	**1440**
People with a Physical or Sensory Disability	0	0	0	0	0	0	0	**0**
People with Alcohol Problems	0	0	0	0	0	0	0	**0**
People with Drug Problems	0	0	0	0	0	0	0	**0**
People with HIV / AIDS	0	0	0	0	0	0	0	**0**
People with Learning Disabilities	0	0	0	0	0	0	0	**0**
People with Mental Health Problems	29	0	0	0	0	0	0	**29**
Refugees	0	0	0	0	0	0	0	**0**
Rough Sleeper	0	0	0	0	0	0	0	**0**
Single Homeless with Support Needs	20	8	0	0	0	0	0	**28**
Teenage Parents	0	0	0	0	0	0	0	**0**
Traveller	0	0	0	0	0	0	0	**0**
Women at Risk of Domestic Violence	42	0	0	10	0	0	0	**52**
Young People at Risk	0	0	0	0	0	0	0	**0**
Young People Leaving Care	0	0	0	0	0	0	0	**0**
Total	**131**	**8**	**0**	**1410**	**0**	**0**	**0**	**1549**

14.1.8 Service Funding Analysis

	Funding		
Client Group	SP Funded	No SP Funding	Mix Funded
Frail Elderly	40.0%	40.0%	0.0%
Generic	72.7%	0.0%	18.2%
Homeless Families with Support Needs	85.7%	0.0%	0.0%
Mentally Disordered Offenders	0.0%	0.0%	0.0%
Offenders or People at risk of Offending	0.0%	0.0%	0.0%
Older people with mental health problems/dementia	0.0%	0.0%	0.0%
Older people with support needs	83.9%	0.7%	2.4%
People with a Physical or Sensory Disability	80.0%	0.0%	0.0%
People with Alcohol Problems	100.0%	0.0%	0.0%
People with Drug Problems	25.0%	0.0%	75.0%
People with HIV / AIDS	0.0%	0.0%	0.0%
People with Learning Disabilities	51.2%	6.5%	18.7%
People with Mental Health Problems	55.3%	4.3%	34.0%
Refugees	0.0%	0.0%	0.0%
Rough Sleeper	0.0%	0.0%	0.0%
Single Homeless with Support Needs	82.7%	0.0%	3.8%
Teenage Parents	66.7%	0.0%	33.3%
Traveller	0.0%	0.0%	0.0%
Women at Risk of Domestic Violence	70.0%	0.0%	30.0%
Young People at Risk	84.6%	0.0%	15.4%
Young People Leaving Care	100.0%	0.0%	0.0%

14.1.9 Service Provider/Accommodation Manager Analysis

Service Provider Type	Charitable Organisation	Local Authority - Housing Dept	Local Authority - Joint Social Services/Housing	Local Authority - Social Services Dept	LSVT(RSL)	NHS Trust	Other	Private Company	Private Individual	RSL	Voluntary Not for Profit Organisation	Total
Charitable Organisation	53	7	0	0	0	0	2	0	0	38	13	**113**
Local Authority - Housing Dept	0	268	0	4	0	0	0	0	0	3	0	**275**
Local Authority - Joint Social Services/Housing	0	0	0	0	0	0	0	0	0	0	0	**0**
Local Authority - Social Services Dept	0	0	0	0	0	0	0	0	0	4	0	**4**
LSVT(RSL)	0	9	0	0	158	0	0	0	0	4	0	**171**
NHS Trust	0	0	0	0	0	0	0	0	0	0	0	**0**
Other	0	0	0	0	0	0	0	0	0	5	0	**5**
Private Company	0	0	0	0	1	0	0	4	0	25	1	**31**
Private Individual	0	0	0	0	0	0	0	0	10	0	0	**10**
RSL	0	0	0	0	1	0	0	1	0	534	1	**537**
Voluntary Not for Profit Organisation	1	0	0	0	1	0	2	0	0	13	29	**46**
Total	**54**	**284**	**0**	**4**	**161**	**0**	**4**	**5**	**10**	**626**	**44**	**1192**

14.1.10   Service provider/Landlord Organisation Analysis

Service Provider Type	Landlord Organisation Type												
	Charitable Organisation	Health Authority	Local Authority - Housing Dept	Local Authority - Joint Social Services/Housing	Local Authority - Social Services Dept	LSVT(RSL)	NHS Trust	Other	Private Company	Private Individual	RSL	Voluntary Not for Profit Organisation	Total
Charitable Organisation	31	0	8	0	0	0	0	3	1	0	59	11	**113**
Local Authority - Housing Dept	0	0	263	0	3	0	0	0	0	1	4	0	**271**
Local Authority - Joint Social Services/Housing	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Local Authority - Social Services Dept	0	0	0	0	0	0	0	0	0	0	4	0	**4**
LSVT(RSL)	0	0	5	0	0	159	0	0	0	0	4	0	**168**
NHS Trust	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Other	0	0	0	0	0	0	0	0	0	0	5	0	**5**
Private Company	0	0	0	0	0	0	0	0	3	0	23	1	**27**
Private Individual	0	0	0	0	0	0	0	0	0	11	0	0	**11**
RSL	0	2	40	0	1	8	9	0	2	4	449	0	**515**
Voluntary Not for Profit Organisation	2	0	4	0	0	2	1	3	0	0	26	10	**48**
Total	**33**	**2**	**320**	**0**	**4**	**169**	**10**	**6**	**6**	**16**	**574**	**22**	**1162**

14.2 District/Borough Council Position Statements

The Essex Supporting People strategy is underpinned and accompanied by position statements prepared by each of the twelve Borough / District Councils, together with their local health, social care, probation, voluntary sector and provider partners. Although collectively they form part of the overall Supporting People Strategy for Essex, each is an individual statement in its own right.

The main themes from each individual position statement are summarised collectively in this document but, in the interests of brevity, they have not been annexed to this document. Individual position statements are available from the Local Supporting People Officers. Copies of all the position statements are available from the County Council Supporting People Team.

Copies of Borough / District Councils position statements, this strategy and accompanying documents can be found on the Essex Supporting People Website at http://supportingpeople.essexcc.gov.uk/

14.3 Supporting People Contacts in Essex

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