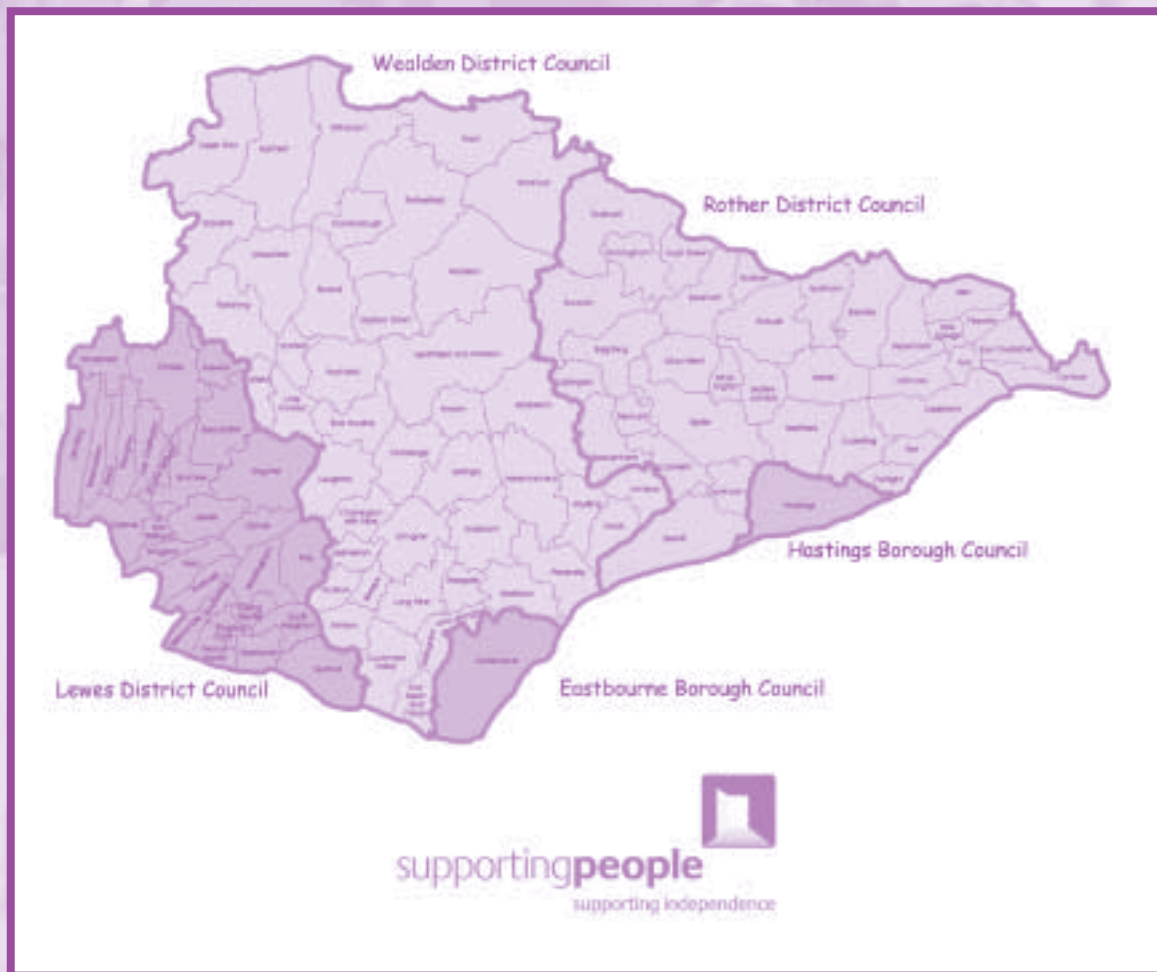


# East Sussex

## Supporting People Strategy

2005 - 2010



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# **East Sussex Supporting People Strategy 2005 - 2010**

*final draft  
January 2005*

## CONTENTS

<b>1</b>	<b>EXECUTIVE SUMMARY .....</b>	<b>4</b>
1.1	Introduction.....	4
1.2	Supply .....	5
1.3	Need.....	5
1.4	Commissioning.....	6
<b>2</b>	<b>INTRODUCTION.....</b>	<b>8</b>
2.1	Forward to the strategy from the East Sussex Supporting People commissioners .....	8
2.2	Approving agency signatures .....	9
2.3	Vision for East Sussex .....	10
2.4	Definitions .....	10
2.5	Context.....	10
2.6	The strategic aims of the Supporting People programme in East Sussex ..	12
2.7	Purpose of this strategy.....	14
2.8	Strategy development and consultation .....	14
<b>3</b>	<b>ANALYSIS OF THE SUPPLY OF HOUSING-RELATED SUPPORT SERVICES .....</b>	<b>16</b>
3.2	Changes to the supply between 2003 and 2004 .....	16
3.3	Supply on 1 April 2004 .....	17
3.4	Supply across the five district and borough councils on 1 April 2004 .....	19
3.5	Flexibility of the supply – secondary client groups.....	19
3.6	Projected supply for 1 April 2005.....	20
3.7	Indications of under supply.....	22
3.8	Main points about supply in East Sussex .....	23
<b>4</b>	<b>HOUSING-RELATED SUPPORT NEED .....</b>	<b>24</b>
4.1	Introduction.....	24
4.2	Data about East Sussex.....	24
4.3	Homeless people with support needs in East Sussex.....	26
4.4	People with drug and alcohol problems.....	30
4.5	People at risk of offending, ex-offenders and young offenders .....	31
4.6	People with mental health problems.....	32
4.7	Young people (16 –18 year olds) .....	33
4.8	Women at risk of domestic violence .....	33
4.9	People who are asylum seekers and refugees.....	34
4.10	Teenage pregnancy .....	34
4.11	Older people.....	35
4.12	People with a learning disability .....	36
4.13	People with a physical disability or sensory impairment.....	37
4.14	People from black and minority ethnic (BME) groups.....	38
4.15	People with HIV/AIDS .....	38
4.16	Travellers .....	39
4.17	Housing Support Needs Survey data 2003 - 2004 .....	39
4.18	Summary of main issues relating to need .....	41

## CONTENTS

<b>5</b>	<b>TOWARDS A COMMISSIONING STRATEGY .....</b>	<b>42</b>
5.1	Definition of commissioning.....	42
5.2	Commissioning aims .....	42
5.3	Priority client groups for the Supporting People programme .....	43
5.4	Shaping the 'market'.....	48
5.5	Financial and risk issues .....	55
5.6	Partnership in service commissioning .....	58
5.7	Annual plan .....	59
5.8	Summary of the main points in commissioning .....	62
	<b>APPENDICES.....</b>	<b>63</b>
1	Glossary of terms .....	63
2	ODPM client group definitions .....	66
3	Case studies.....	68
4	Strategic Forum.....	76
5	Strategic documents and plans .....	77
6	Consultation .....	79
7	Feedback from consultation groups .....	81
8	Groups that commented on the strategy .....	85
9	Supply maps.....	86
10	Comparative data .....	96
11	Supporting People service providers (on 1 April 2004) .....	98
12	Contract values .....	99
13	Review outcomes .....	101
14	Charging Policy .....	107
15	Agreed list of services .....	114
16	'Wish list' of services .....	115

# 1 Executive Summary

## 1.1 Introduction

**For the people of East Sussex the Supporting People Programme aims to increase the opportunities and life chances of vulnerable people by offering them accessible, high quality affordable housing-related support services that promote independence, prevent crisis and compliment existing housing health and social care services.**

The Supporting People programme funds, regulates and gives strategic direction to housing-related support services to vulnerable adults. 'Housing-related support' is accepted as "those lower levels of practical or emotional support, that do not amount to personal care, that allow vulnerable people to obtain or remain in their own home".

The programme works as a partnership of local government, service users, health services, the probation service and support providers. At the local level a Strategic Forum, comprising senior managers from the 6 local authorities, 4 PCTs and the Probation Service (Sussex) directs the programme which is administered on behalf of the partnership by East Sussex County Council

The Supporting People Programme in East Sussex underpins the delivery of the wider strategic aims of central and local government. Services across the county are crucial to meeting the key priorities of prevention, promotion of independence, social exclusion, equalities, community safety and resettlement and help deliver the Council Plan.

East Sussex County Council, as the administering authority, is required by the Office of the Deputy Prime Minister (ODPM) to submit a five year strategy by 31 March 2005. The East Sussex Supporting People Shadow Strategy (2003 to 2004), which achieved an 'excellent' rating from the ODPM, gives a strong foundation for this strategy. There has been wide-ranging consultation on the strategy development over a six month period through: forums; the council and ODPM Supporting People websites; newsletters; and meetings including client group meetings facilitated by the voluntary sector.

### **The key aims of the strategy are:**

- to set out the future direction of the Supporting People Programme in East Sussex;
- to help develop commissioning roles and processes in East Sussex; and
- to serve as a vehicle to obtain more revenue funding for the Programme by demonstrating the lack of services to meet housing related support needs.

Given the uncertainties around funding for housing-related support services it has been difficult to plan a five-year commissioning strategy for Supporting People. We now have a government commitment to three years' funding. However, the local grant for 2005/06 means a reduction in real terms of more than 7.5% and this is extremely disappointing. In East Sussex we need to find savings of at least £600,000 before an inflationary uplift can be paid to providers and all procurement plans are in abeyance.

Within this context East Sussex is committed to:

- **ensuring the current budget delivers as many high quality services as possible;** and
- establishing a programme for the development of new services should more money become available (see section 5.7).

### **1.2 Supply (chapter 3 of the strategy)**

When the Supporting People programme was introduced on 1 April 2003 East Sussex had 6375 units of housing-related support. The supply had increased by 41 units by 1 April 2004 and these changes were consistent with strategic priorities and the priorities set out in the Shadow Strategy. A detailed analysis of supply on 1 April 2004 has identified:

- 87% of supply was for accommodation-based services.
- 11% of supply was for floating support services (that is, delivered to the household wherever they are living).
- 4692 units were for older people, the vast majority within traditional sheltered housing services.
- 1724 units were available for all other client groups.
- There are no specific services for people with alcohol problems or offenders.
- There are no specific services for people from a BME background.
- Overall, supply of housing related support services is low and this is reinforced by comparative data.

### **1.3 Need (chapter 4 of the strategy)**

An analysis of need across the county concluded that there are many vulnerable people with unmet housing related support needs across the whole of East Sussex and particular pockets of deprivation where the unmet need is extremely high. It is a challenge to capture and quantify specific housing-related support needs and more research needs to be carried out for all groups. In particular there is potentially a huge need from people with a physical disability and research is needed into the specific needs of this group. Likewise we need to review the need for services for people from a BME background. The main points are:

- There is a huge need for a range of services for older people across the county regardless of tenure.
- People with a learning disability have few options, there are young people leaving specialist school who come outside the remit of social services and many wish to live as independent a live as possible and reach their full potential. Many people with a learning disability aspire to receive housing-related support services on a permanent basis as an alternative to residential care or living with family.
- People with a physical disability have particularly high unmet need.

- There is a countywide picture of single homeless people whose vulnerability is increased by a range of needs, including mental health needs, that are often complex and result in a chaotic lifestyle.
- There are a relatively large number of **travellers** in East Sussex and some receive a housing-related support service however we know there are a number of camped travellers living in transit sites who have an urgent need for housing related support.
- The target to increase the number of people successfully completing drug treatments highlights a need for housing related support to promote the social inclusion of this client group.

### 1.4 Commissioning (chapter 5 of the strategy)

For the purpose of this strategy commissioning has is defined as: 'a strategic view of services and resources set against needs and a plan to get the best fit from resources'. The Strategic Forum will continue to work in partnership to achieve the strategic and operational **commissioning aims** set out in the strategy. The main aims are:

- To increase the overall supply of housing related support and the proportion of floating support to all client groups.
- To extend supporting people services to vulnerable people in the private rented and owner occupier sector
- To ensure services are of a high quality, achieve value for money and positive outcomes for service users who are actively encouraged to contribute to service developments.
- To ensure all services are accessible to all and appropriate to individual need including people from minority groups
- To ensure all new and re-provisioned services are jointly commissioned through a clear needs led process and other income streams are encouraged.
- To support the diverse population of providers whilst encouraging mergers where there are administrative benefits. Local authority providers will be treated in the same way as other providers in respect of best value and service developments and providers will be encouraged to contribute to service developments.

A gap analysis has concluded that there is a severe lack of supply to meet the housing related support needs of vulnerable people in East Sussex and all client groups are a priority for housing related support service at the moment. Some groups however have less supply to meet their needs and the **client groups that have the highest priority** for new housing-related support services across East Sussex (not in priority order) are:

- **Older people;**
- **People with a learning disability;**
- **People with a physical disability; and**
- **Single homeless people with complex needs.**

## EXECUTIVE SUMMARY

This chapter also analyses the factors that shape the market including:

- the nature of service providers (most are registered social landlords);
- the impact of service reviews;

All existing services (there were 230 on 1 April 2004) must be reviewed according to value for money and quality frameworks, by March 2006. The aim of monitoring and review within the county is 'to use best endeavours to ensure that services provide an appropriate balance between quality for service users and the cost of the provision within strategically relevant services'. To date all reviewed services have been found to be strategically relevant and in demand

- cross authority and regional issues;
- resources issues and risk management .

The budget for 2005/06 has been gravely reduced by 5.04% (in cash terms £614,000) to £11.6 million. The impact of this reduction, which has been applied to a greater or lesser extent to all administering authorities, has meant that all new commissioning activity must cease and providers can not be paid an inflationary uplift.

The chapter gives a framework for the procurement of services which includes the following:

- The proposed **service** must be deliverable, strategically relevant, meet a strategic priority need and have a cost within appropriate benchmarks.
- The **provider** must be experienced, endorse partnership working, be accredited and have an in depth understanding of quality contribute to market management aims. Existing providers must also have a positive outcome to all service reviews.

Finally the chapter concludes with an annual plan of action that sets out key strategic tasks arising from the strategy for 2005/06 and a five year development plan should funding become available.

The strategy will be reviewed annually.

## **2 Introduction**

### **2.1 Forward to the strategy from the East Sussex Supporting People commissioners**

Welcome to the 2005 edition of the five year strategy. In East Sussex we are committed to working together to maintain partnerships between the six local authorities; the Probation Service Sussex; the four Primary Care Trusts; Registered Social Landlords; and the voluntary and private sector to provide the consistent delivery of affordable, easily accessible and high quality housing-related support services.




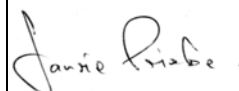
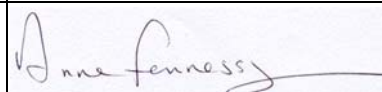
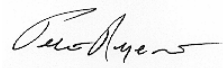


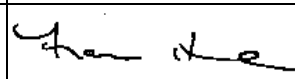
The Supporting People programme to date has given us the opportunity to take stock of the current services in East Sussex. Since April 2003 our developing commissioning framework has allowed us to build on and improve the cost effectiveness and good practice that is one key element in the way providers operate by taking a risk based approach to review schedules. We have also been able to decommission services that are not of the quality we believe should be offered to vulnerable people and prioritise new services according to local unmet need.

Crucially the programme is helping deliver a range of strategic priorities that are shared by commissioning partners. These include: the prevention of homelessness; promotion of social inclusion; the fight against substance misuse, crime and anti social behaviour; and the development of a wider range of options for older people. Since April 2003, all new units of supply are consistent with local strategic and government priorities and have helped to deliver Public Sector Agreement Targets. For example, we have increased our supply for frail elderly people from nil to 53 units and the supply for teenage parents and women at risk of domestic violence has also increased.

Whilst there are challenges that concern all commissioners, particularly the need to make savings when we know there is much unmet need in the county, we are confident that all those involved will see the Supporting People programme as a long-term evolving strategy of improvement. We particularly wish to ensure that the unmet needs of vulnerable people in our community are recognised and resourced in a way that focuses on prevention rather than on crisis intervention.

We hope that whatever your role you will find time to contribute to the ongoing strategy development process over the forthcoming months and years. In so doing you will be helping with the contribution that the Supporting People programme in East Sussex makes to the improving the lives of vulnerable people.

## 2.2 Approving agency signatures

Partner agency	Chief Officer/Board Member	Title	Signature
East Sussex County Council Social Services Department	David Archibald	Director of Social Services (until 31.12.04)	
Eastbourne Borough Council	Neil Fuller	Director of Housing, Health & Community Housing	
Hastings Borough Council	Richard Peters	Executive Director of Housing, Communities and Neighbourhoods	
Lewes District Council	Laurie Priebe	Housing Strategy Manager	
Rother District Council	Anne Fennessy	Head of Housing	
Wealden District Council	Mary-Claire Deane	Director of Community Services	
Sussex Probation Area	Peter Rogers	Assistant Chief Probation Officer	
Bexhill & Rother PCT	Rick Stern	Chief Executive	
Eastbourne Downs PCT	Gina Brocklehurst	Chief Executive	<i>To follow</i>
Hastings & St Leonards PCT	Toni Wilkinson	Chief Executive	
Sussex Downs & Weald PCT	Fiona Henniker	Chief Executive	

### 2.3 Vision for East Sussex

The Supporting People programme in East Sussex aims to increase the opportunities and improve upon the life chances of vulnerable people by offering them accessible, high quality and affordable housing-related support that promotes independence, prevent crisis and compliment existing and new housing, health and social care services.

### 2.4 Definitions

**Supporting People** is a programme that funds and regulates housing-related support services to vulnerable adults. It also gives strategic direction to these services. The aims of the programme include promoting individual independence and preventing more intrusive and costly forms of support. There is as yet no clear legal definition of **'housing-related support'**. The Supporting People Administering Authority (East Sussex County Council) has adopted the following working definition:

**“Those lower levels of practical or emotional support, that do not amount to personal care, that allow vulnerable people to obtain or remain in their own home.”**

There is a **glossary** of the terms used in this strategy in Appendix 1.

The Office of the Deputy Prime Minister (ODPM) categorisation of vulnerable people identifies specific **client groups** who are likely to have a housing support need. There is a full list of the client groups and their definitions in Appendix 2. They include: older people with support needs; homeless people; people with a learning disability; people with mental health problems; people with drug or alcohol problems, people at risk of offending; people escaping from domestic violence and people with a physical disability. In addition, there are generic services that will support **all** client groups. We acknowledge that people do not fit into neat categories and may have multiple or complex needs.

The four **case studies** in Appendix 3 give a flavour of the range of services funded by the Supporting People programme in East Sussex. They also demonstrate the benefit of the programme to vulnerable people.

It should be noted that housing-related support is not limited to people living in social rented housing and there is much work to be done to address the housing-related support needs of owner-occupiers and of people who rent in the private sector.

### 2.5 Context

The East Sussex Health, Housing, Social Care and Probation Strategic Forum (known as the Strategic Forum) acts as the commissioning body for the Supporting People programme. There is a list of members of the forum in Appendix 4.

## INTRODUCTION

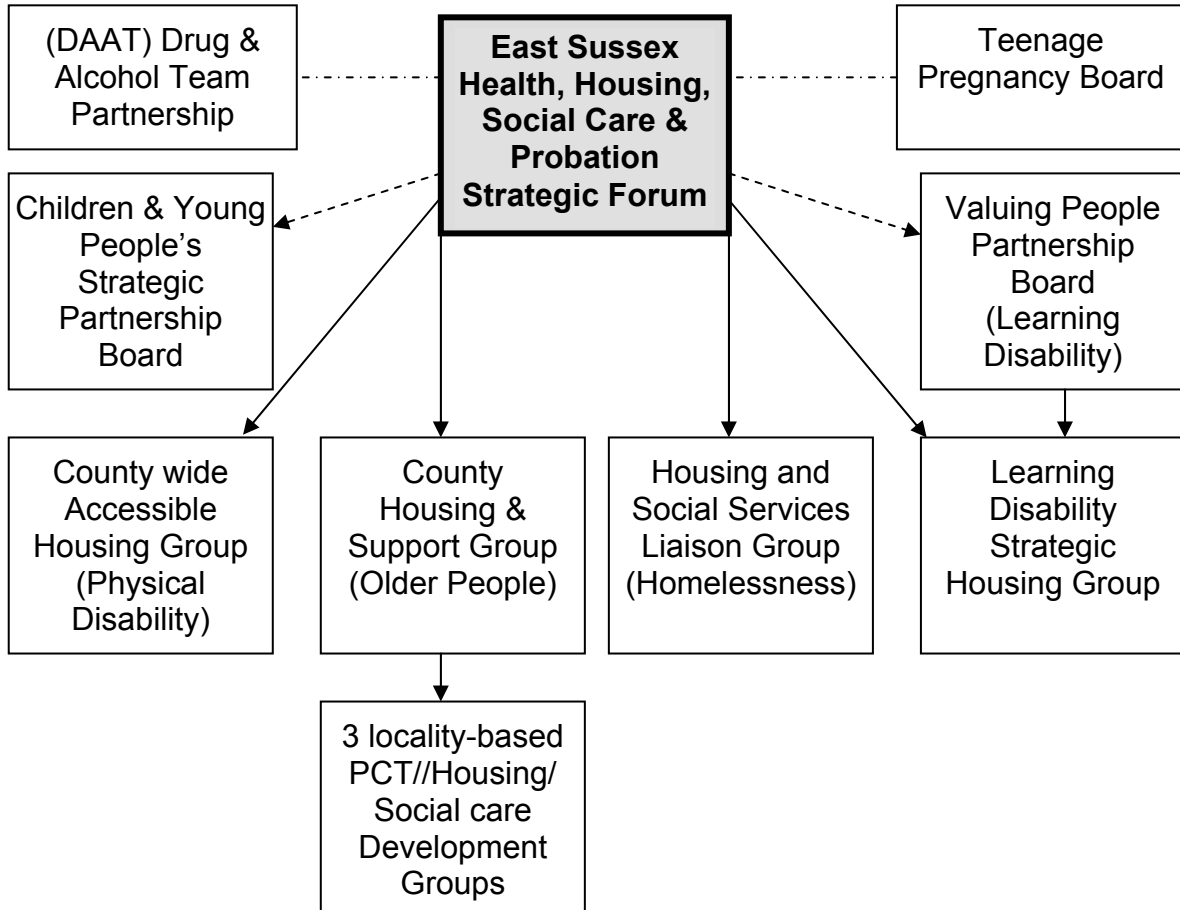
The Strategic Forum promotes a partnership approach to the planning and commissioning of housing-related support services in line with shared strategic aims to meet agreed priority needs.

Given the uncertainties around funding for housing-related support services it has been difficult to plan a five-year commissioning strategy for Supporting People. We have a government commitment to three years' funding. However, the local grant for 2005/06 means a reduction in real terms of more than 7.5% and this is extremely disappointing. In East Sussex we need to find savings of at least £600,000 before an inflationary uplift can be paid to providers or any services re-commissioned. However, within this context East Sussex is committed to:

- **ensuring the current budget provides as many high quality services as possible;** and
- establishing a programme for the development of new services should more money become available (see section 5.5).

### 2.5.1 Principal groups in the emerging framework for integrating Supporting People

To ensure a comprehensive partnership approach to commissioning and the fulfilment of Supporting People's key underpinning role across the five districts and boroughs, the following framework has emerged. This framework allows us to measure success in meeting shared strategic aims and a range of government and local targets and objectives.



There are a number of other strategic groups to which Supporting People team contribute and which feed into the programme. These include:

- Wealden Housing Partnership (Local Strategic Partnership)
- Eastbourne Housing Partnership (Local Strategic Partnership)
- Hastings Housing Partnership (Local Strategic Partnership)
- Joint Commissioning Group (sub-group of DAAT)
- Community Safety Network
- East Sussex Domestic Violence Forum
- Youth Offending Partnership
- Travellers group
- Brighton & Hove and East Sussex Independent Providers Forum (private sector providers group)

There are service provider representatives on the county wide, client-group based housing and support groups. These county wide client groups have taken the place of the Core Strategy Development Group.

### **2.6 The strategic aims of the Supporting People programme in East Sussex**

The Supporting People programme underpins the delivery of the wider strategic aims of central and local government. Its relevance to the delivery of health, housing, community safety and social care priorities can not be underestimated. It is centrally placed to influence the key agendas of prevention, promoting independence, social exclusion, Best Value, equalities and social inclusion, community safety and resettlement (see below).

The Strategic Forum will work to ensure that Supporting People is well placed to support the local authorities and partners in meeting local and central government targets as set out in the relevant strategies (see Appendix 5), and in particular the following key priorities outlined in the East Sussex County Council Plan 2004/05:

- to continue to improve services to older people;
- to further reduce crime and the fear of crime; and
- to promote active citizenship.

#### **2.6.1 The preventative agenda**

This phrase sums up the role that housing-related support should play in preventing a wide range of events that may be experienced as a crisis by vulnerable people. Such events, that often have a major social and financial cost, include:

- homelessness and repeat homelessness;
- unnecessary or premature admittance to residential care;
- acute hospital admission;

- recidivism for drug and alcohol misusers;
- prolific and repeat criminal and anti-social behaviour;
- rough sleeping; and
- the use of bed and breakfast and other temporary accommodation.

### **2.6.2 Promoting independence**

Housing-related support services aim to help vulnerable people make their own decisions, learn new life skills and live as independent a life as possible in the community. This aim is integral to the *NHS Plan*; the *National Services Frameworks* for Mental Health and Older People; *Valuing People* objectives for people with a learning disability; The Connexions programme for Young People; chronic disease management within the NHS; and the 2004 ministerial steer on Extra Care Services.

### **2.6.3 'Best Value' and raising the quality of services**

The Supporting People programme brings services, which have not previously been subject to a single regulatory regime, into a consistent programme. The principles of Best Value and continuous improvement are applied across the programme to obtain the best service at the best price.

### **2.6.4 Equalities and social inclusion**

The Supporting People programme funds services to support the most marginalized people. This includes groups whose needs have historically been less well met such as people from a black or minority ethnic (BME) group, women at risk of domestic violence, travellers, young people, offenders, and vulnerable homeless households.

The programme also seeks to contribute to other initiatives that assist excluded groups for example the local 'connecting communities' programme that assists isolated BME people in East Sussex access public services.

The Supporting People review process helps prevent vulnerable people being indirectly discriminated against by ensuring referral procedures identify and include socially excluded groups and that providers do not operate blanket exclusions at point of entry to services.

### **2.6.5 Community safety**

The Supporting People programme helps to underpin the aims of the Crime Reduction Partnerships, the Youth Justice Plan and the Drug & Alcohol Action Team Strategy (DAAT) by offering timely housing-related support to people who may adversely affect, or be affected by, anti-social behaviour or crime in neighbourhoods. These groups include: offenders; people who misuse alcohol and/or drugs; and those who are at risk of domestic violence. The fear of crime is particularly high amongst older people and can be reduced by delivering appropriate housing-related support.

## **2.6.6 Resettlement**

Supporting People funded services support marginalised groups to obtain a new home and become part of the community. This includes people leaving institutional care, residential school or prison as well as homeless people and asylum seekers given leave to remain.

## **2.7 Purpose of this strategy**

The *East Sussex Supporting People Shadow Strategy* achieved an ‘excellent’ rating by the ODPM and gives a strong foundation for this strategy.

The **key aims** of the Supporting People Strategy for East Sussex are:

- to set out the overall direction of the Supporting People programme in East Sussex for the next five years including identifying priorities for service development;
- to help develop commissioning roles and processes in East Sussex; and
- to serve as a vehicle to obtain more revenue funding for the Supporting People programme by demonstrating a lack of services to meet housing-related support needs.

## **2.8 Strategy development and consultation**

### **2.8.1 Timetable for development**

April 29 2004	Workshops held at Supporting People inclusion forum.
Early June 2004	First draft to Strategic Forum for comments.
June – August 2004	Structured consultation period 14 June – 6 September deadline for responses 6 September 2004.
September 2004	Consultation data collated and considered.
October 2004	Second draft produced.
November 2004	Online consultation on second draft: <a href="http://www.eastsussex.gov.uk/supportingpeople">www.eastsussex.gov.uk/supportingpeople</a>
December 2004	Consultation data collated and considered.
January – February 2005	Third draft presented to the Strategic Forum and cabinets for agreement. Strategic Forum – 20 January 2004 Lewes District Council – 27 January 2004 Eastbourne Borough Council – 9 February 2004 Wealden District Council - 9 February 2004 Rother District Council – 21 February 2004 Hastings Borough Council – 28 February 2004 East Sussex County Council Cabinet - 15 March 2004
31 March 2005	Final draft submitted to the ODPM.

### 2.8.2 Consultation on first draft

The first draft of the strategy was published in June 2004 with a set of structured consultation questions that highlighted specific areas for comment. There was a 12-week consultation period and a variety of consultation methods were used to reach all groups:

- The Supporting People Inclusion Forum on 29 April was used to introduce the strategy to providers and other stakeholders. The Supporting People team presented suggestions for the direction of the Supporting People programme in East Sussex and held workshops to discuss the main issues for different client groups.
- Members of the Supporting People team attended 26 meetings to present the draft to a wide range of relevant groups. There is a full list of the meetings attended in Appendix 6.
- The draft was sent by e-mail to providers, partners, voluntary organisations and other stakeholders.
- The consultation was advertised in our Supporting People newsletter (SPLASH) and in other local newsletters.
- The draft was published and all related documents on the East Sussex County Council website and the K-Web (the Supporting People 'knowledge website').
- A summary of the main points in the strategy was produced for service users and sent this to providers for distribution. It was available on our websites.
- The Supporting People team consulted with a range of client groups at meetings facilitated by the voluntary sector:
  - **Older people** - Age Concern
  - **People with a learning disability** - Voices for Change (advocacy group)
  - **People with a physical disability or sensory impairment** - East Sussex Disability Association (ESDA)

### 2.8.3 Consultation on second draft

The second draft was published in November 2004 on the East Sussex County Council website and the K-Web with a document highlighting the main changes between the first and the second draft. It was also presented to providers, stakeholders and other interested people at the Supporting People Forum on 25 November 2004.

### 2.8.4 Feedback from consultation

The results of the client group consultation can be found in Appendix 7.

A range of other groups gave written feedback on the drafts and the comments were detailed and constructive. All comments were critically examined and in most cases, suggestions for changes were incorporated into the final draft. A list of organisations or individuals that responded can be seen in Appendix 8.

### 3 Analysis of the supply of housing-related support services

When the Supporting People programme was introduced on 1 April 2003, East Sussex had 6375 units of housing-related support. This number was the maximum capacity the Supporting People programme could deliver at any one time. A unit of 'floating support' is delivered to a household wherever the people are living. A unit of accommodation-based support is delivered to a household within a designated property. A household may be one or more people.

#### 3.1.1 Registered Care

The supply includes 13 registered care services (117 units) that do not necessarily provide housing-related support services. The total of 117 units is broken down into 75 units for people with learning disabilities, 12 units for people with mental health problems and 30 units for people with drug problems.

These services historically received Supported Housing Management Grant (SHMG) which is one of the legacy funding streams that was transferred to Supporting People on 1 April 2003. The Strategic Forum agreed the policy for managing this historical anomaly in July 2003. In line with ODPM guidance, all registered care services were reviewed in Autumn 2003. No further funding will be paid to any registered care services from 1 April 2006. (See section 5.4.5)

#### 3.2 Changes to the supply between 2003 and 2004

The ODPM guidance requires that this strategy sets out and explains the changes to supply between 1 April 2003 and 1 April 2004. These changes are:

Number of units on 1 April 2003 (see Appendix 9)	Number of units on 1 April 2004 (see Appendix 9)	Overall change
6375	6416	+0.64%

**Supply for older people:** The decrease from 4921 units to 4909 units is because 18 units of sheltered housing in Hastings Borough Council are currently being remodelled to provide a housing-related support service to single homeless people. Another service for older people increased its capacity by 6 units following contract negotiations.

**Supply for frail elderly people:** The increase from 0 to 53 units is due to the opening during 2003 of two extra care services commissioned before 1 April 2003.

**Supply for people with mental health problems:** The decrease from 408 units to 406 units is because two people left the services provided by two private individual providers ('sole traders') and these providers ceased operating.

**Supply for single homeless people:** The decrease from 177 units to 169 units is because a service of 8 units was decommissioned as a result of a service review. The service review uncovered serious health and safety issues that left the Strategic Forum no option but to terminate the contract.

**Supply for women at risk of domestic violence:** The increase from 54 units to 60 units is due to the opening of a new 6-unit service commissioned before 1 April 2003 in the Lewes district.

**Supply for young people at risk:** The decrease from 182 units to 181 units is due to a private individual provider ('sole trader') ceasing to operate.

**Supply for teenage parents:** The increase from 19 units to 23 units is due to the opening of a service in Lewes district commissioned before 1 April 2003.

**Supply for a generic client group:** The increase from 265 units to 266 units is due to contract negotiations about capacity with a number of providers.

These changes are consistent with strategic priorities as they serve to:

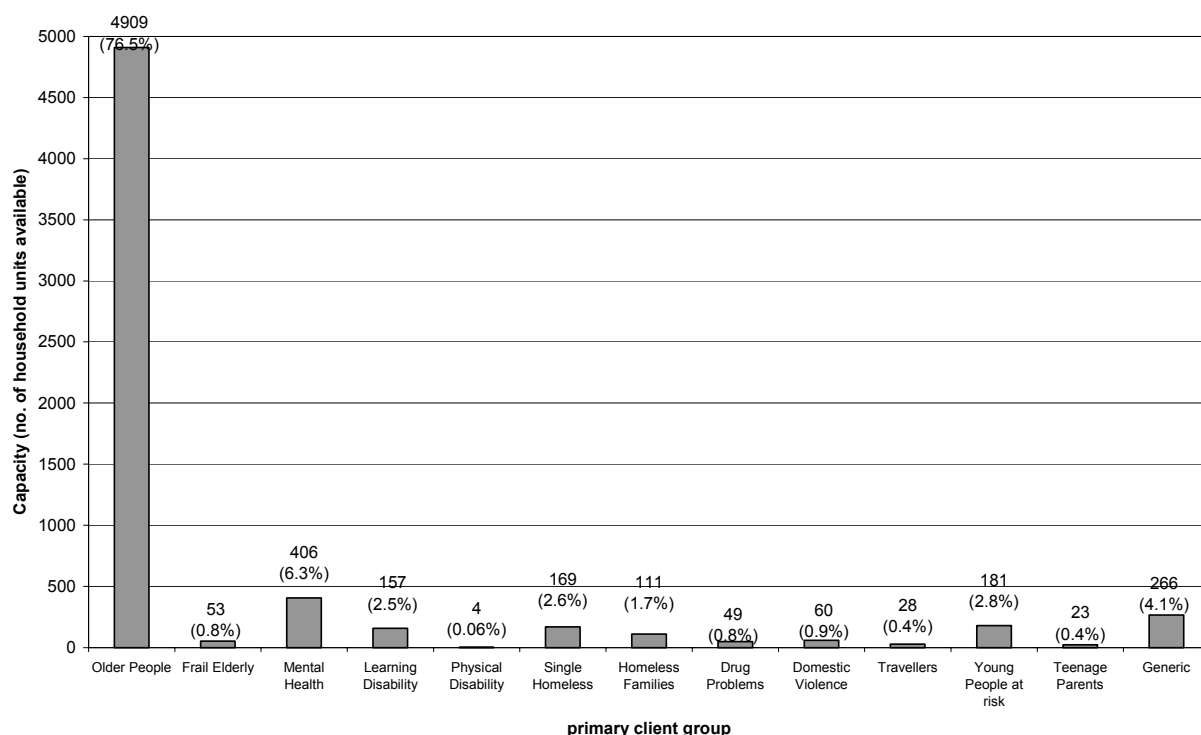
- underpin the delivery of the East Sussex County Council (ESCC) Public Service Agreement Target to reduce the incidences of domestic violence and prevent a recurrence of domestic violence;
- underpin the deliver of the ESCC Public Service Agreement Target to improve the quality of life and independence of older people so that they can live at home wherever possible, by increasing the number of those supported intensively to live at home;
- promote the independence of older people and prevent early admission to residential care homes;
- help the local authority meet the government target in respect of the social inclusion of teenage parents; and
- increase the supply to single homeless people in Hastings and this is consistent with *Hastings Housing Strategy 2002-2007* and the *Homelessness Strategy 2003-2008*.

### 3.3 Supply on 1 April 2004

Despite the very positive steps taken to expand the sector, there were only 6416 units of housing-related support within 230 services available to vulnerable people in East Sussex on 1 April 2004. This did not include Home Improvement Agencies (HIAs), leaseholders or community alarms but did include the 117 units within registered care homes.

The graph below shows the breakdown of supply by primary client group on 1 April 2004. For a more detailed breakdown of this supply in respect of numbers of services, numbers of providers, types of services and supply across the five districts and boroughs see Appendix 9.

## SUPPLY



### 3.3.1 Comments on the supply as at 1 April 2004

- 87% of supply was for accommodation-based services.
- 11% of supply was for floating support services.
- 1% of supply was for accommodation-based services with floating support.
- 1% of supply was for resettlement services. This refers to the ODPM definition of a housing-related support service aimed at permanently re-housing people.

In addition the programme funded:

- a community alarm service for 767 households;
- 4 Home Improvement Agencies across the county; and
- the support charges for 141 leaseholders in privately owned sheltered housing services.

Supply for **older people** with support needs dominated the programme:

- 4639 units were within an accommodation-based service.
- The vast majority of these 4639 units were within traditional sheltered housing services.
- 264 units were within a floating support service.
- In addition there were 53 units for frail elderly people within two accommodation-based services.

## SUPPLY

The total supply for **all other client groups** (not including older or frail elderly people) was only 1724 units. Of these, 27% were within floating support services and 73% were accommodation-based.

### 3.4 Supply across the five district and borough councils on 1 April 2004

The supply maps in Appendix 9 show the spread of units across the district and borough councils. These are the total number of household units available and include accommodation and floating support services.

District or Borough	Number of units	Alarms	Largest group: older people	2 <sup>nd</sup> largest group	Population (2001 census)
Eastbourne	1636	100	1140 units	148 units: mental health	89,667
Hastings	1450	547	1052 units	159 units: single homeless	85,029
Lewes	935	40	781 units	73 units: mental health	92,177
Rother	1065	0	888 units	60 units: generic	85,428
Wealden	1166	30	1048 units	45 units: mental health	140,023

There are also a number of services that cover more than one district. These units can't be easily split geographically:

- A county wide floating support service providing 36 units to support a generic client group.
- A county wide outreach service providing 24 units to support women at risk of domestic violence.
- A floating support service covering Eastbourne, Lewes and Wealden providing 7 units to support people with a learning disability.
- A supported accommodation service for people with mental health problems providing 67 units in Eastbourne and Wealden and 30 units in Hastings and Rother.
- A service covering Hastings and Rother providing 50 community alarm units to a generic client group.

### 3.5 Flexibility of the supply – secondary client groups

The supply map for 1 April 2004 was analysed by a secondary client group. Providers were originally asked to identify another client group they are able to provide for. This is what is known as the secondary client group. The findings show the flexibility of services and recognise the complex needs of vulnerable people.

It is important to note that this does not increase the overall supply of housing-related support. If a unit can supply a service to a secondary client group it is only at the expense of the primary group. Whilst a provider may be able to support some of the secondary client group at any one time, it is unlikely that the service could be entirely dedicated to the secondary client group. The main points are:

- 567 units supplying an accommodation-based or floating support service for older people could be provided to people with a physical or sensory disability.
- 1431 units supplying an accommodation-based service for older people could be provided to frail elderly people.
- 175 units supplying an accommodation-based or floating support service to older people could be provided to older people with mental health problems or dementia.
- 48 units supplying an accommodation-based service for people with a learning disability could be provided to people with a physical or sensory disability.
- 34 units supplying accommodation-based services to people with a learning disability could be provided to people with a mental health problem.
- Services with a primary client group 'young people at risk' will generally also support single homeless people.
- 8 units could be provided to offenders.
- 14 units could be provided to people with alcohol problems.

### **3.6 Projected supply for 1 April 2005**

The Supporting People programme is constantly changing as the impact of reviews and commissioning decisions is felt. Section 2.1 highlights the changes in supply between 2003 and 2004.

We expect the total number of household units available on 1 April 2005 to be 6305.

Number of units on 1 April 2004 (see Appendix 9)	Projected number of units on 1 April 2005 (see below)	Overall projected change
6416	6305	-2%

These changes are:

**Supply for the generic client group:** This has decreased by 16 units following service review.

**Supply for women escaping domestic violence:** This increased by 10 units when a new women's refuge pipeline service opened in April 2004.

**People with a learning disability:** This is expected to decrease by 22 units. 1 unit was provided by a 'sole trader' who chose to stop operating when the service user left the service. There are 6 new pipeline units in 2 accommodation-based services in Wealden. The remaining 27 units are in services that have been funded by SHMG.

## SUPPLY

**People with mental health problems:** The supply is expected to decrease by 13 units when the funded is withdrawn from a registered care service of 12 units. The remaining unit has been lost due to a 'sole trader' who chose to stop operating when the service user left the service.

**Single homeless people with support needs/complex needs:** This is expected to increase by 59 units. A short-term resettlement service of 48 units has been funded by one-off pipeline slippage and a pipeline service of 11 units in Hastings is due to open in February 2005.

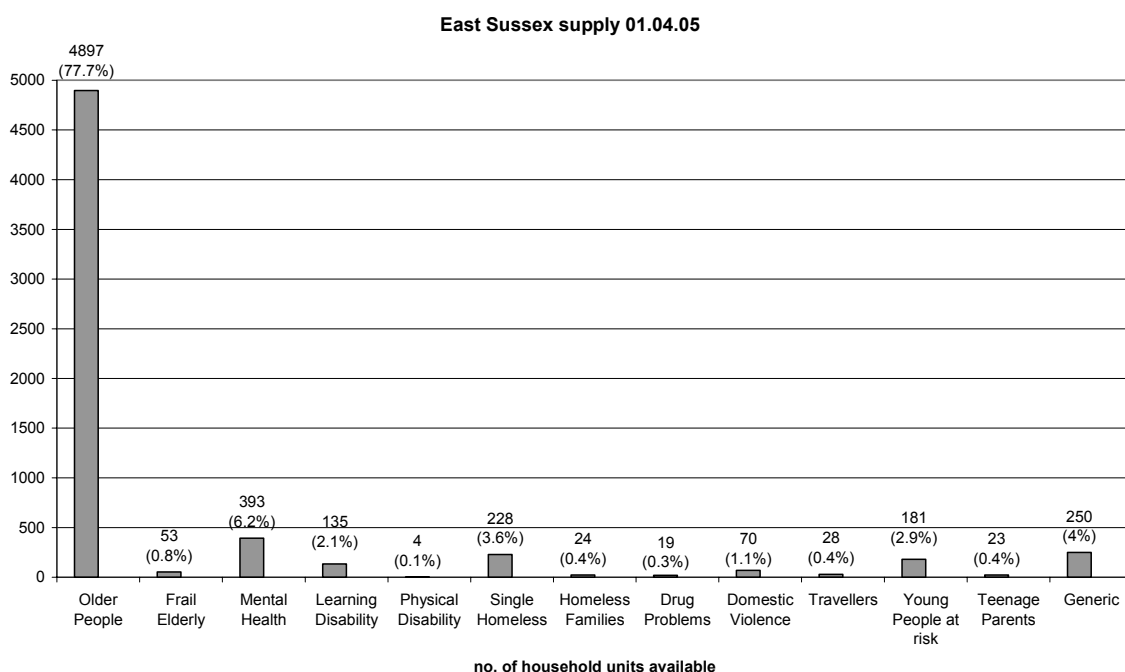
**Homeless families with support needs:** The reduction of 87 units is due to a service of 70 units that was found to not be providing housing-related support being de-commissioned during review, a service of 13 units being de-commissioned due to value for money issues and a reduction of 4 units of floating support by a provider unable to continue with the service.

**Older people with support needs:** The reduction of 2 units is due to the service being de-commissioned following review.

**People with drug and alcohol problems:** The reduction of 30 units is due to the removal of SHMG funding in a registered care home.

These changes reflect decisions made by the providers' themselves and the outcomes of service reviews. We expect there to be a significant loss of units between 2004 and 2005. Many of these units would have been re-provisioned (such as the services for homeless families with support needs) but this is not now possible due to the cut in grant for 2005/06 (see section 5.5 for more details).

The graph below shows the projected breakdown of this supply for 1 April 2005.



## 3.7 Indications of under supply

### 3.7.1 Comparisons with other local authorities

The ODPM supply data as at 1 April 2003 indicates that:

- East Sussex had 13.23 household units available per 1000 head of population. The national figure was 16.53.
- East Sussex had 10.15 household units available for older people with support needs. The national figure was 11.99.
- Within East Sussex the only client group that had a slightly higher unit supply figure than comparable national figures were women at risk of domestic violence and travellers. This reflects high levels of need in the county.
- East Sussex had 0.3 Supporting People funded units available per 1000 head of population for people with learning disabilities compared with 0.69 nationally and 0.58 regionally. The supply map shows that there is provision for 165 units representing 2.25% of the programme. However, as 75 of these units were in registered care homes the true figure of housing-related support units for people with a learning disability is much lower.

### 3.7.2 Comparison with the Institute of Public Finance Comparator Councils

The Institute of Public Finance identifies 15 comparator authorities for East Sussex County Council which include Suffolk, Kent, Devon, Dorset, Cumbria, Gloucestershire and Lincolnshire. These have been selected by matching The Supporting People team obtained comparative supply data from some of these authorities and this is shown in Appendix 10. The main points from comparisons are:

- When compared with seven authorities, East Sussex has the lowest number of units of housing-related support per 100,000 head of population for people with a **learning disability**. As nearly 50% of these units in East Sussex are actually in registered care homes, the number of units providing housing-related support is much lower.
- When compared with data received from three authorities, the supply of housing-related support for people with a **physical disability** in East Sussex is seriously low.
- East Sussex has the least number of units of housing-related support for **single homeless** people when compared with the data received from three authorities.
- At first glance the comparative data for **people with drug problems** seems quite favourable. However in East Sussex nearly 70% of the total number of units is in a registered care home and none of the other authorities from which we obtained data is in this position. The number of housing-related support units available for people with drug problems is therefore very low.

## SUPPLY

- As East Sussex has no housing-related support units specifically for **people with alcohol problems** or **offenders** it clearly compares badly with the other authorities who each have a supply for these groups. This is particularly true of the 'offender' client group where the lowest number in a comparative authority is 6.5 units per 100,000 head of population.
- The number of units of housing-related support for **homeless families** is comparable with other authorities.

### 3.8 Main points about supply in East Sussex

- Supply is low and this is reinforced by comparative data.
- There is a complete lack of supply for people with alcohol problems and offenders in all districts and boroughs.
- Supply is predominantly for older people and whilst this is consistent with demographic trends it also serves to emphasise the under supply for other client groups.
- There is an emerging picture of a supply that is flexible and of providers striving to meet the multiple needs of the client group.
- The main changes to the supply between 2003 and 2004 are consistent with strategic priorities.
- The changes to the supply between 2004 and 2005 reflect decisions made by providers and the outcomes of reviews.
- One of the risks associated with sole trader providers is that they can stop the service due to personal reasons. This is illustrated by the reduction in supply.
- Supporting People is not a static programme. It is constantly adapting and changing as the market is managed and the effect of reviews is felt.

## 4 Housing-related support need

### 4.1 Introduction

To establish the priorities for the Supporting People programme we have:

- analysed the *Census 2001* data for East Sussex;
- analysed the *Indices of Deprivation 2004* (ID2004) for East Sussex published by the ODPM in April 2004;
- referred to the data that underpins other relevant strategies in housing, social care, community safety and health fields;
- obtained data from providers and commissioners about the needs of client groups;
- analysed the *Housing Support Needs Survey* data co-ordinated by the Supporting People Team for the financial year 2003/04; and
- carried out an analysis of the gaps in supply.

### 4.2 Data about East Sussex

The following information has been taken from the *Census 2001*, the *Indices of Deprivation 2004* and the *Public Health Report 2003-2004*. All the factors highlighted indicate the likelihood that there will be increasingly high levels of unmet need in the county.

#### 4.2.1 Increasing population

East Sussex has a population of 492,324 with the majority of people living in the towns along the coast. The population has increased by 4.98% since the last census and this is twice the level of percentage increase recorded for England and Wales as a whole. The largest population increase across East Sussex is 7% in the Wealden area, closely followed by Eastbourne. The Transport and Environment Department has projected that the population of East Sussex will increase further to 532,550 by 2011.

#### 4.2.2 Ethnicity

The number of local residents who regard themselves as belonging to a non-white ethnic group has almost doubled since 1991 to 11,500 in 2001. This represents 2.3% of the population of East Sussex. The proportion of residents in non-white minority ethnic groups is higher in the two urban boroughs than in the county's three more rural districts: Eastbourne 3.5%; Hastings 3%; Wealden 1.7%; Rother 2%; and Lewes 2%.

#### 4.2.3 Ageing population

In East Sussex, 28% of the population is aged 60 years or over. This is substantially higher than the regional and national average of 21%.

Rother and Eastbourne have particularly high proportions of elderly residents at 36% and 30% respectively. Hastings has the lowest at 23%.

**Nearly one in eight local residents are aged 75 or over. This is the highest proportion of people aged over 75 in England and Wales.**

Nearly 60% of one-person households are made up of a pensioner living alone, the equivalent of one in five of all local households. The highest proportions of people who will be reaching retirement age within the next 10 years live in the districts of Rother and Wealden. Rother has the highest proportion of people aged over 85 in England and Wales.

#### **4.2.4 Owner occupation**

Nearly 75% of households in East Sussex own their own home. Owner occupation is highest in Wealden at just over 83% and lowest in Hastings at 63%. A high proportion of older people in East Sussex are owner-occupiers: 61% compared to 32% living in social rented housing and 7% living in tied accommodation or the private rented sector. Owner occupation for older people is significantly higher in Wealden at 87% and Lewes at 86%.

#### **4.2.5 Private renting**

Hastings has a high number of residents living in the private rented sector: 17.8% compared with 8.8% in the South East and 8.7% in England and Wales. Hastings Housing Partnership considers that many of the most vulnerable people in Hastings live in the private rented sector with no support services or networks.

#### **4.2.6 Health and disability**

The Census 2001 identifies 97,459 people with a long-term limiting illness. This represents nearly 20% of the population.

Hastings Borough Council has 4381 people of working age who are permanently sick or disabled and ranks the highest of the 67 authorities in the South East Region. Eastbourne Borough Council ranks 7<sup>th</sup> with 3104 people, and Rother District Council 14<sup>th</sup> with 2665 people.

Approximately 10% of East Sussex residents provide unpaid care to family members, friends' neighbours or others because of long-term physical or mental health problems, disability or problems relating to old age. 20% of unpaid carers are providing such care for more than 50 hours a week.

#### **4.2.7 Deprivation**

East Sussex is the most deprived county within the South East Region. There are 12 areas in Hastings and 1 area within Eastbourne Borough Council included within the 10% of most deprived areas in England. An area of Baird ward in Hastings is ranked the third most deprived area in the South East Region.

Of the three rural districts, an area in Sidley ward (Rother) has the highest level of deprivation. 36.7% of all pensioner households in Rother and 34.5% in Wealden have no car available to them.

Over 1 in 10 people in the county are dependent on state benefits. There are nearly 23,000 people who are 'employment deprived' through unemployment or disability, ranking the county 46<sup>th</sup> out of 149 local authorities. Almost one third of these deprived people live in the Hastings borough.

#### 4.2.8 Particularly deprived areas

**Hastings and St Leonards PCT** covers the Hastings Borough Council area. The Public Health Report for 2003-2004 identified the greatest inequalities in health and therefore the greatest challenges are in the most deprived wards of Baird, Tressel, Castle, Central St Leonards, Gensing and Hollington.

According to the *Hotspots of Fuel Poverty Survey* conducted by The Centre for Sustainable Energy (CSE) and Bristol University, the Hastings wards with the worst fuel poverty are Castle and St Leonards at 39%.

Areas in the Gensing and Tressel wards in Hastings have the highest proportion of poor older people in the county and are within the 10% most deprived areas for older people in England.

**Eastbourne Downs PCT** covers three areas (Eastbourne, Lewes and Wealden). The *Public Health Report 2003-2004* identifies that significant inequalities exist at ward level. The following 10 wards are considered to be the most deprived: Langley, Hailsham East, Devonshire, Hamden Park, Upperton, St Anthony's, Seaford Central, Hailsham South, Hailsham East and Roselands. This PCT has 48,374 people of pensionable age. More people aged 65 or over hospitalised due to falls live in the Hellingly Ward.

**Rother and Bexhill PCT** covers Rother District Council. The *Public Health Report 2003-2004* identified that Sidley and the Bexhill Central Ward have significant needs due to the greatest deprivation. In the Bexhill Central Ward over 50% of residents, of all age live in single person households. Almost one third of the households are in private rented accommodation, 21% of residents are aged 75 years or more and 12.5% of residents have reported poor health and or have limiting long-term illness (27.4%). East Rother has significant deprivation on the Eastern side.

**The Sussex Downs and Weald PCT** covers most of the districts of Lewes and Wealden. The *Public Health Report 2003-2004* identified that despite overall low levels of deprivation inequalities exist at Ward level and there is a need for a health focus and community development activities in the following wards: Peacehaven East, Peacehaven West, Peacehaven North, Newhaven Meeching, Newhaven Valley, Lewes Castle, Ditchling and Ouse Valley Chiddingly and East Hoathly.

### 4.3 Homeless people with support needs in East Sussex

The *Homelessness Act 2002* placed a duty on local authorities to undertake a homelessness review in their area and produce a five-year strategy. It also increased the categories of people that can be classed as vulnerable. These homelessness strategies are comprehensive and backed with local knowledge

and statistical data on housing need. They are a valuable source of information and give an indication of housing-related support need.

The *South East Regional Housing Strategy 2004-2006* recognises that homelessness and support services are intrinsically linked as many households and individuals presenting themselves as homeless are in need of support. This view is supported by the *East Sussex Countywide Homelessness Strategy 2003-2008*.

The ODPM study of the *Support Needs of Homeless People 2003* reports that “support needs are likely to be common among all types of homeless households including families.”

### **4.3.1 East Sussex County wide Homelessness Strategy 2004**

In 2003/04, 1275 households were accepted as homeless by the three district and two borough councils. 65% of all homeless applications across the county are caused by a breakdown of relationships with friends, parents or relatives, domestic violence and loss of private rented accommodation.

In order to reduce the levels of homelessness through preventative measures it was agreed by the Strategic Forum to promote a county wide homelessness strategy. County wide joint working protocols were also produced in 2004.

This strategy identifies common areas of gaps in services that are a priority for partnership working:

- There is a need for more temporary accommodation and alternatives to bed and breakfast provision.
- There is a need for more affordable rented accommodation. Particular pressure points are with accommodation for people with a history of substance misuse: people with mental health problems; people with a learning disability; young people including 17 and 18 year olds; and access to the private rented sector and start-up costs.
- There is a need for development of low cost home ownership schemes.
- There is a need for more support to help homeless people or those at risk of homelessness access and sustain tenancies in the private rented and social rented sectors. Priority groups include: people with mental health problems; people with a learning disability, young people; and people with complex needs. .
- There is a need for better homelessness prevention services.
- There is a need for improved information and advice services and improved joint agency working.

### **4.3.2 Key indicators of housing-related support need in the Eastbourne Borough Council area**

Eastbourne Borough Council’s *Homelessness Strategy 2003/06* identified the following:

- There were 202 households placed in bed and breakfast during 2002/03.

- 36% of households accepted as homeless by Eastbourne Borough Council in 2002/03 were classed as vulnerable for the following reasons:
  - 38% mental illness
  - 25% domestic violence
  - 3% other violence
  - 14% physical disability
  - 4% young people leaving care
  - 2% old age
  - 14% other reasons
- In a two-week snapshot survey carried out across the borough by all agencies providing services to homeless people, 29 people were identified as sleeping rough or 'sofa surfing' and would not be considered in priority need.

#### **4.3.3 Key indicators of housing-related support need in the Hastings Borough Council area**

*Hastings Homelessness Strategy 2003-2008* identified the following:

- There has been an increase in the number of people presenting themselves as homeless every year for the last 5 years.
- Approximately 25% people accepted as homeless by Hastings Borough Council have complex support needs. At March 2004, 42 single homeless people were placed in bed and breakfast accommodation. A telephone survey of the 5 main supported housing providers in the town revealed that they had 10 service users who needed a higher level of support than could be provided.
- In 2002/03, 414 households were accepted as homeless. Of these:
  - 33% were under 25;
  - 20% were aged 16 or 17;
  - 30% had dependent children; and
  - the remainder were vulnerable for some other reason.
- There is a need to increase support to an additional 125 tenancies by 2008.

#### **4.3.4 Key indicators of housing-related support need in the Lewes District Council area**

Lewes District Council's *Homelessness Strategy 2003-2008* together with subsequent monitoring information identified the following:

- 33% of households accepted as homelessness in 2002/03 and 2003/04 were vulnerable because of old age, physical disability, mental illness, learning disability or other special reason. Of these, almost 50% (15% of total acceptances across all households) had mental health needs or learning disabilities.
- 7% of all homeless acceptances in the two years ending 31 March 2004 were for people with physical disabilities.

The *Lewes District Housing Needs Survey (2003)* found a significant need for:

- disability adaptations;

- high quality sheltered housing for older people in the Havens area; and
- housing with care & support (8.3% of respondents in need).

However, the largest household group of respondents in need were single people, the majority being under the age of 24.

The review of homelessness and the subsequent publication of the Homelessness Strategy in July 2003 highlighted the need for people with mental health problems to receive support to sustain a tenancy and prevent any repeated use of bed and breakfast accommodation.

#### **4.3.5 Key indicators of housing-related support need in the Rother District Council area**

Rother District Council's *Homelessness Strategy 2003-2008* identified the following:

- In 2003/04, 509 homeless applications were received and 51% of applications were accepted as homeless. Of these:
  - 27 were aged 16 or 17;
  - 29 were an older person;
  - 12 people had a physical disability;
  - 48 people had a mental health problem;
  - 5 were ex-offenders, on-remand, in custody or a prisoner; and
  - 13 were at risk of violence, of which 11 were at risk of domestic violence.
- Rother's *Housing Needs Survey 2001* found that over 50% of respondents expressing a need for housing were young people seeking to leave home and live independently.
- Many single homeless people rotate or 'sofa surf' with friends and family.
- 11% of responses to the *Housing Needs Survey 2001* identified someone in the household with a mental health problem in need of accommodation in the next 5 years.

#### **4.3.6 Key indicators of housing-related support need in the Wealden District Council area**

Wealden District Council's *Homelessness Strategy 2003-2008* identified the following:

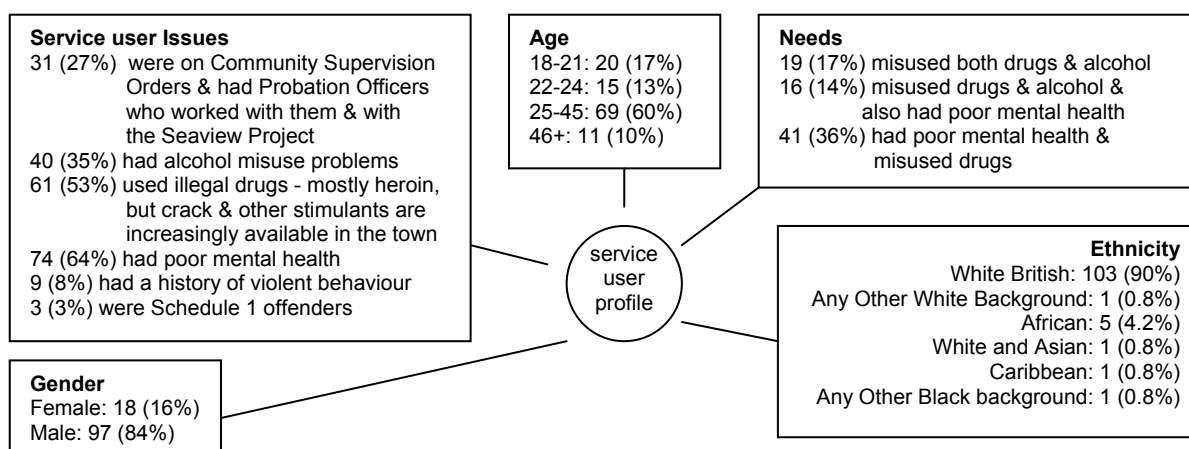
- There is an increase in the number of all homeless households.
- This is particular under-supply of supported housing for vulnerable household groups.
- Increasing numbers of households applying for housing have support needs which are varied and complex.
- Wealden District Council accepted 331 households as homeless in 2003/04 within those:
  - 11 were aged 16 or 17;
  - 35 were older people;
  - 2 were care leavers;

- 1 had a learning disability;
- 29 had a mental illness;
- 23 had a physical disability;
- 6 were fleeing violence; and
- 25 were homeless due to domestic violence.

### 4.3.7 A profile of the support needs of single homeless people

Set out below is a profile of the 112 single homeless service users of the Seaview Project in Hastings between April 2003 and December 2003.

The profile clearly demonstrates the complex and multiple support needs of single homeless people: 74 of the 112 service users had poor mental health; 61 used illegal drugs; 41 had poor mental health **and** misused drugs; and 31 were on Community Supervision Orders. 10% of this profile is non-white and this gives an indication of the effect of social exclusion on this sector of the community.



## 4.4 People with drug and alcohol problems

Specific housing-related support needs information is difficult to obtain. The ODPM report in 2003 on the support needs of homeless people concluded that “housing-related support fits into a continuum of care that addresses the damage that can be caused by substance misuse”. The Supporting People team hope to work with the East Sussex Drug and Alcohol Team (DAAT) to carry out specific research in this area. The data available to date is:

- There is an East Sussex Public Service Agreement (PSA) target to increase the number of ‘problem’ drug users successfully completing drug treatment programmes to 105 clients a year.
- The DAAT have a target to reduce drug-related deaths across East Sussex by 20% by March 2004. This target was out performed in 2003/04.
- The DAAT also have a target to develop supported housing options and consistent tenancy support with Supporting People and housing providers for drug users, ensuring support is integrated with agreed care packages before, during and after treatment. (DAAT Audit Summary 2004).

- The DAAT report the following profile of clients in 2004: around 70% are unemployed; 20% admit to stealing from shops in last 30 days; the ethnicity of 93% is White British; two thirds of clients are male; and the average age is around 29.
- An analysis of interviews with suspected domestic violence perpetrators in custody at Hastings police station between 5 April and 7 May 2004 found that of the 25 people, interviewed 84% were drunk.
- During 2000/01 the highest number of drug-related deaths occurred in Eastbourne PCT area followed by Hastings and Rother.
- During 2003, incidents of drug-related crime were highest in Hastings (Gensing Castle and Central St Leonards wards) followed by the Eastbourne (Upperton and Devonshire wards) all of which are some of the most deprived wards in the county.
- Hastings Borough Council's draft alcohol strategy demonstrates the increase in young people who misuse alcohol and the link of alcohol misuse to health needs and domestic violence. The Hastings and St Leonards PCT estimate that 20% of patients presenting to primary care teams are likely to be excessive drinkers.

#### **4.5 People at risk of offending, ex-offenders and young offenders**

A *Youth Offending Analysis* conducted by East Sussex Youth Offending Team (YOT) concluded there is a need for more independent living options for vulnerable young people at risk of offending, including supported independent living arrangements.

**In the 15-17 year old age range there is estimated to be a need for housing-related support for 30-35 young people each year.**

Notifiable offences recorded by the Police from April 2000 to March 2001 (published by the Home Office) demonstrate that the rate of crime in Hastings is double the rate per 1000 population for England and Wales. The districts of Lewes, Rother and Wealden have rates lower than the rate for England and Wales. The rates for Eastbourne, are on average, similar to the national picture.

Figures produced by the Sussex Crime Reduction Partnership (CDRP) for the first six months of 2004/05, again show that recorded crime is highest in Hastings closely followed by Eastbourne.

The Public Service Agreement to reduce crime focuses primarily on Hastings as violent crime is featured as one of the main issues for the town. It has the 25<sup>th</sup> highest rate of violence against the person of all 278 CDRPs in England and Wales,

Out of 28 CDRP family areas, Hastings ranked as the 5<sup>th</sup> highest for violence against the person and the 4<sup>th</sup> highest for sexual offences.

#### **4.5.1 Analysis of the needs of convicted offenders by the Probation Service from July 2003 - Dec 2003**

The following summary of data from the Probation Service indicates the range of factors that predispose towards offending behaviour. It highlights the complex needs of offenders and the need for housing-related support.

	<b>accommodation issues</b>	<b>financial management</b>	<b>drug misuse</b>	<b>alcohol misuse</b>	<b>emotional well being</b>
Hastings	87	38	52	104	109
Eastbourne	92	37	68	78	108
Lewes	34	10	18	41	41
<b>Total</b>	<b>213</b>	<b>85</b>	<b>138</b>	<b>223</b>	<b>258</b>

Note: Many offenders will be double counted within these figures. For example, an offender with issues relating to accommodation, drugs and alcohol will be counted within each of the categories.

#### **4.6 People with mental health problems**

The ODPM report on the *Support Needs of Single Homeless People 2003* indicates that when single homeless people apply to local authorities their vulnerability is most commonly exacerbated by mental health problems.

Wealden District Council reports in its *Homelessness Strategy 2003-2008*, that there are increasing numbers of households with varied and complex mental health problems applying for housing. During 2002/03, 25 households were vulnerable to mental health issues. This number increased to 29 in 2003/04.

Hastings Borough Council reports in its *Housing Strategy 2002-2007* of an exercise carried out in 2001 to identify the main issues surrounding people deemed as having complex needs. They found that 100% of the group surveyed were identified as vulnerable due to some degree of mental illness or personality disorder and 93% had a history of failed tenancies.

Lewes District Council's *Homelessness Strategy 2003-2008* draws attention to the fact that 9.3% of households accepted as homeless in 2002/03 were vulnerable either because they had a learning disability or a mental health problem.

11% of response to the Rother District Council's *Housing Needs Survey* in 2001 identifies someone in the household with a mental health problem in need of accommodation in the next 5 years.

The Mental Illness Needs Index (MINI) indicates that East Sussex has areas where the incidence of mental illness is very high especially in Hastings and St Leonards.

The annual report of the Director of Public Health indicated in 1999 that the Standardised Mortality Rate for Suicides for Hastings and St Leonards PCT area is very high at 174. The national average is 100.

## 4.7 Young people (16 –18 year olds)

There were 308 county wide joint assessments (between housing and social services) of homeless young people during 2003. A small proportion of these young people were placed under the Children (Leaving Care) Act 2000. These 16 and 17 year olds (or 18 to 21 year olds in full time education) are described as 'relevant children' or 'looked after children' and have their housing and support costs funded by the Social Services Department. Many of remainder would benefit from a Supporting People service.

County wide, the number of young people within the population is less than for the national average. However in Hastings, over 25% of the population is under 20 years old and 46% of the children growing up to become young adults in the town are living in relative poverty. This is double the rate for the rest of the county and increases the likelihood of a need for housing-related support.

For the year ending 2002, 19% of all homeless people that Hastings Borough Council had a duty to were in priority need because they were 16 or 17 years old.

During 2002-2003 Eastbourne Borough Council placed 159 households in temporary accommodation and 23 of these were single people in the age range 16-25. Eastbourne Borough Council's *Housing Strategy 2003–2008* identified that over 50% of young people between 16 and 24 are living with parents. Only 1% were homeless although 22% had been homeless at some time. 28% moved to their current home within the last 6 months indicating the transitory pattern of young people in the town.

## 4.8 Women at risk of domestic violence

There were a total of 7 murders in East Sussex during 2002 and 6 of these were related to domestic violence (source: Hastings and St Leonards PCT *Public Health Report 2003/04*)

The numbers of recorded domestic violence incidents (including repeat incidents) for the **first 6 months of 2004** are:

- Eastbourne 615
- Lewes 400
- Hastings 880
- Rother 369
- Wealden 445

Source: CADDIE (East Sussex Crime and Disorder Data Information Exchange)

There is a Public Service Agreement Target to reduce the numbers of repeat victims of domestic violence in Hastings. In quarter 1 of 2004, 38% of all incidents were repeat with 37% in quarter 2. Repeat incidents are high in Rother at 40% in quarter 1.

A voluntary organisation in Hastings that offers a 'one-stop shop' service for victim support services sees over 1000 victims a year. *Hastings Homelessness Review 2003* reported that domestic violence accounts for 18% of all homeless cases accepted by the council.

## 4.9 People who are asylum seekers and refugees

Asylum seekers are not eligible for Supporting People grant until they are given leave to remain and they become refugees.

The Asylum Team within East Sussex County Council's Social Services Department has advised that numbers of asylum seekers have 'reduced significantly' since the *East Sussex Supporting People Shadow Strategy* was published. However, there is still likely to be an ongoing need for those people given leave to remain and this need will be kept under review.

The Joint Centre for Scottish Housing Research at the University of St Andrews reports that from April 2003 to March 2004, 5 out of the 338 new Supporting People service users coming into the county were from outside the UK.

For the last 9 months of 2003, there was an average of 56 contact episodes a month at the Hastings Migrant Helpline Service about moving on queries from people granted leave to remain. A contact episode is recorded if more than 15 minutes worth of work is generated as a result of a contact. A separate client contact episode is recorded for each issue raised.

The Migrant Helpline One Stop Service in Hastings is the main point of access for locally dispersed asylum seekers, refugees and people with leave to remain. The service sees a wide range of nationalities. At present, 48% of service users are Iraqi.

## 4.10 Teenage pregnancy

The Office for National Statistics and the Teenage Pregnancy Unit recently updated its teenage conception data and this shows a 9.9% reduction in the conception rate of young women between the ages of 15 and 17 since 1998.

1998		1999		2000		2001		2002	
number	rate	number	rate	number	rate	number	rate	number	rate
336	39.8	323	38.6	324	38.6	262	308	315	35.9

(The rate refers to the number of conceptions per 1000 women aged 15-17).

The rate is slightly higher than the average for the South East area

The East Sussex Teenage Pregnancy Strategy has a target to reduce teenage pregnancy conceptions by 50% by 2010. The number of teenage conceptions is highest in Hastings, Eastbourne has the second highest rate.

Not all of this client group will require housing-related support. For example, Eastbourne District Council's *Housing Strategy 2004-2008* identifies the need for a housing-related support service for teenage parents. 32 young parents within Eastbourne became homeless in 2002-2003 and of these, approximately 9 required intensive support.

## 4.11 Older people

There is major unmet housing-related need in this varied client group.

- East Sussex County Council's *Services for Older People: Needs Analysis* projects that there will be 9281 older people in East Sussex being affected with 'significant dementia'.
- The *Extra Care Housing Strategy 2003-2008* identifies the need for 392 extra care housing units across East Sussex: 80 in Eastbourne Borough Council; 40 in Hastings Borough Council; 72 in Lewes District Council; 80 in Rother District Council; 120 in Wealden District Council. Plus, the strategy proposes that the more rural areas of Wealden District Council and Rother District Council are the priority areas for the development of these services. In the last two years, 53 units have been provided by the two new Supporting People services.
- The *Extra Care Housing Strategy 2003-2008* also identifies the need for an extra 150 extra care housing units for people with dementia.

When a focus group of older people were consulted about their housing-related support needs during the consultation on this strategy (see Appendix 7), many reported they would like the same service as sheltered tenants but delivered to their own home. Lifeline services are considered to be vital for 'piece of mind'. Help with transport is important to prevent isolation and exclusion. Likewise someone to push a wheelchair is essential. People reported that they want help with practical things such as changing bedding and light bulbs, gardening, spring cleaning, hanging washing on a line, and safety checks. This feedback has helped to shape our five-year plan and emphasises the need expand Supporting People services to owner-occupiers.

### 4.11.1 Need in the five district and borough council areas

Eastbourne Borough Council has identified that between 2003 and 2008, its elderly population will require 920 new units of housing with a housing-related support service by 2006 (*Housing Strategy 2003-2008*).

Hastings Borough Council identified in its *Housing Strategy 2002-2007*, a need for aids and adaptations to older people's housing to help maintain independence. The stock condition survey found that of all households with a problem or serious problem maintaining their home, 41.5% are pensioner only households.

Older People featured prominently in the *Lewes District Housing Needs Survey 2003* findings in relation to disability adaptations, sheltered housing and the need for care and support services. The district council has the need for sheltered housing with extra care under review.

Rother District Council's *Housing Strategy 2004-2009* considers older people's support services (including those for people with mental health needs) the number one priority. The strategy also endorses (through a housing needs survey) the need for sheltered housing services.

Wealden District Council's *Needs Survey*, undertaken in 1999, forecasts substantial increases within the age band 85+ over the period 1991-2011. 60% of Wealden District Council tenants are over 55 and 47% are over 65. There are concerns about suitability of accommodation to meet the needs of the ageing

population. There is a need to expand the support services for older people including extra care provision.

## **4.12 People with a learning disability**

A survey of service users and carers was conducted in 2003 to contribute to the East Sussex Learning Disability Housing Strategy. 90% of the questionnaires sent to service users and 50% of the questionnaires sent to carers were returned. The main findings were:

- 72% of service users lived with families but only 42% would choose to if alternative housing options were made available.
- 11% of service users were in residential homes, 11% in supported housing, 3% in sheltered housing and 6% lived alone. 18% would prefer to live alone but with support.
- 10 carers were over 60 and 6 were over 70. Conversely, 75% of users were less than 40 years old.

In April 2003 East Sussex County Council published a *Needs Analysis of Adult Learning Disability in East Sussex* and reported that:

- The approximate number of adults in East Sussex having a learning disability is 11,157 (mild 9583, moderate or severe 1574). These figures take into account prevalence estimates from the *Valuing People* White Paper.
- There are 151 adults with learning disabilities who live with parents aged 65 or over.
- Approximately 783 Sussex funded people with a learning disability are in residential care homes and approximately 1154 East Sussex funded people with a learning disability attend day services in East Sussex.
- A survey of service users within residential care homes and day services reported that:
  - 31% of users report a physical health care need due to their learning disability;
  - 15% of users need support from a mental health care professional;
  - 65% report needing specialist housing advice (this does not include people living happily at home);
  - 52% require special education opportunities;
  - 25% require work-based training;
  - 72% require assistance to enable them to use transport;
  - 86% require support to enable them to build relationships and take part in ordinary leisure opportunities to improve quality of life, to tackle social inclusion and encourage healthy lifestyles; and
  - 75% require help with claiming benefits they are entitled to.

When an advocacy group of people with a learning disability were consulted about their housing-related support needs during the consultation on this strategy (see Appendix 7), they reported a lack of suitable accommodation available.

Further joint work is planned to quantify the need for housing-related support for people with a learning disability (See 5.8).

#### **4.12.1 Young people with a learning disability**

In East Sussex there are 11 special needs schools and 27 colleges and training schemes providing further education and skill training opportunities for young people with a learning disability or mix of disabilities.

Social Services Transition Planning and the Connexions Service estimates that each year between 12 and 20 young people with learning disabilities, currently at school or college could benefit from accessing a housing support service. Many of these young people will not qualify for services from Social Services once they are classed as adults and moreover have aspirations towards independent living.

### **4.13 People with a physical disability or sensory impairment**

*East Sussex Three Year Joint Strategic Plan for Services to Disabled Adults of Working Age 2003-2006* estimates there may be 22,400 age-disabled people of working living in East Sussex (aged 16-64). Of this number it is estimated that 6250 have a sensory impairment.

There were nearly 10,000 recipients of Disability Living Allowance as at 31 August 2002. As at March 2003, there were 455 people registered deaf and 495 registered blind. This is a small proportion of the estimated number of people with these impairments as people can choose not to register.

738 people use the services provided by or through the East Sussex Social Services Department but similarly not all disabled people wish for or need social services.

- In Eastbourne, 21% of all households contain someone with a disability or long-term illness; nearly 40% live alone with nearly one-third living in social housing. 65% are over 60. There are an estimated 1150 wheelchair users in the town.
- The *Hastings Housing Strategy 2002-2007* recognises there are 3424 households within the area who have stated a need for aids and adaptations.
- The *Lewes District Housing Needs Survey 2003* identified that 10% of respondents expressing a need for alternative housing stated that they required accommodation designed or adapted for a disability.
- The *Rother District Stock Condition Survey 2001* identified that 3.1% of households that responded had a member of the household with a physical disability. In Bexhill (within Rother District Council) out of 330 applicants registered for re-housing in 2004, 195 have some kind of disability (physical disability is not separated out from other disabilities).

- The *Wealden District Housing Need Survey 2001* identified that out of 7800 households with a special need 4860 had a difficulty walking.
- There are 4110 people across East Sussex from an ethnic group other than White British who have a limiting long term illness (Census 2001).

The Sussex Association for Spina Bifida and Hydrocephalus response to the consultation on this document identifies a need for more housing-related support services to people with both physical and learning disabilities.

#### **4.14 People from black and minority ethnic (BME) groups**

Section 4.2 identifies the increasing population of people from BME groups. Sompriti (a community organisation working with black people and people from ethnic minorities in East Sussex) report that national census figures underestimate the number of people from BME groups as they may have less understanding of statutory documents sent through the post compared with people formally educated in this country. Consequently we expect the population of people from BME groups in East Sussex to be higher than the 11,500 number indicated.

Sompriti carries out a service to over 550 BME 'members' from a wide range of ethnic groups and reports an increasing need for support from Spanish and Portuguese speaking people. In the first quarter of 2004, Sompriti carried out 160 interviews and housing was identified as an issue that needed further support in a large number of cases.

Currently there is a lack of direct evidence quantifying the needs of people from BME groups. However, from Sompriti's experience of providing bi-lingual casework support to people from BME groups in East Sussex, there may indeed be a need for specialised housing-related support services. Further development of the initial interviews conducted by Sompriti will help specify the type of support required, where gaps may exist and where this fits within the Supporting People programme.

Supporting People services need to be accessible and able to cater for the individual needs of this diverse group.

#### **4.15 People with HIV/AIDS**

Nationally people with HIV/AIDS are considered a vulnerable group who can benefit from the Supporting People programme. The number of people with HIV/AIDS is increasing and the local Terence Higgins Trust has advised it has a client base of just over 100 people who are HIV positive. There are two clinics in East Sussex for people with HIV/AIDS and both of these report having approximately 100 people in attendance.

The Health Protection Agency reports that in 2002 a total of 244 people in East Sussex were living with HIV. This is a 34% increase from 2001. 81 of these people are within the Eastbourne Downs PCT area.

However, there is no direct evidence that there is a major need for housing-related support services for people with HIV/AIDS in East Sussex but this will be kept under review.

## 4.16 Travellers

There is a relatively large proportion of travellers in East Sussex. We know there are 27 pitches in East Sussex, which accommodate approximately 100 people including 50 children. Some travellers receive a housing-related support service funded by the East Sussex Supporting People programme. The Supporting People team are also aware that there are a number of camped travellers living in transit sites who have an urgent need for housing-related support. East Sussex County Council is concerned about the general lack of support (including housing-related support) for these people particularly at the short-term sites.

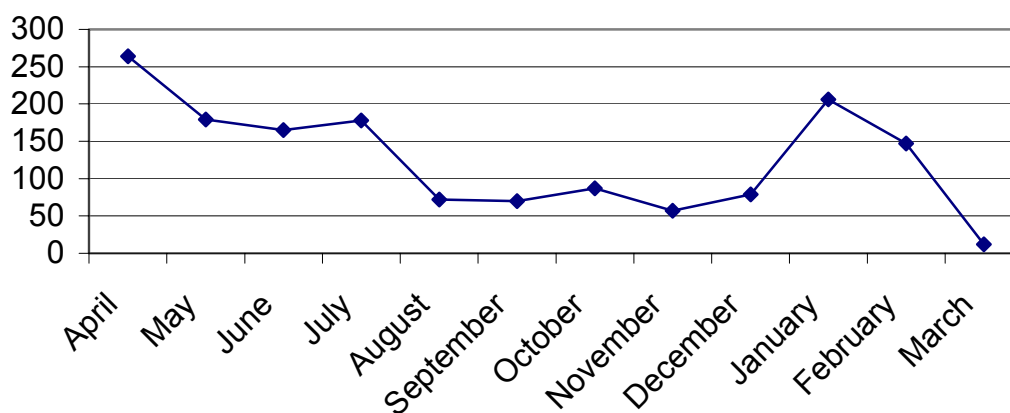
## 4.17 Housing Support Needs Survey data 2003 - 2004

To obtain more robust housing support needs data a *Housing Support Needs Survey* was carried out by the Supporting People team in partnership with front-line social services staff and housing teams across the county. A form was used to record the needs of service users presenting with a housing-related support need. The information was held in a specially made database.

The frequency of response to the survey has been variable. Some direct service user contact teams have consistently completed and submitted forms; others have not returned forms. Consequently the data is skewed. The data is, however, valuable when considered as 12 'monthly snapshots' of housing support need as recorded by service user contact organisations. It clearly shows an overall need for housing-related support that is not being met.

### 4.17.1 Survey results

The graph below shows the number of forms completed each month for the year from April 2003 – March 2004.



### 4.17.2 Significant findings

The *Housing Support Needs Survey* demonstrates high levels of unmet need:

- All client groups are represented in the survey.
- The need for services for people with a **physical disability** appears to be overwhelming. In each of the 12 months and in each of the 5 districts this client group recorded the largest number of incidences of need. It is possible that the high recording levels for people with a physical disability concerns the need for physical adaptations rather than housing-related support. However, the figures could be indicating a far greater need than previously recognised. More in depth research is needed into the specific requirements of this varied client group.
- People with a **learning disability** or **mental health** issues are also consistently recording high levels of need.
- People from a **BME** groups are disproportionately represented in the sample. This could be because, people from these groups in general experience a greater sense of vulnerability and isolation in comparison with the majority population resulting in an increase in the overall need for housing-related support. (See section 3.14)

### 4.17.3 Analysis of findings at ward level

These figures refer to recorded 'episodes of need' and not necessarily individuals. Some people had more than one reason for requiring support (if they are physically disabled and have a mental health problem for example). The main findings at ward level were:

- Recorded need is highest in the most deprived wards as defined in the *ODPM Indices of Deprivation 2004*.
- People living in the Langney and Devonshire wards (two of the most deprived wards in Eastbourne) each account for nearly one third of the cumulative recorded need.
- People living in Central St Leonards ward, the most deprived ward in Hastings, account for 16% of the recorded need.
- People living in Newhaven Meeching and Peacehaven North wards, the most deprived wards in Lewes, account for the highest recorded need.
- People living in Bexhill Central ward account for 14% of the recorded need in Rother District Council.
- People living in Hailsham East ward account for 13% of the recorded need in Wealden District Council.

## 4.18 Summary of main issues relating to need

- There are pockets of **deprivation** and hence vulnerable people with housing-related support needs across the whole of East Sussex.
- There are very **high levels** of need.
- It is a challenge to capture and quantify housing-related support needs. More **research** needs to be carried out for all groups. In particular there is potentially a huge need from people with a physical disability and research is needed into the specific needs of this group.
- There is a need to carry out research with people from **BME** groups to establish whether there is a need for specialised services for this group.
- There is a need for a range of services for **older people** across the county regardless of tenure.
- There is a county wide picture of **single homeless people** whose vulnerability is increased by a range of need that are often complex (including mental health needs).
- The support needs of **offenders** can be multiple and complex as reflected in the survey by Seaview in Hastings.
- The target to increase the number of people successfully completing **drug** treatment highlights a need for support to promote the social inclusion of this client group.
- People with a **learning disability** have few options. Many aspire to receive housing-related support services on a permanent basis as an alternative to residential care or living with family.

## 5 Towards a commissioning strategy

### 5.1 Definition of commissioning

The ODPM definition of commissioning is “the strategic activity of assessing needs, resources and current services and developing a strategy to make the best use of available resources”. (Taken from *Practical Guidance on Joint Commissioning, Department of Health 1995*)

For the purpose of this strategy commissioning has the following simple definition, although it is acknowledged that within this definition the role of service reviews, ongoing monitoring and procurement processes (including contractual matters) are not explicit.

**“A strategic view of services and resources set against needs and a plan to get the best fit from available resources.”**

Terry Bamford – *Commissioning & Purchasing (Routledge 2001)*

### 5.2 Commissioning aims

The Strategic Forum will continue to work in partnership to achieve the following commissioning aims which have been divided into strategic planning and operational aims:

#### 5.2.1 Strategic commissioning aims

- **increase the overall supply** of strategically relevant housing-related support units in the county including ring-fencing all savings made through reviews; The budget cuts for 2005/06 preclude the achievement of this aim (see section 5.5).
- increase the proportion of **floating support** to all client groups; Only 11% of the market is floating support. This type of service provides can respond to individual support needs flexibly and requires no move-on accommodation.
- keep under review the **priority client groups** for whom service developments will be promoted;
- extend Supporting People services to vulnerable people in the **private rented** and **owner-occupier** sectors; The current programme delivers almost exclusively to those living in the social housing sector. There is a need to deliver services, according to strategic priorities, to people within their own homes whether private owner occupied, private rented or rented social housing.
- keep under review the need for **specialist services** for people from a black and minority ethnic (BME) group;

- develop the market so that new services are accessible **county wide** where appropriate;
- ensure all new and re-provisioned services are **jointly commissioned** through a clear needs-led process;
- encourage investment from **other income streams** including private monies; and
- support the positive features of a **diverse population of providers** (such as their ability to give specialist support) whilst encouraging the merger of small providers where there are administrative or other benefits.

### 5.2.2 Operational commissioning aims

- encourage providers and service users to **contribute to service developments** (a Communications Plan has been developed and is available on our website);
- promote **positive outcomes** for people using Supporting People services;
- ensure services for vulnerable people are of a **high quality**;
- ensure all services are **accessible** to all and appropriate to individual need including people from a black and minority ethnic (BME) group;
- ensure **value for money** is achieved within all services;
- adopt the Supporting People **monitoring and review** system where possible for all housing-related support services regardless of how they are funded; and
- treat our local authority (internal) **providers** in the same way as external providers in terms of best value and service developments.

### 5.3 Priority client groups for the Supporting People programme

**There is a severe lack of supply to meet the housing-related support needs of vulnerable people in East Sussex and all client groups are a priority for housing-related support services at the moment.**

We have established the client groups that currently have the **highest priority** for service development by analysing current supply data alongside the needs data to produce a gap analysis and analysing comparative supply data.

A gap analysis concludes that:

- Supply is predominantly for older people and whilst this is consistent with demographic trends it also serves to emphasise the under supply for other client groups. There are 238,437 people aged 20 to 59 living in East Sussex (Census 2001). The supply of 1454 units (the number of units remaining when the supply for older people is discounted) means the **supply can address housing-related support needs for a mere 0.6% of the adult population below pensionable age** and this does not include meeting the needs of 16 to 19 year olds.

## COMMISSIONING

- Some groups have less supply to meet their need than others. People with a **learning disability** are particularly under provided for.
- Some client groups have very **few or no specific services: offenders; people with a physical disability; and people who misuse drugs and alcohol.**
- There are no specialist services for people from a black and minority ethnic (**BME**) background.
- The needs of homeless people are often multiple and challenging and the client group single homeless people with support needs embraces the client group offenders, people who misuse alcohol and/or drugs and people with mental health problems. This client group will be known as **single homeless people with complex needs.**

The client groups which have the **highest priority** for new housing-related support services across East Sussex (not in priority order) are therefore:

- **older people;**
- **people with a learning disability;**
- **people with a physical disability;** and
- **single homeless people with complex needs** (including offenders, people with mental health problems and people with substance misuse problems).

There is a need for more research to establish the precise support needs of people with a physical disability before specific services are commissioned. The overwhelming potential need uncovered could be about a need for an aid or adaptation to promote independence.

We are also aware that each district and borough council area will have its own priority groups for service development and that particular groups may have a higher priority in particular localities.

### **5.3.1 Desired outcomes for service users and strategic partners within the priority client groups**

This section should be read with reference to the annual plan (section 5.8), the agreed list of services (appendix 15) and the 'wish list' of services (appendix 16).

#### **Older people**

Outcomes for older people	<p>To increase the quality of life and independence of vulnerable older people living in their own home, including owner-occupiers and those in the private rented sector.</p> <p>To maintain, and preferably reduce, the number of people supported in residential care.</p> <p>To reduce the fear of crime amongst older people.</p> <p>To prevent unnecessary admission to hospital, nursing care and</p>
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## COMMISSIONING

	<p>residential care.</p> <p>To facilitate early discharge from hospital following acute illness.</p> <p>To prevent falls and slips.</p> <p>To delay registered care admission.</p> <p>To improve the rate of chronic disease recovery.</p>
Outputs	<p>Remodelled sheltered housing services.</p> <p>Increase in community based services for frailer older people.</p> <p>Floating support type services extended beyond the social housing sector.</p> <p>A handyperson/safety check service for older people regardless of tenure.</p> <p>Services open to all and easily accessible.</p> <p>Increase of people with dementia in services.</p>
Measure	<p>Positive feedback from service users.</p> <p>Increase in the number of older people supported in the community.</p> <p>Reduction in PCT figures on falls.</p> <p>County wide surveys of older people by local authority and voluntary sector including specialist groups.</p> <p>Achievement of relevant Council Plan targets achieved.</p> <p>Developing local performance indicators within Supporting People 'steady state' contracts (see section 5.8).</p>
New services that are funded	35 accommodation-based extra care units for frail elderly people in Rother District Council.
Planned services which cannot be funded due to budget cuts	<p>County wide floating support service to older people who are owner-occupiers or living in the private sector to include handyperson and safety check services.</p> <p>40 accommodation-based units for frail elderly people in the Lewes District Council area.</p>

### **People with a learning disability**

Outcomes for people with a learning disability	<p>To increase the independence and social inclusion of people with a learning disability.</p> <p>To offer a choice of housing and support solutions to people with a learning disability.</p> <p>To ensure young adults leaving residential schools are not forced to live in residential care or parental home.</p> <p>To ensure service users reach their full potential within the community.</p>
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## COMMISSIONING

	To ensure service users from a range of backgrounds (including BME groups) access the services.
Outputs	Remodelled registered care services to deliver housing-related support. A range of supportive move-on accommodation. Small-scale housing schemes. The profile of service users reflects the ethnic make up of client group. A decrease in the number of service users living unnecessarily in residential care.
Measure	Positive feedback from service users. Social Service Department Independent Living Plan statistics. Develop local performance indicators. Council Plan Objectives met
New services that are funded	2 units of accommodation-based support services in Lewes. 2 units of accommodation-based support in Wealden. 6 units of accommodation-based support in Wealden. 6 units of move-on support in Eastbourne 6 units of accommodation-based units in Hastings
Planned services which cannot be funded due to budget cuts	Expansion of services such as the existing Community Support and Independent Living services.

### People with a physical disability

Outcomes for people with a physical disability	To ensure people with a disability are not socially excluded. To ensure people with a physical disability are housed and supported to maximise their independence and enjoyment of life. To increase the number of adults with disability living at home
Output	The development of housing units that are easily accessed by people with a disability as well as able bodied people More detailed research into the precise needs of people with a disability.
Measure	Positive feedback from service users.
New services that are funded	None.

## COMMISSIONING

Planned services which cannot be funded due to budget cuts	16 accommodation-based units (location to be researched).
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### Single homeless people with complex needs

Outcomes for single homeless people with complex needs	<p>To reduce the need for people to be housed temporarily in bed and breakfast and temporary accommodation</p> <p>To prevent the need for rough sleeping.</p> <p>To help prevent clients resorting to a criminal life style.</p> <p>To achieve a reduction in anti-social behaviour.</p> <p>To improve the quality of life for people with a chaotic lifestyle.</p> <p>To achieve a reduction in recidivism for drug and alcohol misusers.</p> <p>To enable adults with mental health problems to be socially included and live as independent a life as possible.</p> <p>To ensure people with a number of complex needs live an independent and fulfilled a life as possible.</p>
Output	<p>Develop floating support services.</p> <p>Through put of service users in services</p> <p>The profile of service users reflects the ethnic make up of client group.</p> <p>A decrease in the number of people rough sleeping</p> <p>An increase in the number of individuals who are successfully housed after drug treatment.</p>
Measure	<p>Service reviews.</p> <p>District and borough statistics.</p> <p>Crime Reduction Partnership statistics.</p> <p>Drug and alcohol programme</p> <p>Council Plan objective on drug treatment achieved</p> <p>PCT data on use of emergency beds for people with long-term conditions.</p> <p>Profile of service users.</p> <p>Develop local performance indicators.</p>
New services that are funded	<p>11 accommodation-based units in Hastings.</p> <p>48 units of floating support across Hastings, Eastbourne and Rother.</p>

## COMMISSIONING

Planned services which cannot be funded due to budget cuts	<p>85 county wide floating support units for people with substance misuse difficulties.</p> <p>48 county wide floating support units for people with complex needs.</p> <p>Support for transit sites for travellers.</p>
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### 5.4 Shaping the 'market'

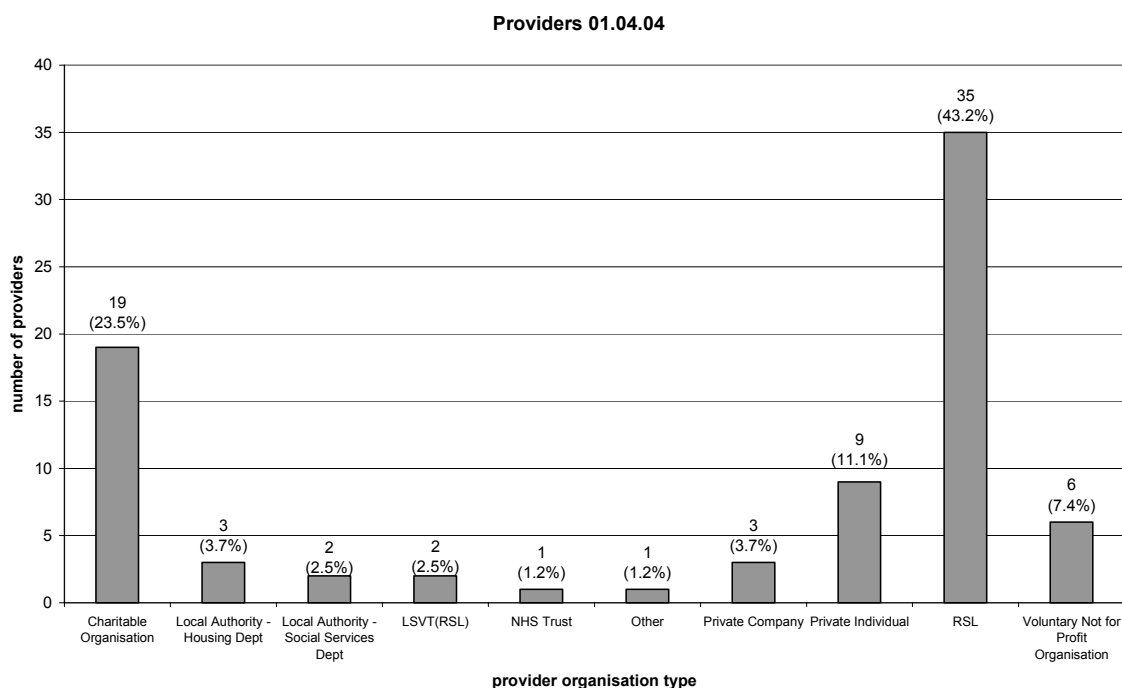
Whilst we acknowledge that the Supporting People market is not a free market, the following factors influence the shape of the Supporting People market and help to determine how we move forwards:

- type of providers;
- geographical distribution of the programme;
- other social care and support provision;
- cross authority and regional issues;
- service reviews and value for money;
- feedback from providers and service users;
- need and demand for housing-related support services (see chapter 4); and
- available resources (see section 5.5).

These are examined in detail below.

#### 5.4.1 Providers as at 1 April 2004

As at 1 April 2004, the supply of housing-related support services was provided by a diverse group of 80 providers.



## COMMISSIONING

In comparison to the budget size this number of providers is high. The types of organisations providing Supporting People services in East Sussex include large national housing associations (RSLs), small charities, private individuals and housing departments.

There is a comprehensive list of providers at Appendix 11.

- In addition to these providers there are also four Home Improvement Agencies (HIAs) that provide a community-based service largely to older people.
- All providers, with the exception of Hyde Housing Association and NCH Action for Children, delivered housing-related support services within the county before April 2003.
- Two of the five district and borough councils in East Sussex have been through a large-scale voluntary transfer (Hastings and Rother) and the remaining three are going through an Options Appraisal. It is therefore possible that the number of 'internal providers' will be reduced.
- The number of individual providers ('sole traders') has dropped from 13 to 9 since March 2003. One was decommissioned following a service review. The other three ceased because the service user moved out and the provider chose to stop operating.
- The Strategic Forum will not encourage the development of services by individual sole traders due to issues of risk.

### 5.4.2 Distribution of the programme

The table below shows the percentage distribution of the programme and maximum contract commitment for 2004/05 by client group (as defined by the provider themselves). There is a full breakdown of the contract values by client group and area in Appendix 12.

Primary client group	Maximum contract commitment*	% of total
Older people with support needs	£3,826,804.86	28.40%
People with mental health problems	£3,160,729.98	23.45%
People with learning disabilities	£1,527,855.10	11.34%
Generic	£1,027,461.25	7.62%
Women at risk of domestic violence	£815,137.54	6.05%
Single homeless people with support needs	£712,078.68	5.28%
Frail elderly	£357,186.15	2.65%
Homeless families with support needs	£309,311.45	2.30%
Teenage parents	£230,729.30	1.71%
People with drug problems	£163,200.78	1.21%
Travellers	£126,196.56	0.94%
People with a physical or sensory disability	£37,640.53	0.28%
<b>Totals</b>	<b>£13,476,802.48</b>	<b>100.00%</b>

\* The total contract commitment is more than the total Supporting People grant as it includes the cost of services where some people pay for the service themselves.

## COMMISSIONING

Although older people have the most services and the highest percentage of the programme at 28.4% this is still comparatively low and is mainly sheltered housing (see chapter 3).

The table below shows the distribution of the maximum committed programme in 2004/05 across the districts and boroughs.

District or Borough	Maximum committed contract value	% of total commitment	Population 2001 Census
Eastbourne	£4,618,008.92	34.27%	89,667
Hastings	£2,786,784.64	20.68%	85,029
Lewes	£1,834,494.90	13.61%	92,177
Rother	£1,971,121.50	14.63%	85,428
Wealden	£2, 266,392.53	16.82%	140,023

Whilst this data provides a firm steer on future shaping of the market should funds become available, current services are in demand and consequently there is **no intention to reduce the programme in one area to recompense another**.

Eastbourne Borough Council has the largest share of the Supporting People programme at 34.27% and Rother and Lewes the smallest at 14.63% and 13.61% respectively. Hastings Borough Council has areas of great deprivation and much unmet need but at £2,786,784.64 it receives significantly less than Eastbourne District Council at £4,618,008.92. Wealden has by far the greatest population and does have areas of significant deprivation but attracts only 16% of the budget.

The highest percentage of sheltered housing services is in Hastings where the pensionable age population is lowest.

### 5.4.3 Other social care and support provision

The Supporting People sector does not operate in isolation. More work needs to be done on the impact of the development of supported housing services on the residential care market. The privately funded housing-related support services (such as owner-occupied sheltered housing) needs to be considered.

### 5.4.4 Cross authority and regional issues

In East Sussex our approach to cross authority working is participative and co-operative and we fully recognise the benefits that are set out in the statement of purpose below.

The ODPM has directed that all Supporting People Authorities must belong to a Cross Authority Group (CAG). The 19 administering authorities in the South East each belong to one of (currently) 3 CAGs in the region. East Sussex is a member of the Cross Authority Group which includes West Sussex, Surrey and Kent County Councils and the Unitary Authorities of Brighton and Hove City and

Medway. This means that all authorities that have a boundary with East Sussex are within the same CAG.

This grouping forms a diverse sub-region within the South East and has a large population of approaching 5 million people. The area borders the whole of the southern side of London and its coastline covers the area from the Thames Estuary in Kent to the Hampshire border. The CAG area is both rural and urban and contains settlements of all sizes from the small villages up to the City of Brighton and Hove.

### **Statement of purpose for the CAG:**

Through joint working and sharing of permitted information members of this group will seek to make the most effective use possible of the Supporting People programme in the sub-region. In the year 2005/06 together we will:

- identify and list all services in the sub-region that serve non-local people and ensure these services are clearly designated as cross authority services in the 5 year strategies of the respective administering authority;

### **The designated services in East Sussex are the five women's refuges across the county: one in each district and borough.**

- produce a map of current supply of services in the CAG area as at 1 April 2005 with a view to identifying gaps in provision at a sub-regional basis by client group;
- identify any common areas of particular concern that are shared by members of the CAG (such as migration to the area by vulnerable people from the London region) and seek to take common action on such concern;
- aim to influence the developing regional housing strategy and other regional policies in relation to housing related support services to ensure that the Supporting People programme plays a pivotal role in the delivery of housing and social care services within the sub-region;
- identify those service providers that are common to two or more administering authorities in the sub-region and explore the possibility of developing further common approaches to value for money, service reviews other contract issues for these providers;
- promote with all service providers within the CAG the use of the CORE returns so analysis of originating area maybe undertaken with a view to establishing reliable data on net 'importing' or 'exporting' of vulnerable people which in turn should influence the allocation of grant. (Currently according to data from CORE returns analysed by St Andrews University the South East as a whole is a net importer of vulnerable people);and
- assess the feasibility of developing a joint communication network in respect of communication with providers and service users that will maximise administrative resources.

## COMMISSIONING

In the future the group wish to see a stable but flexible Supporting People sector that is open to opportunity. From 2006/07 onwards it will look at the following areas of partnership working:

- Developing a joint approach to assessing aggregate need for housing-related support.
- Joint commissioning of services where appropriate and the adoption of a shared framework for commissioning, from service specification to the selection of providers.
- Developing and adopting joint CAG performance indicators that stress outcomes for clients rather than inputs to a service.
- Joint bidding challenge fund for the resources to develop the sector in the CAG area.

Other cross-authority issues for future consideration include:

- the Regional Housing Board and capital allocation including criteria for allocating capital;
- the implications of the dysfunction between capital and revenue for Supporting People services; and
- work with local authorities outside the CAG to establish protocols for joint working, reciprocal referral arrangements and funding issues.

### **Key findings of the cross authority analysis of in-migration and out-migration during the period 1 April 2003 – 31 March 2004:**

- There was a net gain of 55 service users in East Sussex.
- While Lewes (net loss of 31) and Wealden (net loss of 6) export service users, Rother (net gain of 66), Hastings (net gain of 20) and Eastbourne (net gain of 6) all imported service users.
- The highest number of service users coming into East Sussex had come from Brighton and Hove (29), Isle of Wight (10), Lewisham (9), Crawley (9) and Hackney (8).

While East Sussex is a net importer of Supporting People service users, this is not true for the district and boroughs individually. Rother, Hastings and Eastbourne import, while Lewes and Wealden export. The main areas where service users come from are our neighbouring authorities of Brighton and Hove, West Sussex and Kent. However if London is looked at as a whole, then a significant number (670) come from the different London Boroughs. Interestingly we also have 10 clients who have come from the Isle of Wight and the reason for this is not known.

### **5.4.5 Service reviews and value for money**

All existing services must be reviewed by March 2006 and the Supporting People team is well on target to achieve this. The Supporting People team developed a monitoring and review policy in June 2003. The main aim of monitoring and review East Sussex is **“to use best endeavours to ensure that services provide an appropriate balance between quality for service users and the cost of the provision within strategically relevant services”**.

#### **Value for money**

The Strategic Forum endorses the Government's concern that value for money (VFM) is achieved. The Strategic Forum also recognises this is a complex area and considers an 'eclectic' or diverse approach is required to deal with the issue in a much broader way than simply looking at unit costs. Data used by the team includes:

- The ODPM tables showing indicative costs for the ranges of funding provided to different types of services for different client groups in the various regions of the country.
- Local data that enables comparisons of staff to service user ratios across the programme (the main determinant of support service costs is staff intensity).
- Income and expenditure budgets, in particular
  - the explanation of management and agency charges;
  - how budget costs are split across the headings 'care', 'support', 'management' and 'property services'; and
  - the split between direct and indirect support costs.

The Strategic Forum does not crudely consider high cost services as poor value for money and low cost services as good value for money. However service providers will have to justify why, for example, an apparently similar service is costing the programme less.

A South East Regional Value for Money/Benchmarking Group has developed methodology to compare data across the region. East Sussex will play an active part in these developments. (See section 5.7)

The Supporting People team are developing a specific 'value for money' policy for East Sussex.

#### **Findings and outcomes**

Appendix 13 is a summary of the review outcomes of the services that had been reviewed and agreed by the Strategic Forum by 11 November 2004. It includes scores for VFM, the Quality Assessment Framework (QAF), performance, availability, occupancy and strategic relevance.

The Supporting People team had completed 57 service reviews on 11 November 2004: 44 for housing-related support services and 13 for residential care homes in receipt of Supported Housing Management Grant revenue. (See section 3.1.1). There are a further 36 service reviews in progress.

**All reviewed services were found to be strategically relevant and nearly all services are in great demand.**

The main points are

- **7 floating support** services have been reviewed. One of these has been decommissioned (16 units) due to poor performance. The remainder had good or fair scores for value for money performance and user satisfaction feedback was good or very good. Two services have yet to complete their action plans.
- **37 accommodation-based** services have been reviewed. 2 services have been decommissioned (23 units) due to poor performance. The remainder usually had good or excellent scores for user satisfaction. Where value for money is scored less than good the service has a good score for its prospect for improvement. 6 services had an occupancy rate lower than 90% and the Providers of these services now have an action plans to complete before a three year contract can be negotiated. **22 services have an occupancy rate in excess of 95%**. All commissioned services have been given an extension to their existing interim contract and 8 have met the criteria required to receive a 'steady state' contract (published in January 2005).
- All 13 homes with SHMG funding on 1 April 2003 were reviewed in between November and December 2003 and the way forward approved by the Strategic Forum in January 2004. Where housing-related support services were clearly being provided as part of the service it was recommended to providers that they consider de-registration. However all registered homes in receipt of SHMG legacy funding were given 12 months notice of termination of contract on 1 April 2005. However in 7 of the 13 homes (for people with a learning disability), the provider is actively consulting on de-registration and here the service. If this is successful they will become part of the Supporting People programme. If this does not occur, SHMG funding will be withdrawn from 1 April 2006. The resulting saving on 2005/06 is approximately £191,000.

### 5.4.6 Reviewing with partners

An important aspect of the review processes is consulting with stakeholders and for each review all relevant stakeholders are sent a questionnaire. Where appropriate there is a greater level of involvement with partners. Housing Officers from the districts and boroughs have carried out service review visits with Supporting People Contract Officers. This has proved a useful exercise in joint working, enabling the district or borough council to directly feed in their operational overview into the review whilst gaining an oversight into the Supporting People quality monitoring and review process. The Supporting People team welcomes this input from all commissioning partners and would be happy to discuss involvement in future service reviews.

### **5.4.7 Feedback from providers**

The Supporting People team's approach has been that the review process must be a productive and participative process and not just a desktop exercise. In January 2004, a member of the Supporting People team interviewed a small sample of providers who had already been through the review process to gather feedback on their experience of review. The small provider found the thought of the process "bureaucratic, intimidating and insulting" but on reflection had found the actual process "supportive and appreciative". The larger provider found that although the process generated more work, the reviewing team's approach gave them insight into the service users' experience and the service delivery. The review focussed them on their core business and gave them a direction for their improvement plan.

## **5.5 Financial and risk issues**

### **5.5.1 Funding in current year**

In the current year the (2004/05) the programme grant for the county is £12,197,107. This sum represents a 2.5% decrease in funding from 2003/04. This cut, which represents approximately 5% in real terms, has been managed by not awarding an inflationary uplift to providers and by some small slippage in the pipeline programme. Whilst this situation is far from satisfactory, providers have risen to the challenge and almost without exception protected valuable services from cuts and service users from any detrimental effects

### **5.5.2 National grant announcement**

In August 2004 the ODPM announced that it had secured funding of £1.715billion for England in 2005/06 and that around £1.7billion would be available for the programme in 2006/07 and 2007/08. Whilst recognising and welcoming the fact that programme funding was secured and known at a global level for a further three years, the size of the overall year on year reductions were deemed disappointing by local stakeholders. The reductions represent a cut in cash terms of a further 5% or about 7.5% in real terms. However, the re-distribution of funding amongst administering authorities to even out the historical anomalies of the inherited spending pattern, (a stated governmental aim of the programme since its inception) was confirmed. This confirmation implied that cuts would not necessarily be uniform across England.

ODPM figures published following an analysis of the inherited 'legacy funding' on which the budget for 2003/04 was based, gave East Sussex the lowest unit per capita cost of any administering authority in the South East. All parties therefore hoped that the cut for the county would be very much less than 5%, given the low base from which the programme commenced in the county and the vast unmet need.

### 5.5.3 Grant allocation in East Sussex 2005/06

In December 2004 local grant allocations were announced for 2005/06. The East Sussex grant will be £11,582,793. This is a cash reduction of £614,314 (5.04%). At the time of writing there is no transparency on how this figure was arrived at but realistic expectations of a smaller reduction have been severely disappointed. Despite being one of the poorest county councils in the country with a low per capita unit cost, only 15% of the 151 administering authorities have received a higher cut than East Sussex (although a further 41% have received the same percentage reduction). The cut, which represents over £900,000 in real terms, is a devastating blow to the development of the programme. **More not less funding is required to meet the needs of vulnerable people and the strategic aims of the commissioning partners.**

The funding of the planned re-provisioning and expansion of supply to be financed through identified efficiency savings resulting from the review process is no longer possible even in part. (See section 5.7). **There will undoubtedly be a reduction in the already low supply from April 2005** where planned re-provisioning is not now viable. (See section 5.5.3 below.) The maximising of the potential of the programme financial terms, already a clear commissioning aim, now has the highest priority.

### 5.5.4 Management of the reduction in grant and associated risks

At its meeting on 20 January 2005, the Strategic Forum agreed the following measures to manage the required grant reduction in 2005/06: The aim is to avoid unplanned service closure or loss of units.

- **No inflationary uplift:** No provider will be offered an inflationary uplift to reduce the required saving to the actual reduction of £614,000. It is recognised that this is a far from desirable course of action, particularly as 2005/06 will be the second year without an increase for providers. This action may threaten the viability of some of the smaller providers. The level of the risk to providers and hence to vulnerable clients is to be quantified by the Supporting People team as soon as practicable and mitigating action planned. It may be possible to provide a small 'exceptional hardship' fund.
- **Utilisation of slippage and 2004/05 savings:** The projected under spend of £233,000 from this year's grant will be rolled forward. This under spend includes one-off slippage due to the delay in opening of a pipeline service (an estimated £153,000) and savings made during the year current following contract termination or re-negotiation.
- **SHMG:** £191,389 of the former SHMG funding will be withdrawn from registered care homes following review and 12 months notice. It was hoped to ring fence at least £100,000 of this money for re-provisioning of services for people with complex needs including drug users. This is now unlikely.
- **Projected savings from 1 April 2005 following review and contract re-negotiation/decommissioning:** As currently known, this amounts to an estimated £284,000. Again it was hoped to re-provision with at least £250,000 where services were strategically relevant but unsatisfactory. **This will not**

now be possible and will result in the loss to the programme of at least 100 units.

### 5.5.5 Summary of management of grant reduction 2005/06

Source of saving 2005/06	Approximate amount	Comment
Projected as brought forward from 2003/04	£233,000	Includes non-recurring slippage and savings from early reviews and self-decommissioned sole traders.
SHMG	£191,000	Does not include homes for people with a learning disability where de-registration is likely.
Savings generated by reviews in 2004/05	£284,000	Funding earmarked for re-commissioning but now needed to compensate for budget cuts.
<b>Total</b>	<b>£708,000</b>	This allows for a small contingency fund of £93,000 that may be carried forward if not required.

### 5.5.6 Future risks

Further work to model and quantify the implications of a further 5% cut in grant in both 2006/07 and 2007/08 is to be undertaken but will inevitably result in the closure of valuable services. An exercise carried out in early 2004 to inform the Government's spending review of 2004 suggests that from April 2006, every 1% reduction in funding is likely to mean a loss of approximately 66 units of supply if applied across the board.

No other major savings from review are expected as by 31 March 2005 all the higher cost lower volume services, which are likely to yield any efficiency savings, will have been reviewed. The review programme for 2005/06 mainly comprises reviews of sheltered housing with an average weekly unit cost of £13.00 (thirteen).

### 5.5.7 Future developments

It is hoped that when the full impact of the distribution formula is felt, East Sussex will receive a healthy increase in resources. Appendix 15 is a list of pipeline, housing-related support, service developments with agreed revenue funding that would be eligible for Supporting People funding should money become available. Appendix 16 is a 'wish list' of un-funded services that the Strategic Forum would like to see developed.

### 5.5.8 Charging Policy

The current charging policy adopted by East Sussex County Council was approved by East Sussex County Council's cabinet on 18 October 2004 and the Strategic Forum on 11 November 2004. The policy can be seen in Appendix 14.

The policy concerns means testing service users who receive support within those services that are designated as 'chargeable'. In those services that are designated 'chargeable', payments due to providers under contract are paid net. The county will not therefore have a direct contractual relationship with the service users or collect charges. Services users who are assessed as capable of paying for the service will pay the charge direct to the provider.

The policy broadly follows ODPM guidelines and the aims of the policy include:

- ensuring that the process of financial assessment is as straight forward and accessible as possible for service users and service providers;
- ensuring that service users receiving more than one social care service (such as sheltered housing and home care) only undergo one financial assessment; and
- ensure that the process is as cost effective as possible for the county council to administer.

It will be kept under review and will consider different options for payments to providers such as paying a negotiated gross contract price for all 'steady state' contracts taking account of voids and the proportion of 'self-payers'.

### 5.6 Partnership in service commissioning

The Strategic Forum takes a multi-agency approach to commissioning. Priorities are arrived at in partnership and reflected in the emerging commissioning strategy.

There are currently three agreed routes to **procurement** and the route chosen by the Strategic Forum will depend on circumstances including whether a service is new or being re-provided:

- An open competitive tendering process following service specification by the Strategic Forum.
- A tendering process with a 'preferred providers' approach following service specification by the Strategic Forum (limiting tenders to specialist providers with a good local track record); or
- Opportunistic approaches from providers who have secured funding.

The desired route for new services is a '**preferred provider**' approach.

#### 5.6.1 Framework for the procurement of all services

For a service to receive Supporting People funding there must be **evidence** of the following:

- The proposed service is **strategically relevant**. This means it will help meet the national outcomes required of the Supporting People programme and the local priorities of the commissioners (see section 5.2).
- The proposed support service meets an identified **strategic priority need** in terms of the client group, the type of service and the geographical area.
- The provider must be able to demonstrate **experience** of successfully delivering a housing-related support service to the client group.

## COMMISSIONING

- The provider endorses the **partnership** commitment to delivering Supporting People services and will adopt an open and positive approach to all aspects of the regulatory work of the Supporting People team.
- The proposed service has a revenue cost that is within appropriate **benchmarks**.
- The proposed service is **deliverable**. The provider must demonstrate in a 'feasibility study' that there are no obstacles to delivering the service within the required timescale. The 'feasibility study' will consider:
  - capital funding source (where relevant) including levels of public and private subsidy; planning consent issues; suitability of site (such as topography, proximity, 'brownfield' site); and risk thoroughly considered and managed; and
  - revenue funding sources including the maximisation of resources by the possible linking to other sources; the financial viability of the total service (particularly for accommodation-based services); and the management of risk.
- The provider must have Supporting People **accreditation** or, if new to the area, be capable of easily achieving this status.
- The provider can evidence understanding of **quality** and explain how it will address the 6 core objectives within the current Supporting People Quality Assessment Framework (QAF).
- The provider must be operating locally or demonstrate future local **management capability**.
- The provider will contribute to **market management aims**.
- Existing providers will need to have a positive outcome to all Supporting People **service reviews**.
- New services will not normally be commissioned from individual providers ('sole traders').

## 5.7 Annual plan

### 5.7.1 Key strategic tasks areas for Supporting People related work plan 2005/06

Note: Whilst most tasks will be carried out or led by members of the Supporting People team, some work may be carried out by partnership groups or others.

#### Reviews and tendering

- Complete all first reviews of remaining services (largely sheltered housing) by 31 March 2006.
- Implement the 'second review' schedule where the outcome of the first review of service has been an extension to the interim contract with a view to either offering a steady state contract or re-provisioning.
- Continue to identify which services might in future be suitable for re-tendering.

### **Performance Measurement**

- Develop local performance indicators that focus on measuring outcomes for clients that can be incorporated within the 'steady state' contract.
- Further develop shared targets for performance and service development with PCTs, the DAAT, Community Safety partnerships and other relevant groups and organisations.
- Develop member involvement and improved scrutiny committee arrangements for the programme within all 6 councils.

### **Research**

- Research the housing-related support needs of people with physical disabilities and learning disabilities, including quantifying unmet need.
- Research how providers allocate Supporting People funded services and how referrals of clients are made with a view to making recommendations to improve the targeting of services to those most in need.
- Research the specific housing-related support needs of minority groups within the county.
- Research into the needs of drug and alcohol misusers.
- Continue to research the impact of supported housing on residential care and other markets.

### **Funding and service development**

- Further explore how services can be re-shaped to complement and deliver relevant strategies for specific client groups.
- Quantify the risk of continued cuts in funding, model the impact on services and find ways to mitigate identified risks to all stakeholders
- Further work on benchmarking costs by providers and South East administering authorities and in particular within the Cross Authority Group of which East Sussex is a member.
- Promote the effective lobbying for more resources for the programme.
- Develop and consult upon specification for floating support services to older people in the private rented and owner occupied sectors.
- Continue to actively participate in both locality and county wide client group specific strategic planning groups.
- Explore the capacity for ensuring that support services can be offered on the basis of need, not tenure.

### **Wider Context**

- Continue to actively participate in South East regional developments and Cross Authority activities.

### 5.7.2 Priorities for immediate review and change

By 1 April 2005, all non-sheltered housing-related support services will have been reviewed. The priority for 2005/06 is to complete the review schedule which comprises services for older people which are mainly traditional sheltered housing.

### 5.7.3 Projected spend for 2005/06

As required by the ODPM, the table below shows the projected spend for 2005/06 by primary client group and service type.

Primary client group	Service type	Units		Projected
		2003	2005	2005/06
Frail Elderly	Accommodation	0	53	£320,211
Generic	Accommodation	21	20	£178,671
Generic	Community/Social Alarm	90	90	£12,073
Generic	Floating Support	244	230	£801,125
Homeless Families	Accommodation	13	0	£0
Homeless Families	Accommodation+floating	28	24	£55,629
Homeless Families	Resettlement Service	70	0	£0
Older people	Accommodation	4657	4637	£2,385,334
Older people	Community/Social Alarm	677	677	£71,817
Older people	Floating Support	264	260	£216,134
Physical/Sensory Disability	Accommodation	4	4	£36,780
People with Drug Problems	Accommodation	44	14	£49,290
People with Drug Problems	Floating Support	5	5	£8,257
Learning Disability	Accommodation	146	124	£1,251,411
Learning Disability	Floating Support	11	11	£75,065
Mental Health Problems	Accommodation	372	357	£2,809,835
Mental Health Problems	Floating Support	36	36	£137,829
Single Homeless	Accommodation	85	88	£659,670
Single Homeless	Floating Support	92	140	£310,078
Teenage Parents	Accommodation	19	23	£230,729
Traveller	Accommodation	28	28	£201,924
Domestic Violence	Accommodation	30	46	£710,016
Domestic Violence	Floating Support	24	24	£105,255
Young People at Risk	Accommodation	179	178	£1,164,144
Young People at Risk	Floating Support	3	3	£9,658
		7142	7072	<b>£11,800,933</b>

Please note that these figures do not include payments made to Home Improvement Agencies and leaseholders.

There are other housing-related support services in the pipeline which the Supporting People programme is not able to fund. These are listed in Appendix 15 and a 'wish list of services in Appendix 16 (see section 5.5.7).

## **5.8 Summary of the main points in commissioning**

- This chapter sets out the broad strategic and operational aims commissioning aims including:
  - increasing the supply of housing-related support services to meet unmet need;
  - promoting positive outcomes for service users; and
  - delivering value for money and high quality services.
- The priority groups for service development are: older people; people with a learning disability; people with a physical disability; and single homeless people with complex needs.
- The desired strategic and operational outcomes are defined and how achievement will be measured.
- The chapter also analyses the factors that are shaping the 'market' including:
  - the nature of providers;
  - resource issues and risk (including the need for more funding and the impact of budget reductions);
  - cross authority and regional issues; and
  - the impact of service reviews.
- A framework for the procurement for services is set out.
- The annual plan of action sets out key strategic tasks arising from this strategy for 2005/06.

# Appendices

## 1 Glossary of terms

<b>AA</b>	Administering Authority. In East Sussex, this is the Social Services Department of East Sussex County Council.
<b>Accommodation-based service</b>	A housing-related support service, which is specifically linked to identified accommodation, where loss of occupancy means loss of support service.
<b>Accommodation-based service with floating support</b>	A housing-related support service, which is linked to specific accommodation but also offers a floating support, resettlement or outreach service, as part of the overall package. For example, a hostel or supported housing with intensive on-site support, which also offers a move-on or resettlement service.
<b>Accreditation</b>	A process for assessing the viability and competence of an organisation and formally recognising their ability to provide services.
<b>BME</b>	Black and Minority Ethnic Groups.
<b>Best Value</b>	Central Government's value and quality policy.
<b>CAG</b>	Cross Authority Group.
<b>Client Group</b>	A classification applied to a person according to their support needs. A person may fall into a number of classifications.
<b>DAAT</b>	Drug and Alcohol Action Team
<b>Extra care housing</b>	A concept rather than a housing type covering a range of specialist housing models. It can cover a wide range of different models in terms of function, size, and tenure. The emphasis is on independence in a safe, secure environment enhanced by good design features enables people to age in place.
<b>Floating support service</b>	A housing-related support service that is not tied to any specific accommodation.

## APPENDICES

<b>HIA</b>	Home Improvement Agency, often also known as 'Care and Repair' services. These are floating support services available across different tenures designed to enable people to remain in their own homes for as long as they wish and to promote independent living. HIA services are usually focused around practical support related to the accommodation – such as maintenance and adaptations – but often also provide a wider range of services such as advice, advocacy and signposting to other support services.
<b>Interim Contract</b>	A short term agreement which was entered into by Supporting People teams and service providers from the 01/04/03. It reflected changes made by the Government to the funding for the provision of housing-related support services; minimised the disruption to the support services which were being provided at that time; and ensured that providers were paid for doing so, subject to future satisfactory reviews, accreditation and due process.
<b>Lifeline</b>	An alarm system that can be used to call for help.
<b>ODPM</b>	Office of the Deputy Prime Minister
<b>PCT</b>	Primary Care Trust
<b>Performance indicator (PI)</b>	Specific information used in a planned way to measure and assess performance.
<b>Pipeline service</b>	A service that was planned to come online after 1 April 2003, but which had a firm funding commitment before then.
<b>Provider</b>	Organisation provider a Supporting People service.
<b>QAF</b>	The Quality Assessment Framework for Supporting People. The QAF defines service objectives (core and supplementary) against which providers can carry out self-assessments.
<b>Registered Care Service</b>	A service that is registered with the Commission for Social Care Inspection (CSCI).
<b>RSL</b>	A Registered Social Landlord registered with the Housing Corporation as a housing association. Most but not all RSLs are housing associations and not all housing associations are RSLs.
<b>Service review</b>	A review of the strategic relevance and the quality, performance and cost-effectiveness of a Supporting People service prior to the expiry of its contract.

## APPENDICES

<b>Service users</b>	The term 'service users' is used throughout to refer also to carers and advocates where applicable. It is important that, in consulting and involving service users, providers also seek the views of carers and advocates where service users may not be able to participate fully.
<b>Sole traders</b>	Sole traders are individual support providers who are not working for a charity, housing association, limited company or other type of organisation but are working for themselves, often in their own home, and not employing any housing-related support staff. Examples of sole traders are supported lodgings or adult placements where there is no overarching organisation.
<b>Steady State</b>	The state where service providers have been accredited and services have been issued with a longer term contract.
<b>Stakeholder</b>	An individual or organisation with an interest in the Supporting People programme.
<b>Supporting People</b>	A programme to deliver housing-related support services to vulnerable people through a single funding stream, administered by local authorities according to the needs of people in their area.
<b>Supporting People grant</b>	The grant provided to local authorities to pay for the costs of support services from April 2003.
<b>Transitional Housing Benefit</b>	The transitional system for the payment of support costs through the housing benefit system. This system ends on the introduction of Supporting People.

## **2 ODPM client group definitions**

Older people with support needs	Older people with low to medium support needs.
Older people with mental health problems	Older people with mental health problems including dementia
Frail elderly	Older people who are physically disabled or frail.
People with mental health problems	People with enduring but relatively low level mental illness or disability, as well as those who have been diagnosed as mentally ill and who have had, or are having specialist treatment.
People with learning disabilities	People with mild to moderate learning disabilities, as well as those with more severe learning disabilities and/or challenging behaviour.
People with a physical or sensory disability	People with mobility difficulties, sensory impairments and debilitating or long term illness.
Single homeless with support needs	People who have been accepted as homeless and in priority need, and also those who have been turned down for re-housing or have not approached the local authority, and who have a range of support needs.
People with alcohol problems	People with alcohol problems who are homeless or who are having difficulties in relation to sustaining their accommodation or managing to live independently as a result of their alcohol problems.
People with drug problems	People with drug problems who are homeless or who are having difficulties in relation to sustaining their accommodation or managing to live independently as a result of their drug problems.
Offenders or people at risk of offending	Offenders, or people at risk of offending, who are homeless or who are having difficulties in relation to sustaining their accommodation or managing to live independently as a result of their offending behaviour.
Mentally disordered offenders	Accused or convicted persons with mild to acute mental health needs or with learning difficulties or people with mental health needs whose behaviour has its roots in a personality disorder or people with mental health needs exacerbated by alcohol or substance misuse.

## APPENDICES

Young people at risk	Homeless young people (under 21) and those in insecure accommodation.
Young people leaving care	Young people leaving Administering Authority care who need support. (ref. Care Leavers Act and its definition of relevant children)
Women at risk of domestic violence	Women at risk of domestic violence who have left their home or who are having difficulties in keeping their home and establishing their personal safety and security.
People with HIV / AIDS	People with HIV / AIDS
Homeless families with support needs	Families who have been accepted as statutorily homeless and are placed in temporary accommodation. This group includes homeless women with children.
Refugees	People who have been officially accepted as refugees, or who have been given indefinite or exception leave to remain, not the wider group of those seeking asylum who do not have access to public resources.
Teenage parents	Young single parents needing support and vulnerable young women in this age group who are pregnant.
Rough sleeper	A person bedded down for the night on the street.
Traveller	Persons of a nomadic habit of life and persons who travel or wander for the purpose of making or seeking their livelihood.
Generic	Select this option if the service has no particular client group, but will take all of the groups listed above. Only choose this option where your service is truly generic and not client specific. Not an 'other' category.

### 3 Case studies

#### **An insight into how housing-related support needs were being met in East Sussex in 2004.**

The introduction of the Supporting People programme in April 2003 gave a rigorous and consistent methodology for the review and monitoring of housing-related support services. This role of the Supporting People team gives the funders and commissioners an insight (for the first time) into the way that housing-related support needs are being met locally.

These case studies are included in this Supporting People Strategy because they demonstrate how effective the Supporting People Programme is in meeting the very real complex needs of vulnerable people and also how the programme is underpinning the strategic aims of central and local government.

#### **Case study 1**

**Louis receives support services from a voluntary organisation in Hastings** with an open door policy to support people with complex needs. Many clients have a history of offending and violence. The project has 11 units of emergency accommodation where single homeless people can be placed, assessed and helped to find move-on accommodation. Some service users move into one of their 36 units leased from private landlords. The project receives Supporting People funding to support these vulnerable people who have chaotic lifestyles and a history of failed tenancies to stabilise their lives for up to two years. After that, it is hoped that the client can access a housing association tenancy.

This strategic importance of this service in Hastings in respect of crime reduction, community safety, prevention of homelessness and mental health cannot be overstated.

Louis is only 37 but has a long history of offending behaviour; he had 25 offences recorded against him between 1984 and 2001. These offences include incidents of criminal damage (x3), arson (x2), and offences against the person including GBH (x2); he also has several convictions for theft, possession of drugs, affray and assaulting police officers. Louis has been the subject of 3 different probation orders and received a custodial sentence following his last offence in 2001.

In 1994, Louis was diagnosed as having Paranoid Schizophrenia. Unfortunately, Louis has not always engaged well with psychiatric services and as a result has been admitted to psychiatric hospitals on several occasions. Louis also has a history of illicit drug use, which has often exacerbated his poor mental health. Louis was referred from his last long-term hospital stay to the project's Direct Access units on 17 June 2003, as he was again homeless. He was housed on a short-term basis in a Direct Access Unit until the 14 July 2003 when he was allocated a six-month tenancy in a supported housing scheme.

Louis has had a number of tenancies in the past, including a housing association tenancy; unfortunately, all have been lost due to Louis's chaotic lifestyle and behaviour. Louis has on occasion also accrued large tenancy associated debts.

## APPENDICES

During his time with the Supporting People funded support service Louis has received housing-related support to prevent another failed tenancy; to prevent homelessness and to support his independence.

This includes:

- support to fund and purchase appropriate furniture for his flat;
- support to set up budget schemes for all of his utility services;
- support to find a new doctor;
- support to keep appointments with his forensic psychiatrist – whom he is engaging well with at the moment;
- support to improve his life skills such as reading and writing as Paul is significantly dyslexic;
- support to develop his own interests; and
- support to organise household chores.

Since receiving housing-related support services through the Supporting People programme, Louis's quality of life has improved significantly:

- Louis feels more stable.
- Louis is more confident in dealing with household chores.
- Louis is enrolled in college to improve literacy and study English.
- Louis attends both photography and a music group.
- Louis is drug free.
- Louis has committed no offences.
- Louis has only had one short admission to hospital.
- Louis has no rent arrears.
- Louis is looking forward to becoming an assured housing association tenant.

Louis continues to be visited weekly with extra time being made available if and when there are appointments to attend, correspondence to look at or just time needed to chat. This Supporting People funded service works with up to 1500 different people every year. And Louis is one of the 90 people with multiple, complex needs the outreach team currently supports in their homes and in the community.

**We have looked at the cost incurred to support Louis before the Supporting People programme:**

***Prison:***

The Sussex Probation Service reports that it costs £23,105 per annum per prisoner. Louis was last in prison for 14 months. Total: **£26,955**

## APPENDICES

### ***Eviction:***

A large local social landlord says that average costs for eviction (for rent arrears) are as follows: **Rent Arrears:** By the end of the process, there will be £1,900 in rent arrears if this was the cause of eviction. **Court Costs:** £120 for the application seeking possession and £80 for the Warrant. **Staff time** in preparation, checking and court attendance, £80. Total: **£2,180**

### ***Homelessness***

Based on bed and breakfast accommodation for 16 weeks with homelessness staff time. Total: **£850**

### ***Psychiatric Admission:***

A 28-day Section admission @ £50 per day (includes bed space and all nursing and psychiatric costs. This would also include the psychiatric assessment prior to admission) Total: **£1,400**

**Total minimum costs before Supporting People: £31,385**

**80 weeks of support to Louis funded by the Supporting People programme costs: £5,200**

## **Case study 2**

**Rosie receives support services from a housing association.** Rosie lives in an extra care housing project in the county. Supporting People grant enables 40 tenants to be supported to remain or become independent whilst receiving a package of housing and care services.

Rosie has cerebral palsy and is confined to a wheelchair. Since childhood Rosie has lived in various institutional settings. As a youngster she boarded at school and when she left returned to live with her mother, who became her principal carer. At home Rosie enjoyed a degree of independence but her mother did much of the decision-making.

In December 2000 Rosie's carer was taken ill and was unable to continue caring for Rosie at the time the only facility able to accommodate Rosie with her mobility problems was the Morton Centre which provides residential, respite and day care. During her stay at the centre Rosie's condition deteriorated and her care needs increased. Rosie felt the package offered in residential care was very rigid the choices open to her reduced and effectively her movement and physical ability deteriorated during her temporary stay. She didn't need to do things for herself so she increasingly became reliant on others.

Rosie recognised this and considered the service was not appropriate to her needs and decided she did not wish to permanently move into residential care.

The housing, care and support model at the Supporting People funded service was identified as appropriate for Rosie because the housing-related support service meant Rosie would be supported to make her own decisions, take control of her life, her health and care needs and develop her full potential whilst also receiving the appropriate care.

## APPENDICES

Rosie now has:

- her own tenancy with the privacy of her own front door;
- a flat designed to meet her mobility needs;
- a building she can easily negotiate to experience a range of social activities; and
- an integrated care and housing support package designed to meet her individual needs.

During her time at this service Rosie has received housing-related support to promote her independence, prevent unnecessary admission to residential care and to ensure she receives the maximum benefit from being included in a community of non-disabled people. This includes:

- Support to participate in social activities such as designing cards and calendars for the project.
- Support to further develop learning skills such as computing.
- Support with shopping such as understanding sell by dates for the first time.
- Support with expanding her links with non-disabled people.
- Support with expanding links with the wider community and social networks.
- Support to begin preparing her own meals.
- Support with understanding financial information such as her electricity bill.

Since receiving housing-related support services through the Supporting People programme the quality of Rosie's life has improved significantly:

- Rosie feels involved
- Rosie feels consulted
- Rosie's confidence has increased
- Rosie feels safe
- Rosie feels she can influence the support and care package
- Rosie has a wider range and increased number of beneficial relationships
- Rosie feels that for the first time she is working towards being independent.

The housing-related support service clearly interacts effectively with the care service as by integrating care and support Rosie is being encouraged to build up her strength. She is hoping that in the longer term her care needs will reduce as she builds up the strength to use the toilet independently and prepare meals and food for herself.

## APPENDICES

We have looked at the costs of meeting Rosie's needs before the Supporting People programme.

<b>Total cost of residential care for Rosie per week:</b>	<b>£459</b>
<b>Total cost of Supporting People funded service per week:</b>	<b>£293</b>
<i>Support</i>	<i>£138</i>
<i>Care</i>	<i>£80</i>
<i>Rent</i>	<i>£75</i>

### Case Study 3

In response to the opportunities offered by Supporting People, Wealden District Council carried out a consultation exercise to see if tenants would wish to receive an 'Extended Support Scheme'. The response was favourable and a floating support style service has been developed primarily for the benefit of older and disabled residents who do not reside in sheltered housing, and a cleaning service for sheltered housing residents.

The scheme is regarded as a valuable preventative initiative that addresses the underlying factors that contribute to the deterioration of health, well being and loss of independence

Sally lives alone in a ground floor flat. Her only relative is a married brother who lives in Wales. He visits about once a year. She has a home help once a week that she pays for privately. The extended support scheme provides Sally with:

- a Lifeline telephone with 24 hour monitoring;
- a follow up call when her alarm is activated in an emergency;
- a regular visit from a member of the sheltered housing and support team to check on her welfare, help with filling in forms, assist her to obtain other services and provide advice on security, benefits and other issues;
- the opportunity to join in organised social gatherings and activities; and
- 24-hour advice line and Lifeline monitoring.

Snippets from Sally's support diary illustrates how she is supported to remain independent.

**9 Oct 02** Lifeline unit was installed on the first visit.

**8 Nov 02** Sally tested pendant, all okay, will test every visit. Sally would like to go to a daycare centre once a week but feels she cannot afford it, have suggested she apply for Attendance Allowance.

**16 Dec 02** Feeling very low, in a lot of pain from the left hip. Helped Sally fill in the Attendance Allowance forms. District Nurse coming this afternoon. Will ask about a wooden trolley to help indoors, which I think may be helpful for transporting items around the flat.

**23 Jan 03** Attendance Allowance awarded, helps towards cost of the home help once a week. Started day centre last week, very happy with it, goes once a week and has started making new friends.

## APPENDICES

A lot brighter in herself and more positive. Also due to receive hospital appointment for assessment 14 March. Hip operation 26 March.

Hip operation carried out as planned, no complications. Was in hospital for two weeks, care package in place on return short term.

- 16 April 03** Getting on well, trolley proving to be very useful at the moment. Coping well in the flat with a Zimmer frame, feeling very positive.
- 22 May 03** Has stopped going to the day centre. Best friend who had been popping in regularly is in hospital. A bit down as not progressing as quickly as hoped, reminded it is still early days yet and encouraged to continue with exercises.
- 19 June 03** Sally has as decided to return to day centre. Feels she no longer needs the trolley, I will arrange for it to be taken away.
- 31 July 03** Mobility has improved overall since the operation but has difficulty bending to dress lower half. Has had right shoe altered as left leg is slightly longer since the operation. Accepted my offer of enquiring about physiotherapy. She is frightened of over-bending and is loosing confidence in doing things, but does not want to make a fuss.
- 1 Sept 03** Physiotherapy starting this week. Helped complete electoral roll form, and discussed free light bulb give away.
- 6 Oct 03** Physiotherapy going well, helping Sally to realise her range of movement. Has requested a handrail be fitted by the patio door so she can get down the two steps into the garden. Have discussed and best solution and measured up. I will send a referral to Dis. Aps. Brother and sister-in-law staying for two weeks. Best friend passed away last week, feeling very sad.
- 12 Nov 03** Handrail fitted already, really happy with it, showed me how she can now get into the garden. Age Concern Forum for Older People are holding an Information Day, Sally is encouraging her friends from the day centre to go too.
- 15 Dec 03** Very worried about receiving too much money. Overheard a comment from another customer in the queue at the post office. Telephoned the Pension Service to enquire, the extra is Severe Disability Allowance and she is entitled to all she receives. She sat and cried with relief, reassurance given. Age Concern meeting went well, suggestions made at the meeting will be considered. Has attended a group meeting at the Eastbourne DGH to discuss care and after care by the NHS during stay for hip operation.

Since receiving this housing-related support service through the Supporting People programme Sally:

- has more social contacts;
- has more disposable income to meet her needs;
- can enjoy her garden again;
- feels safer in her home; and
- has felt reassured about the care services she has received.

## Case study 4

**Moses receives a housing support service to live independently.** Moses is 48-years old and lives in one of 5 small Supported Living Schemes in the Eastbourne area. These schemes provide support to adults with learning disabilities and complex emotional and behavioural difficulties.

Moses is diagnosed as being on the autistic spectrum and his behaviour is both unpredictable and challenging to those caring for him. Although unable to communicate verbally Moses can understand much of what is said to him and expresses his wishes, likes and dislikes clearly using gestures, sounds and facial expression.

From a very early age Moses spent time in and out of hospital. At the age of 16, Moses was admitted to Little Plumstead Hospital. In 1975, when he was 20, he moved to Hillhouse Hospital. Moses' mother died 5 years later and in 1987 he moved to Laughton Lodge Hospital where he remained until he moved to Bedfordwell Road, a smaller institutional setting in 1994. In 1999 he moved to a placement in the community but this placement broke down due to the incompatibility of the group.

Whilst living at institutions Moses spent most of his time sitting in his bedroom being extremely vocal. He could go out if staffing levels permitted and this only happened occasionally.

In 2002 Moses moved to his current address and became a housing association tenant with an individually tailored care and support package. Moses shares a ground floor self-contained garden flat with one other person and has the privacy of his own good size bedroom. Moses has a Person Centred Support Plan to take into account his abilities and interests.

Moses receives 20 hours of housing-related support a week to support his independence this includes:

- support to make drinks and snacks with minimal support;
- support to make his garden an enjoyable environment;
- support with domestic tasks;
- support with making his flat homely;
- support with personalising and decorating his bedroom;
- support with making choices;
- support with developing and establishing relationships;
- support with developing his interests such as enrolling at the local further education college for a Music Appreciation Course;
- support with shopping for food, clothes and household goods regularly;
- support to enjoy sporting pursuits such as horse riding and swimming lessons;
- support to access a range of community based facilities including restaurants, cafés, pubs, music concerts and local folk club;

## APPENDICES

- support to attend church where he clearly enjoys the singing; and
- support to 'entertain' his family in his own home for the first time in his life.

Since receiving housing-related support services through the Supporting People programme, Moses' life has improved dramatically:

- Moses is socially included.
- Moses is no longer an in-patient but has the security and status of being a registered social landlord (housing association) tenant.
- Moses has stability in his life.
- Moses is no longer bored.
- Moses is recognised as part of the neighbourhood.
- Moses is less challenging to carers.
- Moses appears happier.

## **4 Strategic Forum**

*On 11 November 2004*

David Archibald	Director of Social Services, East Sussex County Council
Gina Brocklehurst	Director of Commissioning & Development, Eastbourne Downs PCT
Marie-Claire Deane	Director of Community Services, Wealden District Council
Anne Fennessy	Head of Housing, Rother District Council
Janine Portch	Health Improvement Manager, Bexhill & Rother PCT (on behalf of Chief Executive)
Neil Fuller	Director of Housing, Health & Community Housing, Eastbourne Borough Council
Fiona Henniker	Chief Executive, Sussex Downs & Weald PCT
Keith Hinkley	Assistant Director, Adults Services, ESCC Social Services Department
Richard Peters	Executive Director of Housing, Communities and Neighbourhoods
Laurie Priebe	Housing Strategy Manager, Lewes District Council
Peter Rogers	Assistant Chief Probation Officer, Sussex Probation Service
Ivan Rudd	Health Improvement Manager, Hastings & St Leonards PCT (on behalf of Chief Executive)
Karen Sedgwick	Head of Supporting People, ESCC Social Services Department
Jenny Tuck	Policy Officer, Policy & Strategy Unit, ESCC Social Services Department
Lesley Healey	Assistant Director, Performance & Quality, ESCC Social Services Department

## 5 Strategic documents and plans

East Sussex County Council Plan 2004/05  
 East Sussex Policing Plan 2004/05  
 Sussex Probation Plan  
 'Pride of Place' a Community Strategy for East Sussex  
 Hastings Community Strategy  
 Rother Community Strategy  
 Eastbourne Community Strategy  
 Lewes Community Strategy  
 Wealden Community Strategy  
 East Sussex Community Safety Strategy 2003-2005  
 Crime Reduction Partnership Strategies for Eastbourne, Hastings, Lewes, Rother and Wealden 2002/05  
 East Sussex County Council Youth Justice Plan 2004/2005  
 Drug and Alcohol Action Team Plans 2004/05  
 East Sussex Domestic Violence Strategy 2002/05  
 Social Services Strategic Plan 2004/05  
 East Sussex County Council Teenage Pregnancy Strategy  
 National Services Framework for Older People 2001  
 Priority for older Peoples Service Developments East Sussex  
 Community Strategy for Older Peoples services in East Sussex  
 East Sussex Delayed Transfers from Hospital Performance Improvement Plan  
 East Sussex Joint Extra Care Housing Strategy 2003-2008  
 National Service Framework Delivery Plans for Older People and People with Mental Health Needs  
 Joint Strategic Plan for Services to Disabled Adults of Working Age 2003 - 2006.  
 Valuing People - A strategy for Learning Disability for the 21st Century  
 Learning Disability Partership Board Action Plan  
 East Sussex Learning Disability Housing Strategy  
 Business Plan for People with Mental Health Needs for 2003-2004  
 South East Regional Housing Strategy 2004/5 to 2005/06 - South East Region  
 Housing Board County wide Homelessness Strategy and Action Plan 2003-2008  
 Wealden District Council's Homelessness Strategy 2003-2008  
 Wealden District Council's Housing Strategy 2002-2005 update number 1  
 Hastings Borough Council's Homelessness Review 2003  
 Hastings Borough Council's Housing Strategy 2002-2007

## APPENDICES

Hastings Borough Council's Homelessness Strategy 2003-2008  
Eastbourne Housing Strategy Update 2004-2008  
Eastbourne Borough Council's Homelessness Strategy 2003-2006  
Rother District Council Housing Strategy 2003-2008 and 2004-2009  
Rother District Council's Homelessness Strategy 2003-2008  
Lewes District Council's Homelessness Strategy 2003-2008  
East Sussex Supporting People Shadow Strategy 2003-2004  
National Procurement Strategy  
East Sussex Best Value Performance Plan

### **Other documents**

A Need Analysis of Adult Learning Disability in East Sussex April 2003  
The Census 2001  
The Indices of Deprivation 2004  
Hotspots of Fuel Poverty Survey (Centre for Sustainable Energy & Bristol University)  
Eastbourne Downs PCT Public Health Report 2003-2004  
Rother and District PCT Public Health Report 2003-2004  
Hastings and St Leonards PCT Public Health Report 2003-2004  
The Sussex Downs and Weald PCT Public Health Report 2003-2004  
ODPM Study of the Support Needs of Homeless People 2003  
Breaking the Cycle of Social Exclusion ODPM 2004  
Mental Health and Social Exclusion ODPM 2004  
East Sussex Supporting People Housing Support Needs Survey  
East Sussex County Council Services for Older People Needs Analysis  
BME Spark website  
Hastings Borough Council Survey into Repeat Homelessness March 2004  
Youth Offending Analysis by the East Sussex Youth Offending Team 2003

### **ODPM Guidance from the Supporting People Team:**

Focus on the Future  
The Essential guide to Developing the Five Year Strategy v1.0  
Feedback on Shadow Strategies  
Strategy self-assessment tool  
Strategy checklist  
Strategy Delivery responsibilities  
Needs analysis practice aid  
Supply analysis practice aid  
Risk management practice aid  
Position statement on Procurement of Supporting People Services

## **6 Consultation**

**The Supporting People team presented the first draft of this strategy to the following groups:**

<b>Group attended:</b>	<b>Date</b>
Accessible Housing Group	20 July 2004
Age Concern	26 August 2004
Community Learning Disability Teams	1 Sept 2004
Community Safety Network	4 August 2004
Core Strategy Development Group	19 July 2004
Drug and Alcohol Action Team (JCG)	14 June 2004
East Sussex Disability Association	16 August 2004
East Sussex Domestic Violence Forum	6 July 2004
East Sussex Health, Housing and Social Care Strategic Forum	16 July 2004
ESHOG (East Sussex Chief Officers Housing Group)	9 July 2004
Extra Care Partnership/Housing and Support Group	22 June 2004
Hastings & Rother Primary Care Trust/Housing Strategy Group	26 July 2004
Hastings Accommodation Support Services	3 August 2004
Hastings Housing Partnership	19 July 2004
Healthier Hastings Partnership Board	13 July 2004
Lead Members Group	28 July 2004
Learning Disability Housing Strategy	6 July 2004
Mental Health Action Group	24 Sept 2004
Mental Health Team – Older People’s Services	20 July 2004
Occupational Therapy Management Team	15 July 2004
SSD Independent Living Team	19 July 2004
SSD Locality Team East	24 June 2004
SSD Locality Team West	10 August 2004
SSD Policy and Strategy Unit	19 August 2004
Sussex Downs & Weald Primary Care Trust/ Housing Strategy Group	21 June 2004
Voices for Change (advocacy group for people with learning disabilities)	3 July 2004

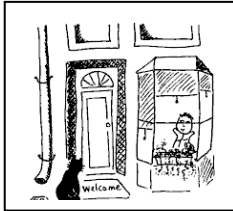
## APPENDICES

<b>Other groups consulted by e-mail include:</b>
Action in Rural Sussex
Children and Young People's Strategic Partnership
East Sussex Sheltered Housing Forum
East Sussex Teenage Pregnancy Strategic Partnership
Eastbourne Association of Voluntary Services
Eastbourne Citizen's Advice Bureau
Eastbourne Downs Primary Care Trust
Hastings Voluntary Action
Independent Providers Forum
My Choice Advocacy Service (Learning Disability)
Probation/Housing Co-ordinator
Social Services Department staff
Supporting People service providers
Sussex Association for Spina Bifida and Hydrocephalus
Sussex Police
Volunteer Connections
Wealden Federation of Voluntary Organisations
Youth Offending Team Partnership

## 7 Feedback from consultation groups

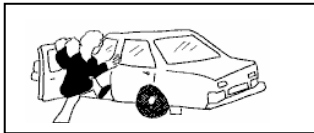
### Age Concern - Thursday 26 August 2004

#### Examples of practical things people want with



- doing washing and hanging the washing on the line
- changing bedding
- changing a light bulb or batteries
- gardening – keeping the garden tidy
- spring cleaning - taking down and washing curtains

#### Transport



- help with transport is important - people don't want to stay at home all day
- people who use a wheelchair also need someone to go out with them to push their chair
- taxis are expensive but often the only option for people

#### Lifeline



- vital 'piece of mind'
- expensive over time
- people should be entitled to free lifeline over a certain age
- some people not able to nominate 3 people as emergency contacts

#### Sheltered housing



- not what everyone wants to live in sheltered housing
- are better than others
- can be isolating
- often 'no-one around' in private sheltered housing

#### Alternatives



- many people really want to stay in their own homes
- peripatetic warden – good idea
- would like the same support as sheltered tenants in own home
- might want someone to live-in if they need help in the future

Candice Miller, August 2004

## East Sussex Disability Association – 16 August 2004

### Sheltered housing



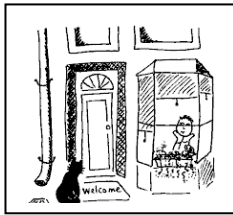
- Some people with a physical disability are living in a sheltered housing scheme because there is no other option available.
- This is not what young people want.
- The quality of service received in some sheltered housing services is variable.

### Lifeline



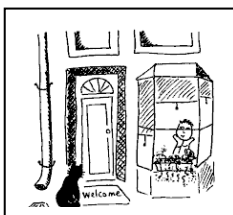
- People feel that Lifeline should be more widely available for people with physical disabilities and sensory impairments.
- Single people rather than block

### Direct Payments



- People feel that the existing direct payments scheme should be extended to Supporting People services.
- If this was possible, funded would be needed to pay for someone to help fill in the forms.

### Physical Disability



- It is generally felt that most people with a physical disability who express a need for housing-related support actually need a physical adaptation to their home rather than an on-going housing-related support service.

### Sensory Impairment

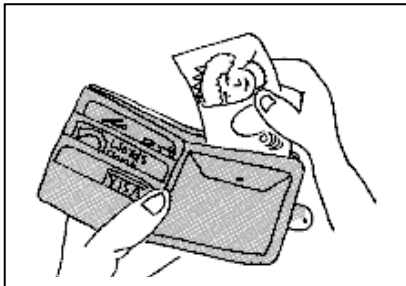


- People with a sensory impairment do not score highly on Social Services Department eligibility criteria.
- People rely heavily on voluntary organisations such as Seeability and East Sussex Association for the Blind (ESAB).
- People often just need help with things like checking sell-by-dates.

Cherry Shorthouse, August 2004

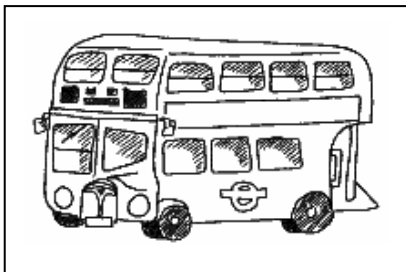
## Hastings Learning Disability Advocacy Group - Saturday 3 July

### Support provided by Crowebridge Tenancy Support worker



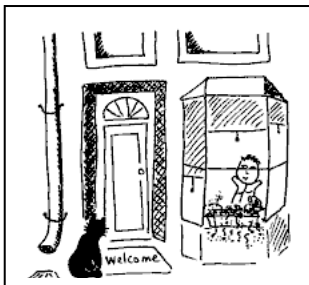
- Help with budgeting
- Sorting out post and dealing with letters (such as a warning letter about rent not being paid).
- Setting up and managing bank accounts (such as an ISA).

### Types of support provided by Community Support Team



- Help learning to use public transport.
- Help with shopping
- Help with money and budgeting

### Lack of suitable accommodation available



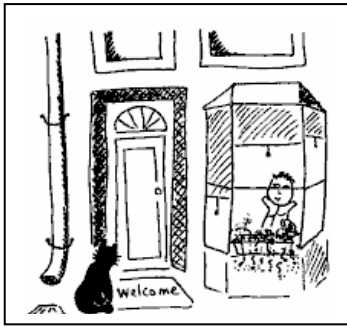
- Need more flats that are available for people with a learning disability. There are lots of empty flats that could be converted. There is a feeling that homeless people always get the places.
- There is not enough accommodation in areas where people want to live. Most are in St Leonards where there is a high crime rate.
- There are not enough places that will take people who receive benefits.

### Types of housing related support wanted



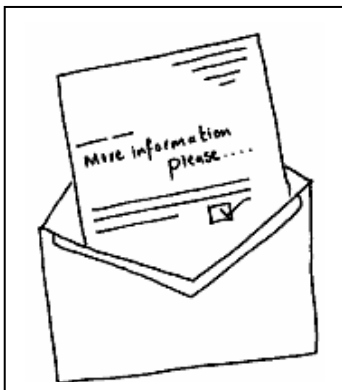
- Dealing with harassment
- Help learning to cook and plan meals
- Help with washing
- Help sorting out a TV licence and finding out if there is any help available to pay for it.

## Types of supported accommodation wanted



- People need a choice.
- On-site warden is a good idea.
- Some people liked the idea of groups of flats.
- Another idea talked about was a stepping stone or halfway house. This gives the opportunity to learn skills and get used to living on your own.
- More people should have the chance to get help from the community support team.

## Communication



- The group would like to know what Supporting People services are available – such as a directory.
- Information should be available in housing offices, libraries and from Social Services. People don't know about the Supporting People team or might not want to contact them.
- People need information about what Supporting People is – a leaflet?
- The group would like regular updates about what is happening.

## Reviews



**Question:** Does the Supporting People team tell providers that they must make their information accessible (such as their complaints procedure)?

**Yes. When we review a service we check policies to make sure that they are accessible.**

**Question:** Does the Supporting People team tell providers how often they should have reviews with service users?

**We don't tell providers how often they should review a support plan but when we review a service, we check that plans are reviewed appropriately. This means that someone using a short-term service should have their support plan reviewed often (such as every month). Long-term services (over two years) might not be as often.**

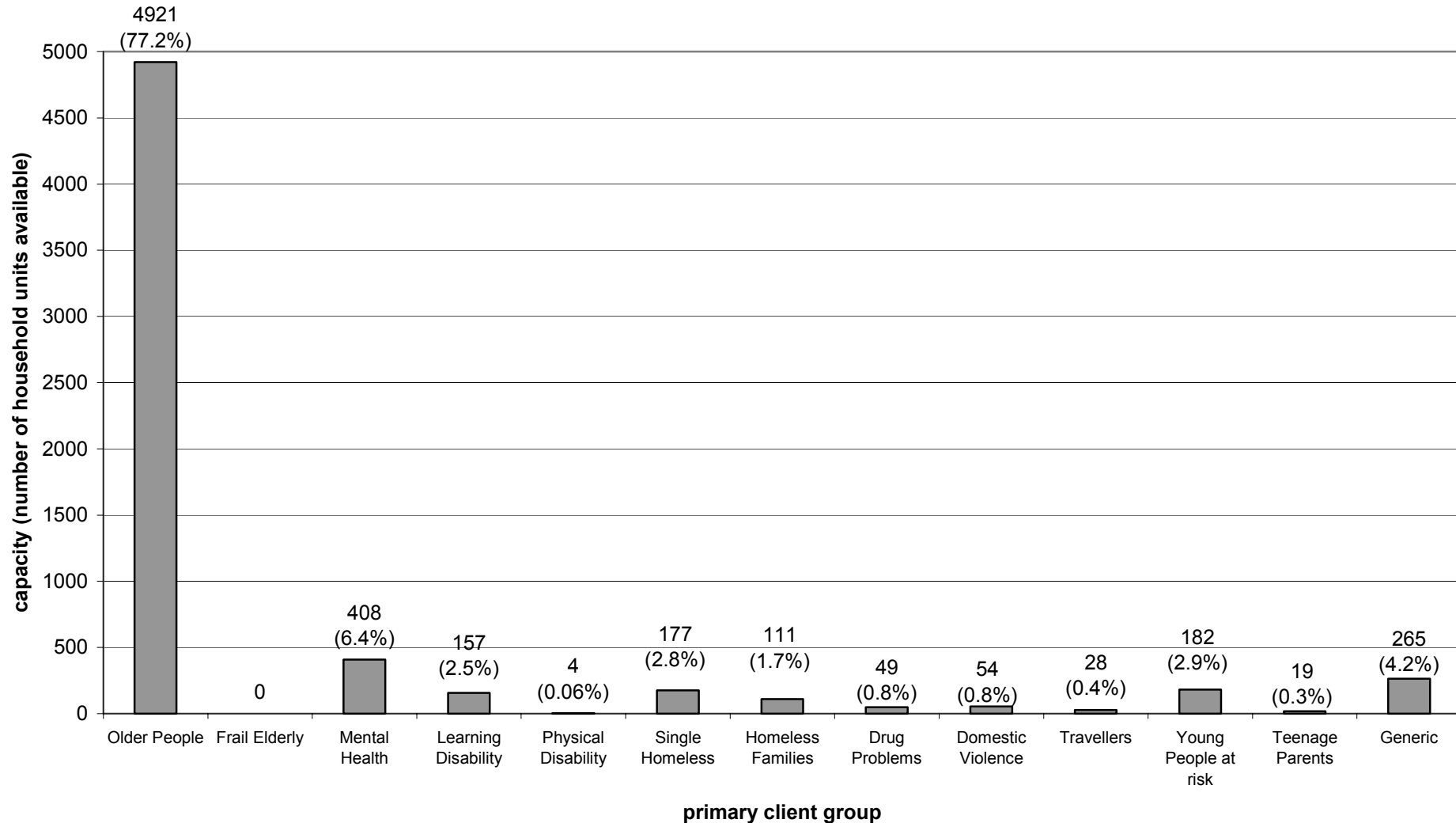
Candice Miller, July 2004

## **8 Groups that commented on the strategy**

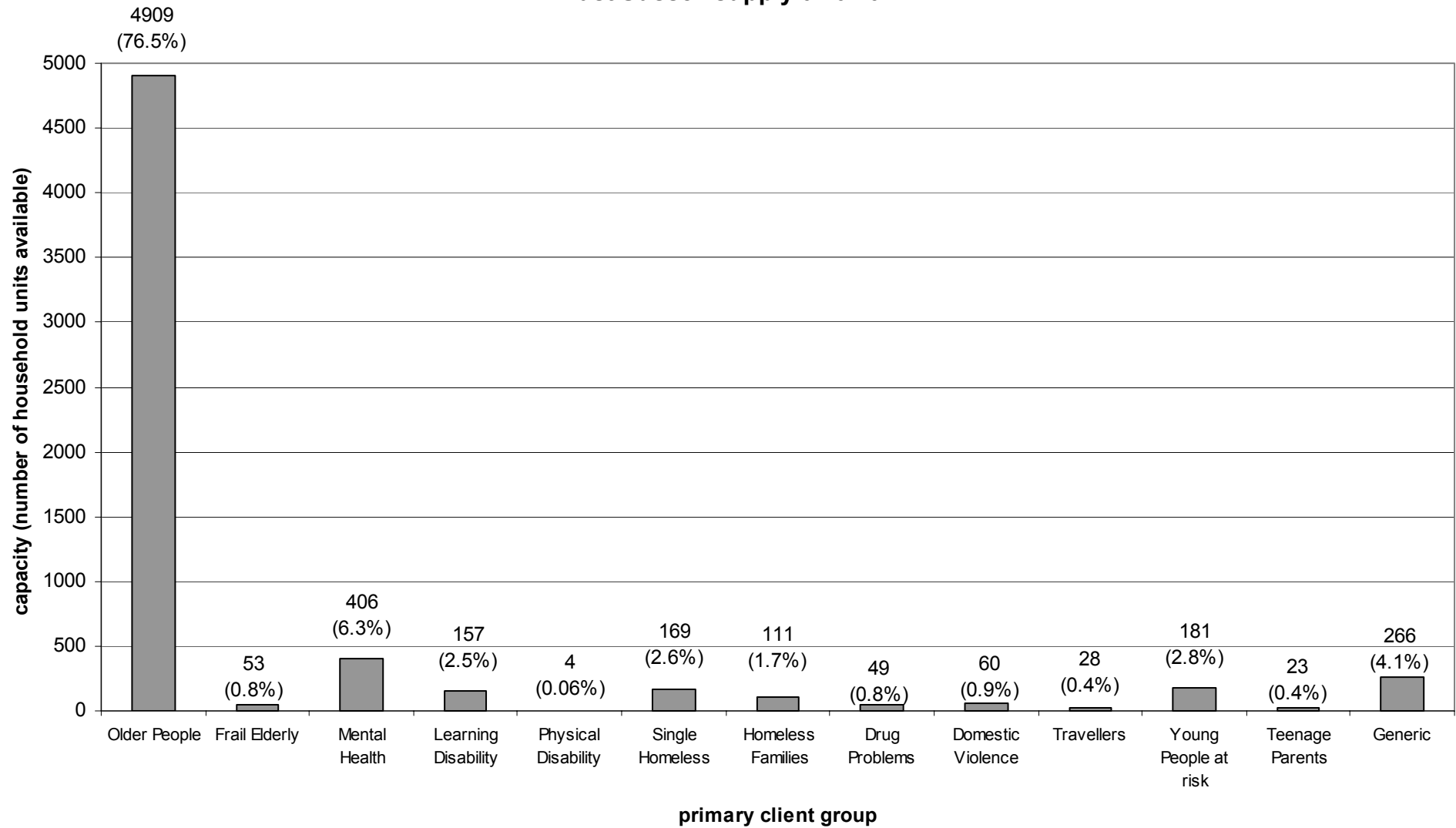
Adult Protection (Social Services Department)  
Crowebridge Housing  
Eastbourne Housing Partnership  
East Sussex Drug and Alcohol Action Team  
East Sussex Youth Offending Team  
Hastings and Rother Older People's Housing and Support Group  
Hastings Housing Partnership  
Lewes District Council  
Mental Health Services (East Sussex County Healthcare)  
Occupational Therapy Services (Social Services Department)  
Orbit Housing Association  
Policy and Strategy Unit (Social Services Department)  
Quality and Change Management Team (Social Services Department)  
Rother District Council  
Sompriti  
Southdown Housing Association  
St Vincent's Family Housing Association Limited  
Sussex Association for Spina Bifida and Hydrocephalus  
Wealden District Council

## 9 Supply maps

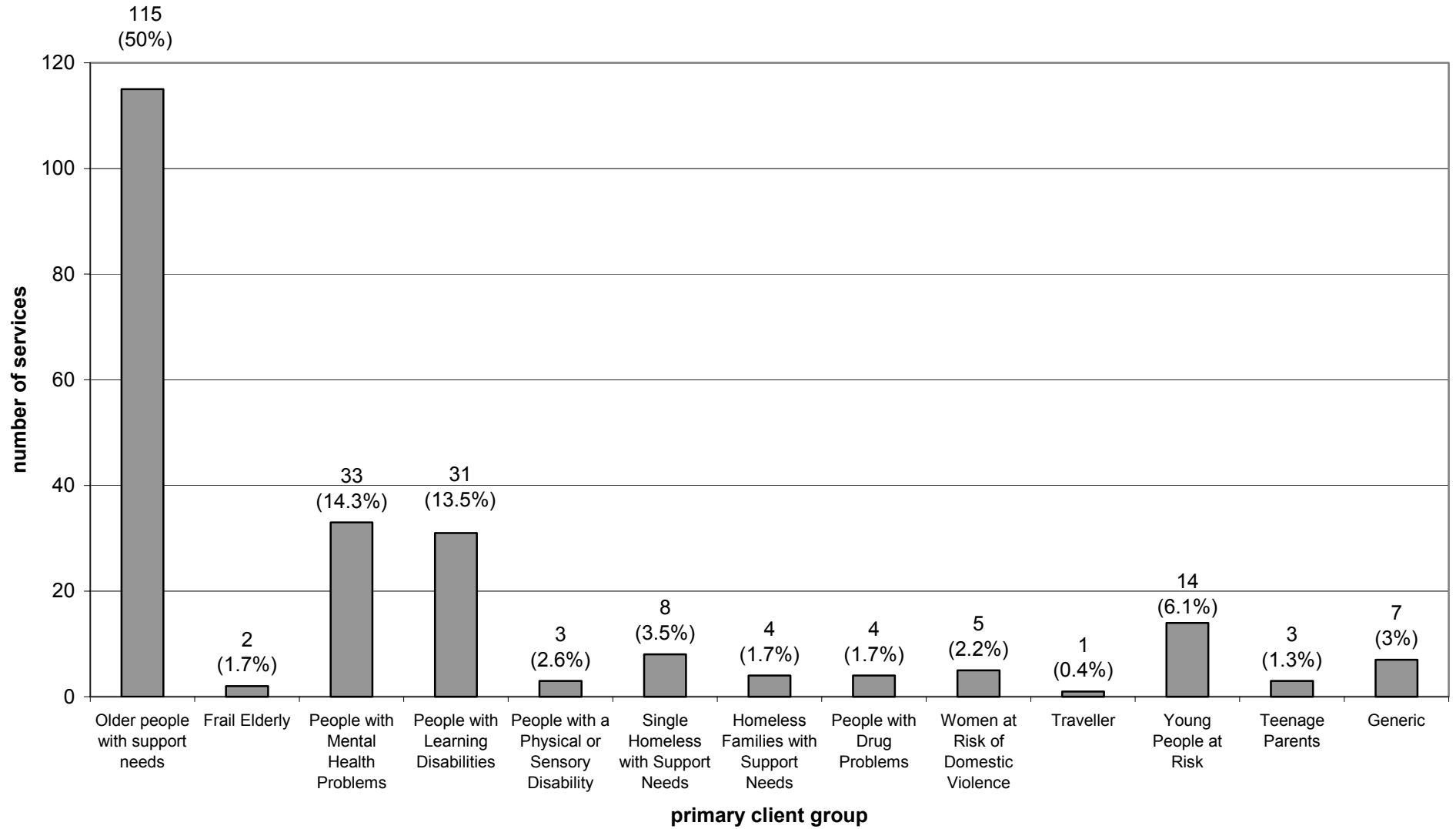
East Sussex supply 01.04.03



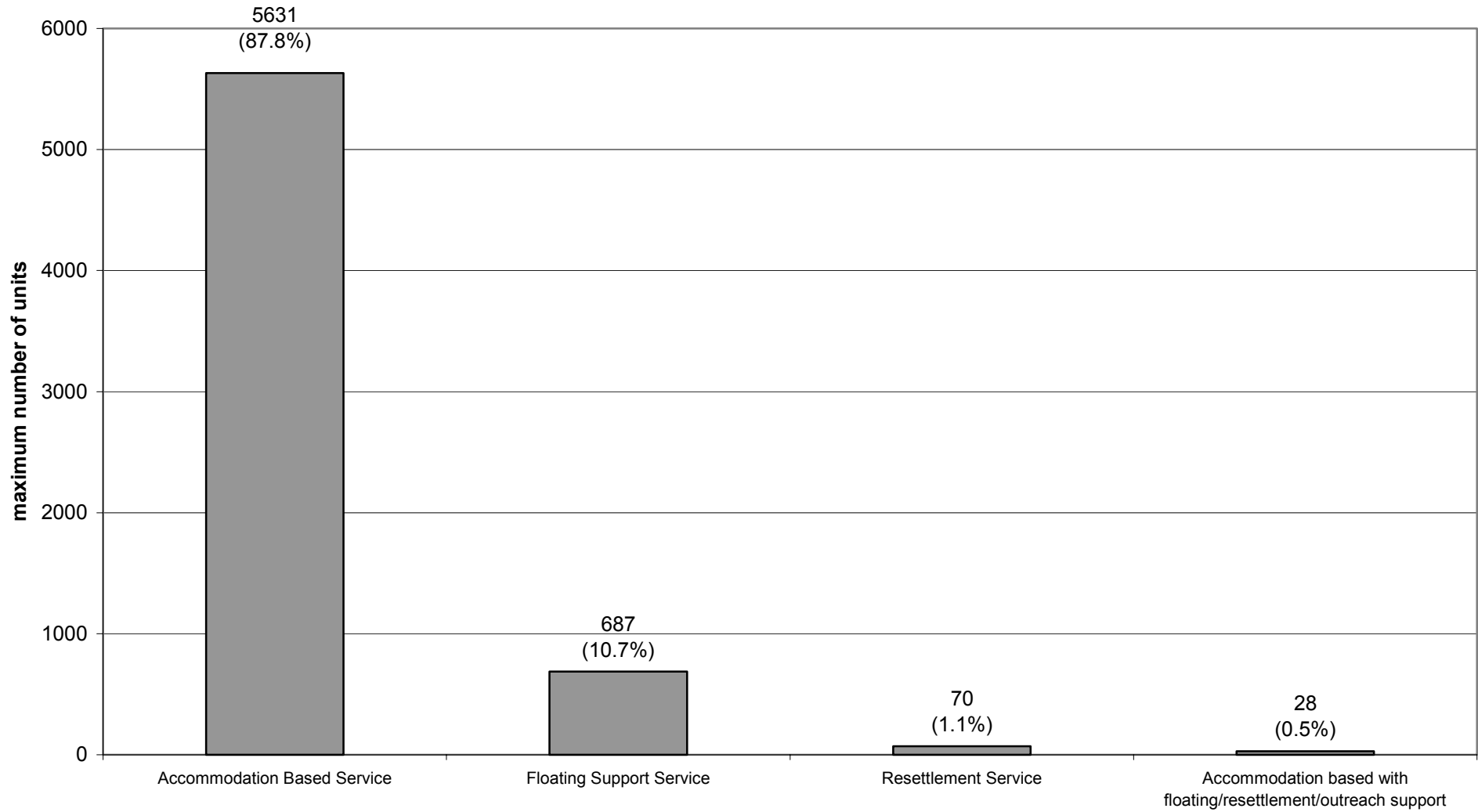
### East Sussex supply 01.04.04



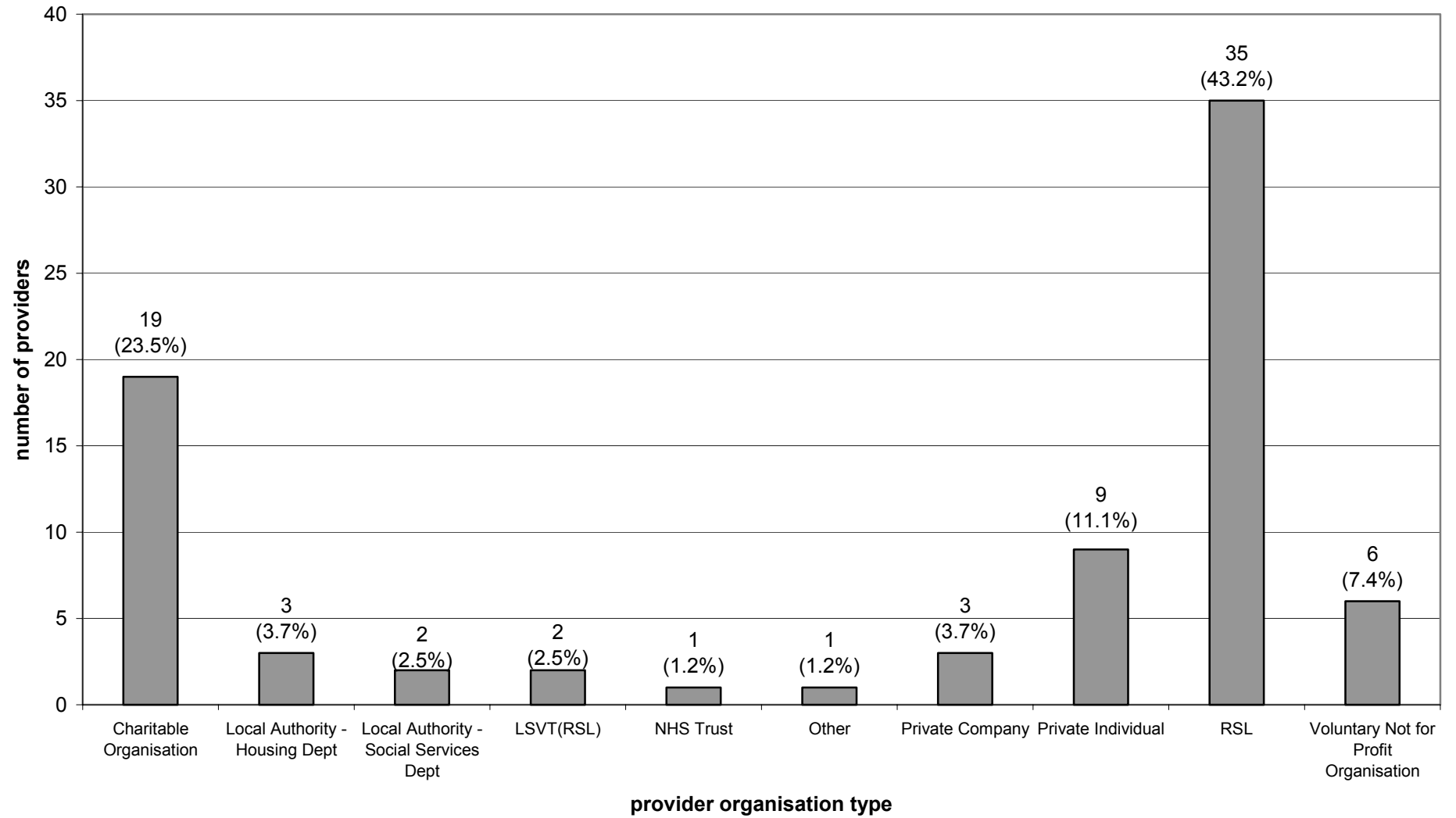
### Number of services 01.04.04



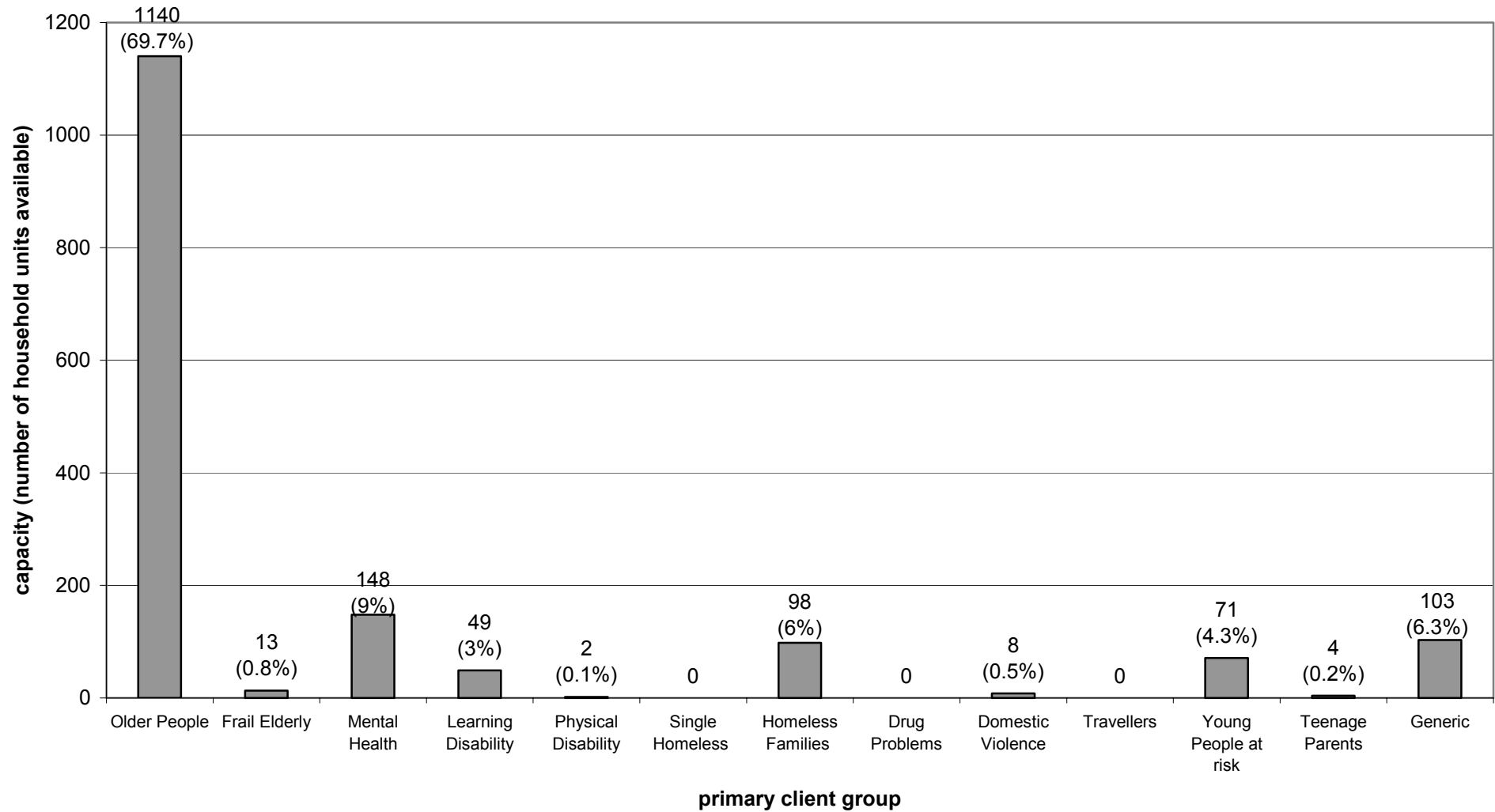
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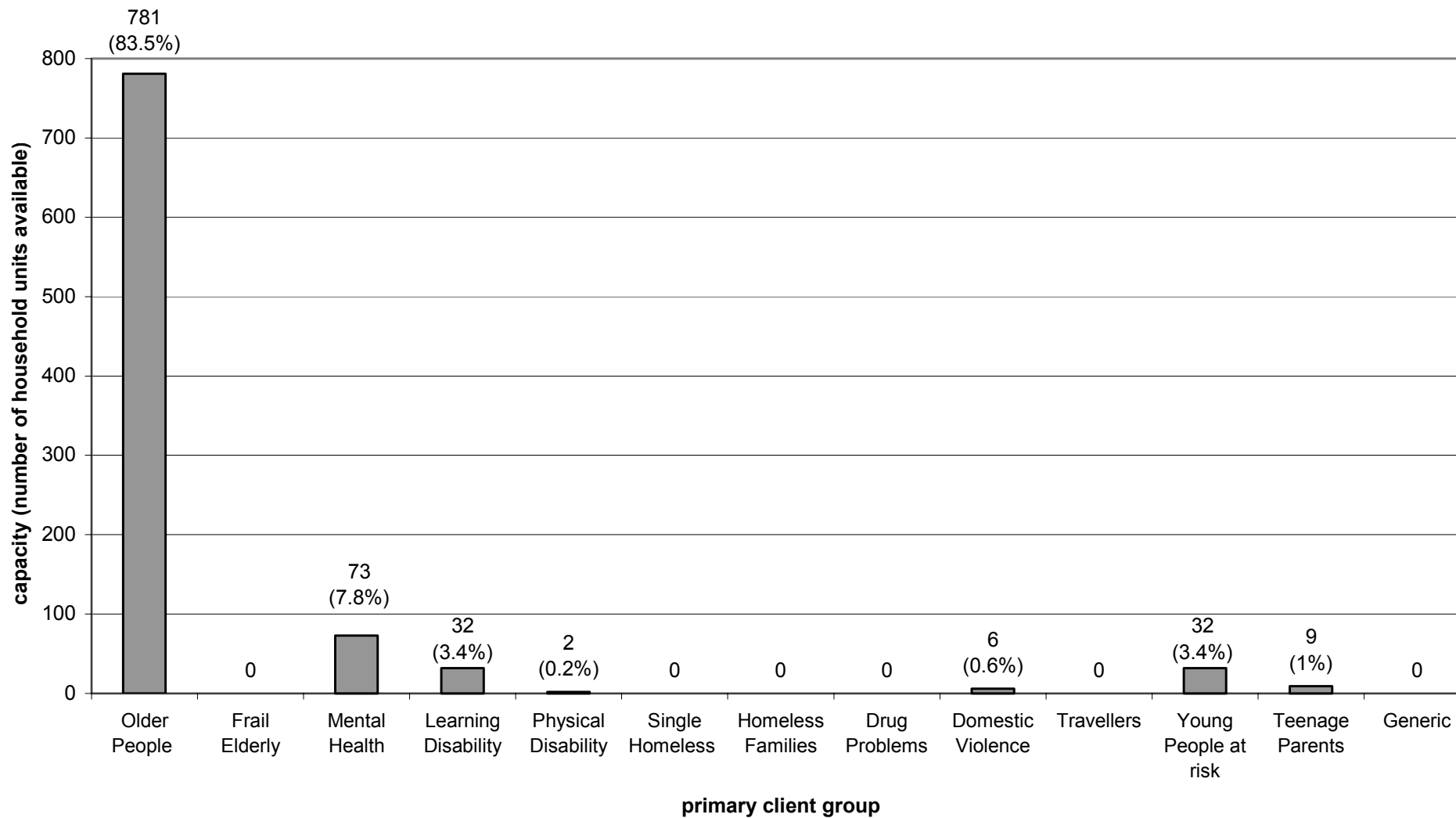
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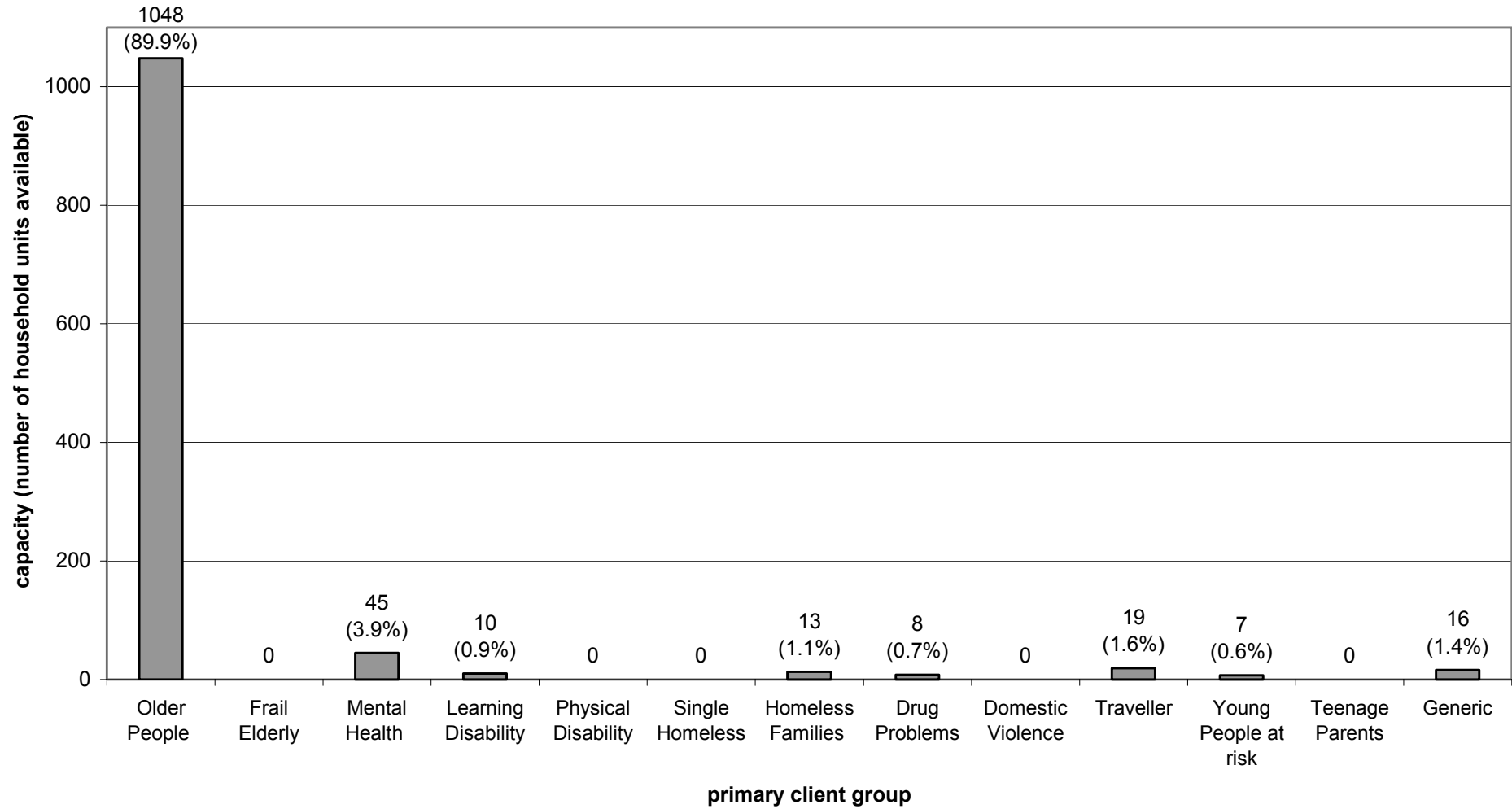
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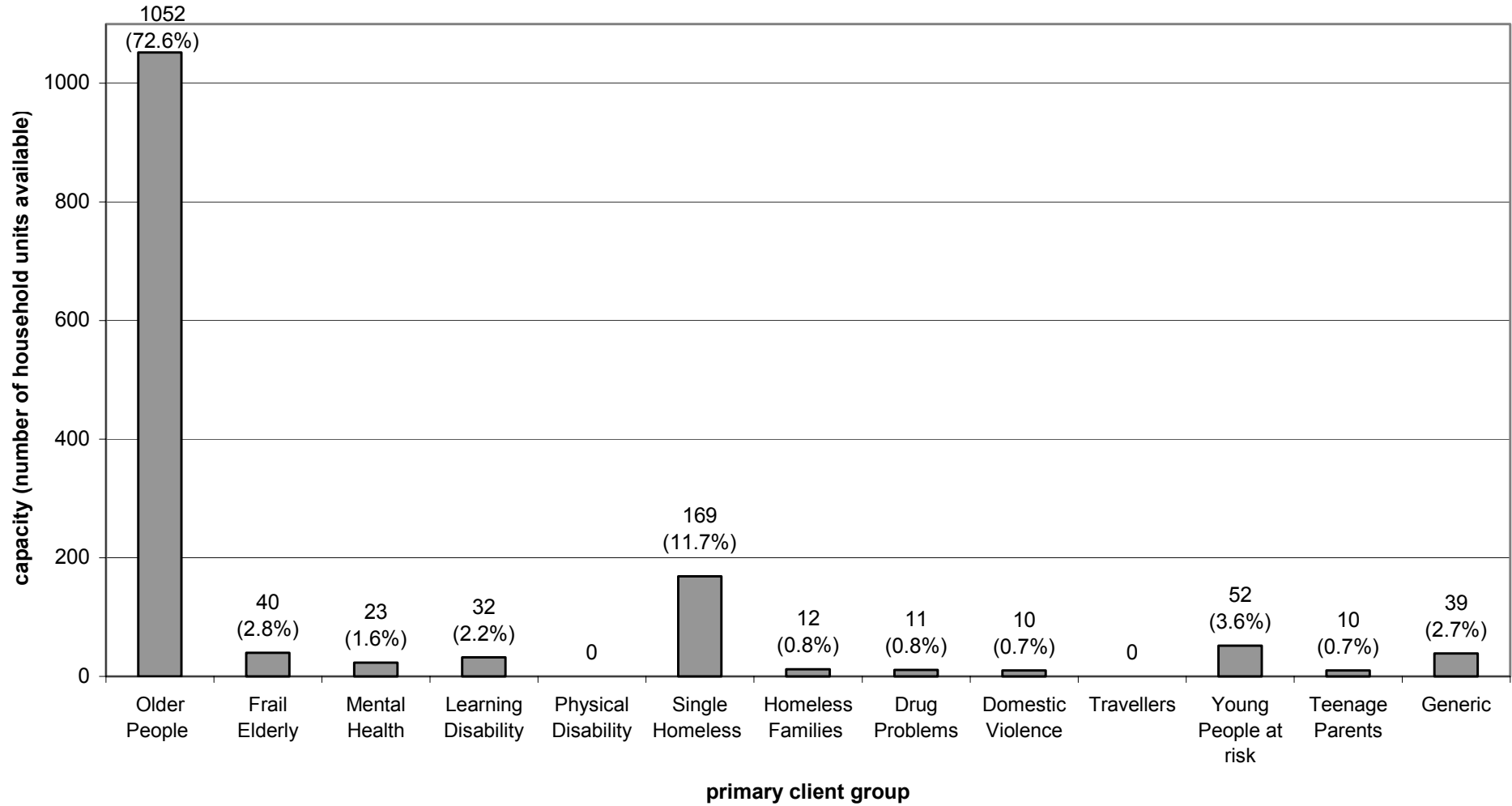
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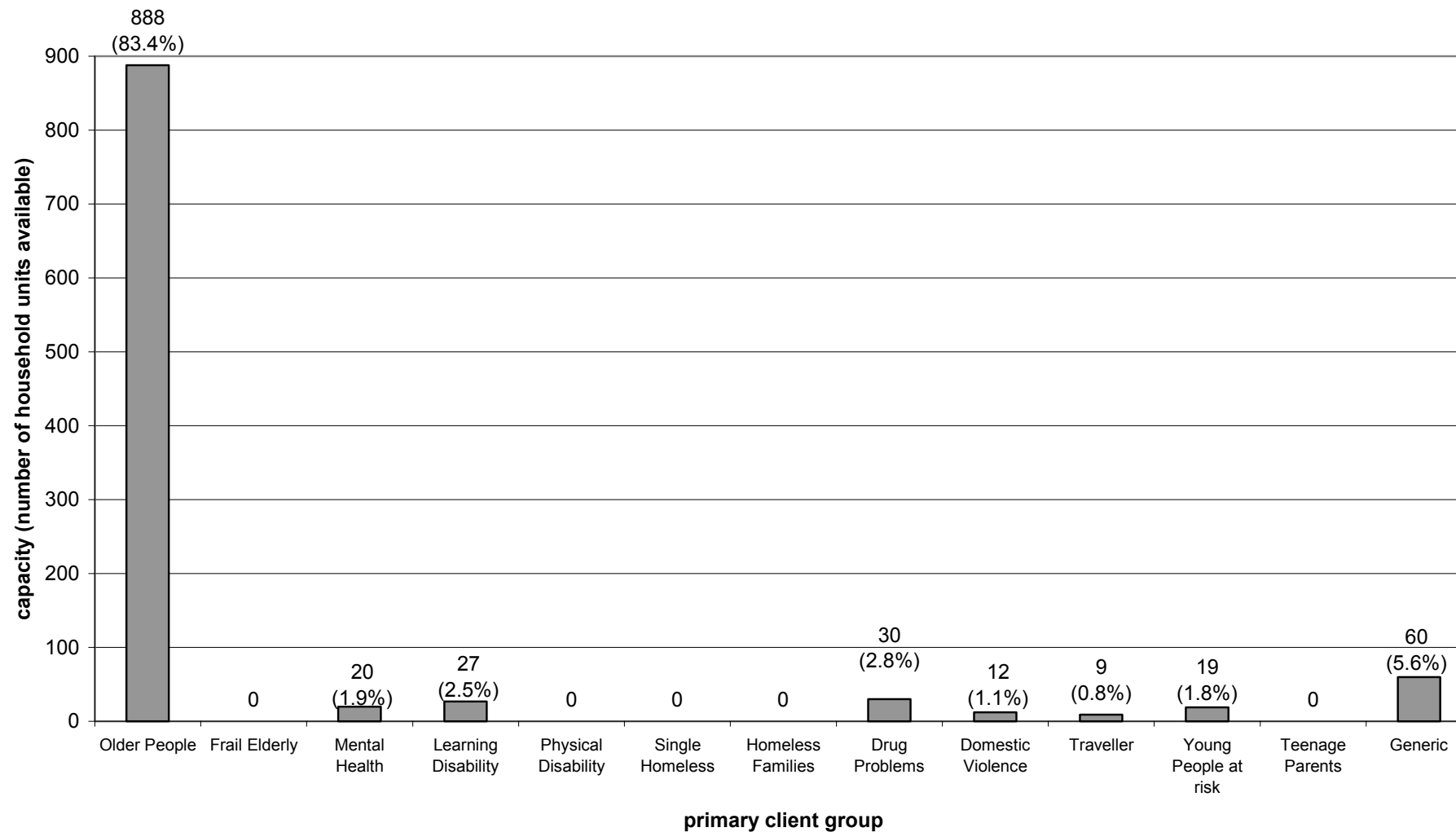
**Wealden District Council supply 01.04.04**



Hastings Borough Council supply 01.04.04



### Rother District Council supply 01.04.04



## 10 Comparative data

### Learning Disability

Authority	Total no. of household units available	No. of units per 100,000 head of population	No. of units per 100,000 head of population, excluding registered element	Accomm. based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>157</b>	<b>32</b>	<b>17</b>	<b>144 (71)</b>	<b>2</b>	<b>11</b>
Cumbria	342	70	41	342 (144)	0	0
Devon	423	60	52	273 (59)	43	107
Dorset	245	35	34	235 (11)	0	10
Gloucestershire	615	109	57	504 (292)	0	111
Kent	838	63	200	553 (179)	29 (7)	256
Lincolnshire	498	85				
Suffolk	388	58	48	300 (70)	0	88

\* The figures shown in brackets are the number. of units of registered care included in the total.

### Physical Disability

Authority	Total no. of household units available	No. of units per 100,000 head of population	Accommodation-based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>4</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>0</b>
Devon	162	23	65	0	97
Kent	801	60	195	0	606
Suffolk	152	23	92	0	60

### Homeless Families

Authority	Total no. of household units available	No. of units per 100,000 head of population	Accommodation-based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>111</b>	<b>23</b>	<b>41</b>	<b>0</b>	<b>70</b>
Devon	10	1	10	0	0
Kent	148	11	89	0	606
Suffolk	187	28	138	0	49

## APPENDICES

### Single Homeless People

Authority	Total no. of household units available	No. of units per 100,000 head of population	Accommodation-based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>169</b>	<b>34</b>	<b>77</b>	<b>0</b>	<b>92</b>
Devon	586	83	376	10	200
Kent	520	39	373	0	147
Suffolk	919	137	721	0	198

### People with Drug Problems

Authority	Total no. of household units available	No. of units per 100,000 head of population	No. of units per 100,000 head of population, excluding registered element	Accomm. based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>49</b>	<b>10</b>	<b>4</b>	<b>44 (30)</b>	<b>0</b>	<b>5</b>
Devon	50	7		44	6	0
Kent	31	2		28	0	3
Suffolk	61	9		4	0	57

\* The figures shown in brackets are the number of units of registered care included in the total.

### People with Alcohol Problems

Authority	Total no. of household units available	No. of units per 100,000 head of population	No. of units per 100,000 head of population, excluding registered element	Accomm. based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>0</b>	<b>0</b>				
Devon	61	9	7	37 (9)	9	15
Kent	26	2		24	0	2
Suffolk	5	1		5	0	0

\* The figures shown in brackets are the number of units of registered care included in the total.

### Offenders or people at risk of offending

Authority	Total no. of household units available	No. of Units per 100,000 head of population	Accommodation-based services	Adult Placement or Supported Lodgings *	Floating Support outreach/ resettlement services
<b>East Sussex</b>	<b>0</b>	<b>0</b>			
Devon	79	11	44	0	45
Kent	91	7	90	0	1
Suffolk	44	7	20	0	24

## 11 Supporting People service providers (on 1 April 2004)

1066 Housing Association	Mrs C W
Abbeyfield (Alfriston & District) Society Ltd	Mrs G W
Abbeyfield (Crowborough) Society Ltd	Mrs H B
Abbeyfield (Eastbourne) Society Ltd	Mrs J M (Heathercrest)
Abbeyfield (Groombridge) Society Ltd	Mrs M J
Abbeyfield (Mid Sussex) Society	Mrs R.R
Abbeyfield (Rotherfield) Society Ltd	NABS
Abbeyfield (Sussex Weald) Society	NCH
Abbeyfield UK	New Downland Housing Association
Almshouses of Elizabeth Countess De La Warr	Old Ben Homes
Anchor Trust (Eastbourne & Hailsham)	Orbit Housing Association
Ashley Homes (Shaftesbury)	Mrs P M
Avalon Community Enterprise (Novas)	Peacehaven & Telscombe Housing Association
Brighton Housing Trust (Eastbourne Housing Plus)	Phoenix House Housing Association
Carr-Gomm Society Ltd	Pincroft Housing Association (SE) Ltd
Christian Alliance Housing Association (CAHA) Ltd	Raglan Housing Association Ltd
Crime Reduction Initiatives (CRI)	Refuge
Crowebridge Housing	Rother Homes Limited
East Sussex County Health Care NHS Trust	Royal Cottage Homes for Watermen
East Sussex Social Services	Royal Mencap Society
East View Housing Management Ltd	RPS Rainer (South London Housing)
Eastbourne Borough Council	Salvation Army Housing Association (SAHA)
Eastbourne YMCA	Seaview Project
Five Villages Home Association	SeeAbility
Gundreda Housing Association	Shaftesbury Housing Group
Handy Helpers Ltd	Shaftesbury Society
Hanover Housing Association	SOS Home Services (In Conjunction with 1066)
Hastings Community Housing Association (HCHA)	Southdown Housing Association
Homes for Elderly Vegetarians Ltd (Vegetarian Housing Association)	Southern Horizon Housing Limited
Housing 21	Southern Housing Group Ltd
Hyde HAL (CDHA)	St Judes, Hyde Housing Association
James Butcher Housing Association	St Vincents Family Housing Association
Kelsey Housing Association	Stonham Housing Association
Kenward Trust	Sussex Autistic Community Trust (Care Services) Ltd
Lewes District Council	Sussex Housing and Care (SHC)
Mrs M O	The Disabilities Trust
Mencap - Eastbourne & District	The Guinness Trust (London Fund) Founded 1890 Reg. 1902
Mental After Care Association MACA (Kelsey)	Wandsworth Council Social Services
Mrs B F	Warden Housing Association Ltd
Mrs C A	Wealden District Council

## **12 Contract values**

Contract values by client group and area for 2004/05.

<b>Primary Client Group</b>	<b>District</b>	<b>Contract values</b>	<b>% of total</b>
Frail Elderly	Eastbourne	£61,012	0.45%
Frail Elderly	Hastings	£296,174	2.20%
Generic	Eastbourne	£613,909	4.56%
Generic	Hastings	£185,117	1.37%
Generic	Lewes	£17,929	0.13%
Generic	Rother	£141,013	1.05%
Generic	Wealden	£69,493	0.52%
Homeless Families with Support Needs	Eastbourne	£139,382	1.03%
Homeless Families with Support Needs	Wealden	£169,929	1.26%
Older people with support needs	Eastbourne	£976,513	7.25%
Older people with support needs	Hastings	£662,583	4.92%
Older people with support needs	Lewes	£579,846	4.30%
Older people with support needs	Rother	£623,270	4.62%
Older people with support needs	Wealden	£984,593	7.31%
People with a Physical or Sensory Disability	Eastbourne	£1,581	0.01%
People with a Physical or Sensory Disability	Lewes	£36,059	0.27%
People with Drug Problems	Hastings	£28,574	0.21%
People with Drug Problems	Rother	£105,653	0.78%
People with Drug Problems	Wealden	£28,973	0.21%
People with Learning Disabilities	Eastbourne	£759,589	5.64%
People with Learning Disabilities	Hastings	£103,849	0.77%
People with Learning Disabilities	Lewes	£303,570	2.25%
People with Learning Disabilities	Rother	£297,525	2.21%
People with Learning Disabilities	Wealden	£63,321	0.47%
People with Mental Health Problems	Eastbourne	£1,448,866	10.75%
People with Mental Health Problems	Hastings	£278,564	2.07%
People with Mental Health Problems	Lewes	£443,049	3.29%
People with Mental Health Problems	Rother	£375,881	2.79%

## APPENDICES

<b>Primary Client Group</b>	<b>District</b>	<b>Contract values</b>	<b>% of total</b>
People with Mental Health Problems	Wealden	£614,370	4.56%
Single Homeless with Support Needs	Hastings	£712,079	5.28%
Teenage Parents	Eastbourne	£37,439	0.28%
Teenage Parents	Hastings	£131,154	0.97%
Teenage Parents	Lewes	£62,136	0.46%
Traveller	Rother	£31,549	0.23%
Traveller	Wealden	£94,647	0.70%
Women at Risk of Domestic Violence	Eastbourne	£125,235	0.93%
Women at Risk of Domestic Violence	Hastings	£147,246	1.09%
Women at Risk of Domestic Violence	Lewes	£147,283	1.09%
Women at Risk of Domestic Violence	Rother	£207,941	1.54%
Women at Risk of Domestic Violence	Wealden	£187,433	1.39%
Young People at Risk	Eastbourne	£454,483	3.37%
Young People at Risk	Hastings	£241,444	1.79%
Young People at Risk	Lewes	£244,621	1.82%
Young People at Risk	Rother	£188,290	1.40%
Young People at Risk	Wealden	£53,632	0.40%
<b>Totals</b>		<b>£13,476,802</b>	<b>100%</b>

\*Where a service is provided across more than one district the contract value has been split evenly among each of them.

### 13 Review outcomes

Service Name	Primary Client Group	Service Type	Units	District	VFM	VFM prospects	QAF	QAF prospects	Performance	Performance prospects	Availability	Utilisation	Service user satisfaction	strategic relevance	Local review outcome
Chiltern Drive Floating Support	Generic	Floating	7	Hastings	Fair	Good	Good	Good	Good	Good	100%	72%	Don't Know	Yes	A three month extension to the interim contract to allow for budgetary information
Eastbourne Housing Plus - floating support	Generic	Floating	57	E'bourne	Fair	Good	Poor	Good	Good	Good	96%	94%	Good	Yes	Renew interim contract for 12 months with action plans. (2nd Review Oct 04)
Eastbourne Housing Plus- Accomm.	Generic	Accomm-based	20	E'bourne	Fair	Fair	Poor	Good	Fair	Fair		100%	Good	Yes	Renew interim contract for 12 months with action plans. (2nd Review Oct 04)
Wealden Temporary Floating	Generic	Floating	16	Wealden	Poor	Poor	Poor	Fair	Poor	Nil		41%	Good	No	De-commission service
Half Way Mothers & Children's Home	Homeless Families with Support Needs	Accomm-based	13	Wealden	Poor	Very Poor	Fair	Fair	Fair	Fair			Good	Yes	De-commission service
Support Service	Older People With Support Needs	Accomm-based	2	Hastings	Poor	Poor	Poor	Fair	Poor	Fair		100%	Good	No	De-commission service
Sheltered Housing for Older People	Older People With Support Needs	Accomm-based	30	Rother	Fair	Fair	Good	Good	Good	Fair	100%	98%	Good	Yes	Issue a Steady State Contract
Residential Care (1)	People with Drug Problems	Accomm-based	30	Rother							100%	100%			SHMG review. Funding withdrawn from 1 April 2005.

Service Name	Primary Client Group	Service Type	Units	District	VFM	VFM prospects	QAF	QAF prospects	Performance	Performance prospects	Availability	Utilisation	Service user satisfaction	Strategic relevance	Review outcome
Community Support Service	People with Learning Disabilities	Floating	7	E'bourne & W'den	Fair	Fair	Fair-Good	Good	Excellent	Good		100%	Good	Yes	Issue a steady state contract
Holmworth	People with Learning Disabilities	Accomm-based	2	E'bourne	Fair	Fair	Poor	Good	Good	Good	100%	100%	Excellent	Yes	Renew interim contract for 12 months with action plans
27 Arundel Road	People with Learning Disabilities	Accomm-based	8	E'bourne							100%	100%			SHMG review. Funding transferred to Community Care budget.
34 Claremont Road	People with Learning Disabilities	Accomm-based	7	Lewes											SHMG review. Possibility of d-registration.
37 London Road	People with Learning Disabilities	Accomm-based	7	Wealden											SHMG review. Possibility of de-registration.
Marlow Avenue	People with Learning Disabilities	Accomm-based	9	E'bourne	Fair	Fair	Fair	Good	Poor	Good	100%	100%	Fair	Yes	Renew the Interim Contract for twelve months with action plans
4 Victoria Road	People with Learning Disabilities	Accomm-based	7	Hastings											SHMG review. Possibility of d-registration.
72 Brighton Road	People with Learning Disabilities	Accomm-based	6	Lewes											SHMG review. Possibility of d-registration.
49 Lower Park Road	People with Learning Disabilities	Accomm-based	7	Hastings											SHMG review. Possibility of de-registration.
4 Essenden Road	People with Learning Disabilities	Accomm-based	7	Hastings											SHMG review. Possibility of de-registration.

Service Name	Primary Client Group	Service Type	Units	District	VFM	VFM prospects	QAF	QAF prospects	Performance	Performance prospects	Availability	Occupancy rate	Service user satisfaction	Strategic relevance	Review outcome
19 Milward Road	People with Learning Disabilities	Accommodation-based	7	Hastings											SHMG review. Possibility of de-registration.
24a Victoria Road	People with Learning Disabilities	Accommodation-based	7	E'bourne	Poor	Fair	Fair	Fair	Good	Fair	100%	100%	Good	Yes	Renew interim contract for 12 months with action plans
9 Bedford Avenue	People with Learning Disabilities	Accommodation-based	7	Rother	Poor	Fair	Fair	Fair	Good	Fair	100%	100%	Good	Yes	Renew interim contract for 12 months with action plans
Martello Road	People with Learning Disabilities	Accommodation-based	12	E'bourne	Fair	Fair	Fair	Good	Excellent	Excellent	100%	97%	Excellent	Yes	Renew interim contract for 12 months with action plans. (2nd Review)
Sutton Road Project	People with Learning Disabilities	Accommodation-based	5	Lewes	Fair	Good	Good	Good	Good	Fair	100%	100%	Good	Yes	Extend interim contract for 3 months until VFM assessment complete. Steady state contract is likely to be recommended upon satisfactory outcomes regarding VFM and accreditation 2 <sup>nd</sup> Review
Supported Living - Extra Care	People with Learning Disabilities	Accommodation-based	2	Lewes	Poor	Fair	Good	Good	Fair	Fair	100%	100%	Good	Yes	Extend interim contract for 3 months until VFM assessment complete. A steady state contract is likely to be recommended upon satisfactory outcomes regarding VFM and accreditation (2nd Review)
3A Grosvenor Road	People with Learning Disabilities	Accommodation-based	4	Lewes							100%	100%			SHMG review. Funding withdrawn from 1 April 2005.
Fiveways	People with Learning Disabilities	Accommodation-based	2	Lewes	Poor	Excellent	Good	Good	Good	Good	100%	100%	Excellent	Yes	Extend interim contract for 3 months to allow for more financial information to be produced

Service Name	Primary Client Group	Service Type	Units	District	VFM	VFM prospects	QAF	QAF prospects	Performance	Performance prospects	Availability	Occupancy rate	Service user satisfaction	Strategic relevance	Review outcome
ESACH Supported Living Scheme	People with Learning Disabilities	Accommodation-based	11	E'bourne	Fair	Fair	Good	Good	Good	Fair	100%	100%	Fair	Yes	Extend the interim contract for 6 months. Steady state contract is likely to be recommended. (2nd Review)
Burton Cottages	People with Learning Disabilities	Accommodation-based	12	Rother											SHMG review. Funding withdrawn from 1 April 2005.
The Warren	People with Learning Disabilities	Accommodation-based	3	Rother											SHMG review. Funding withdrawn from 1 April 2005.
Adult Placement Service	People with Learning Disabilities	Accommodation-based	1	Rother											Registered service review.
Eversley Road	People with Mental Health Problems	Accommodation-based	6	Rother	Poor	Good	Poor	Fair	Poor	Poor		100%	Fair	Yes	Extend interim contract for 12 months with action plans (2nd Review)
Pathways	People with Mental Health Problems	Accommodation-based	12	Rother	Poor	Good	Poor	Fair	Poor	Poor	100%	92%	Good	Yes	Extend interim contract for 12 months with action plans (2nd Review)
Wealden Tenancy Support Service	People with Mental Health Problems	Floating	19	Wealden	Good	Good	Fair	Good			100%	70%	Good	Yes	Renew interim contract for 3 months to allow for accreditation.
Tenby House	People with Mental Health Problems	Accommodation-based	12	Hastings											SHMG review. Funding withdrawn from 1 April 2005.
Lawn Court	People with Mental Health Problems	Floating	1	Rother	Poor	Good	Poor	Fair	Poor	Poor		100%		Yes	Extend interim contract for 12 months with action plans (2nd Review)
Lewes District Supported Accommodation Scheme	People with Mental Health Problems	Accommodation-based	60	Lewes	Fair	Fair	Excellent	Good	Good	Good	80%	100%	Good	Yes	Renew interim contract for 3 months to allow for VFM assessment and accreditation

Service Name	Primary Client Group	Service Type	Units	District	VFM	VFM prospects	QAF	QAF prospects	Performance	Performance prospects	Availability	Occupancy rate	Service user satisfaction	Strategic relevance	Review outcome
Priory Avenue	Single Homeless with Support Needs	Accomm-based	18	Hastings	Poor	Fair	Poor	Poor	Poor	Poor	100%	84%	Good	Yes	Renew interim contract for 12 months with action plans
Merrick House Project	Single Homeless with Support Needs	Accomm-based	12	Hastings	Poor	Fair	Fair	Good	Very Good	Good	100%	78%	Good	Yes	Renew interim contract for 12 months with action plans
Homeless Support Service	Single Homeless with Support Needs	Accomm-based	8	E'bourne	Fair	Poor	Poor	Nil	Poor	Nil			Fair	Yes	Decommission service
Turner House	Teenage Parents	Accomm-based	10	Hastings	Fair	Fair	Good	Good	Good	Good	100%	100%	Excellent	Yes	Issue a steady state contract
Young People Support - Newhaven	Teenage Parents	Accomm-based	9	Lewes	Good	Poor	Good	Fair	Good	Good	100%	89%	Good	Yes	Issue a steady state contract
Eastbourne Refuge	Women at Risk of Domestic Violence	Accomm-based	8	E'bourne	Fair	Fair	Fair	Good	Good	Fair	100%	90%	Good	Yes	Temporary extension to existing contract with action plans
Hastings Refuge	Women at Risk of Domestic Violence	Accomm-based	10	Hastings	Fair	Good	Good	Good	Good	Good	100%	92%	Good	Yes	Renew interim contract for 12 months with action plans
East Sussex Outreach Service	Women at Risk of Domestic Violence	Floating	24	C'wide	Good	Fair	Good	Good				100%		Yes	Issue a steady state contract
St Judes Rother Domestic Violence Refuge	Women at Risk of Domestic Violence	Accomm-based	12	Rother	Good	Fair	Fair	Good	Good	Fair	100%	100%	Good	Yes	Issue a steady state contract
Flats 1 - 4, 181b London Road	Young People at Risk	Accomm-based	4	Rother	Fair	Fair	Poor	Fair	Fair	Fair	100%	81%	Good	Yes	Renew interim contract for 12 months with action plans
181a London Road - Hostel	Young People at Risk	Accomm-based	9	Rother	Fair	Fair	Poor	Fair	Fair	Fair	100%	76%	Good	Yes	Renew interim contract for 12 months with action plans

Service Name	Primary Client Group	Service Type	Units	District	VFM	VFM prospects	QAF	QAF prospects	Performance	Performance prospects	Availability	Occupancy rate	Service user satisfaction	Strategic relevance	Review outcome
Hailsham Foyer	Young People at Risk	Accommodation-based	7	Wealden	Fair	Fair	Good	Good	Good	Good	100%	100%	Good	Yes	Issue a steady state contract
YMCA Residential Centre	Young People at Risk	Accommodation-based	17	E'bourne	Good	Fair	Good	Good	Good	Good	100%	100%	Very Good	Yes	Issue a steady state contract
Lewes District Foyer	Young People at Risk	Accommodation-based	29	Lewes	Fair	Fair	Poor	Good	Good	Good	100%	92%	Good	Yes	Renew interim contract for 12 months with action plans
Eastbourne Foyer	Young People at Risk	Accommodation-based	29	E'bourne	Fair	Good	Good	Good	Good	Fair			Good	Yes	Renew interim contract for 3 months to allow for VFM assessment to be completed. (It is likely that a steady state contract will be recommended upon satisfactory completion of a VFM assessment)
Hylands House bedsits	Young People at Risk	Accommodation-based	6	E'bourne	Fair	Fair	Fair	Good	Good	Fair	100%	100%	Good	Yes	Renew interim contract for 12 months with action plans. (2nd Review)
Hylands House flats	Young People at Risk	Accommodation-based	19	E'bourne	Good	Fair	Fair	Good	Good	Fair			Good	Yes	Renew interim contract for 12 months with action plans (2nd Review)
Supported Housing for Young Adults	Young People at Risk	Accommodation-based	6	Rother	Poor	Don't Know	Fair	Good	Poor	Fair	100%	64%	Good	Unsure	Renew the Interim Contract for twelve months with action plans
7 Brittany Road	Young People at Risk	Accommodation-based	9	Hastings	Fair	Don't Know	Fair	Good	Good	Good	100%	100%	Good	Yes	Renew interim contract for three months to allow for VFM and QAF assessment
99 Milward Road	Young People at Risk	Accommodation-based	5	Hastings	Good	Fair	Fair	Good	Good	Good	100%	100%	Good	Yes	Temporary extension to existing contract with action plans
73 Southwater Road	Young People at Risk	Accommodation-based	5	Hastings	Fair	Fair	Fair	Good	Good	Good	100%	100%	Good	Yes	Renew Interim contract for three months to allow for VFM and QAF assessment

14 Charging Policy



supporting**people**  
supporting independence

# East Sussex Supporting People Charging Policy

November 2004



## Introduction

The Supporting People programme funds and regulates housing related support services that help vulnerable adults to live independently. East Sussex County Council is the administering authority for the programme. The East Sussex, Health, Housing, Social Care and Probation Strategic Forum is the commissioning body.

This policy replaces the *Interim Charging Policy for Supporting People Services* (January 2003). It was approved by East Sussex County Council' cabinet on 18 October 2004 and the East Sussex, Health, Housing, Social Care and Probation Strategic Forum on 11 November 2004.

This policy applies to:

- Supporting People funded services;
- organisations providing Supporting People services;
- people using Supporting People services; and
- East Sussex County Council.

## Statutory Framework

### Supporting People Grant

Section 93 of the Local Government Act 2000 allows the secretary of state to make payments of grants for designated welfare services (which include Supporting People services).

Supporting People grant is paid to East Sussex County Council as the administering authority subject to the Supporting People Programme Grant (England) Conditions 2004.

The Local Authorities (Charges for Specified Welfare Services) (England) Regulations 2003 give administering authorities powers to charge for some Supporting People services.

### Eligibility

Service users are eligible for Supporting People subsidy if they receive a service that fulfils the criteria set out in the schedule to the grant conditions. These are housing related support services, transitional support services and occasional support services.

Services provided by the administering authority that satisfy a statutory duty placed on that authority are **not** eligible for Supporting People grant. In practice, these include personal care, social care and health care services. Specific exclusions include building works, provision of equipment, psychological therapy, therapeutic counselling, services that enforce specific requirements imposed by a court of law and general housing management services. These services **cannot** be paid for by Supporting People grant.

### Service users

Individuals aged 16 and over who receive an eligible welfare service are eligible for Supporting People subsidy on their behalf with the following exceptions:

- Young people who are leaving care and are placed under the Children (Leaving Care) Act 2000 are not eligible for Supporting People Grant. These 16 and 17 year olds or 18 to 21 year olds in full time education are also described as 'relevant children' or 'looked after children'.
- People who have been discharged from long stay hospital under Section 28A of the NHS Act 1977 and are receiving social care services jointly commissioned by the local authority and health authority.
- People who are funded by the NHS under Section 64 of the Health Services and Public Health Act 1968. These are grants that help voluntary organisations whose work supports the Government's health and social care goals.
- Asylum seekers who have not been given leave to remain and become refugees. Refugees who have leave to remain in the county can receive Supporting People funded services.

Service users who have been discharged under Section 117 of the Mental Health Act 1983 are eligible to receive services funded under Supporting People. However, they must **also** receive social or health care services which are provided or commissioned by health or social services to meet their statutory duty to provider aftercare services.

### Charging for services

#### Chargeable services

A charge can be made for some Supporting People services, but not others. ODPM regulations state that short-term services should not be charged for. ODPM guidance recommends that:

- there is a charge for long-term services that last over two years are part of a permanent or open-ended arrangement; and
- there is no charge for short-term services that aim to bring about independent living within two years.

This guidance has been adopted in East Sussex but individual decisions about which services are chargeable will be made locally by the administering authority. Services are classed as 'chargeable' or 'non-chargeable' under contract and this is kept under review.

#### Relief from charges

ODPM charging guidance states that local authorities should work towards the full integration of charging for Supporting People services and for social care services through Fairer Charging at the earliest date possible.

In chargeable services, service users who are receiving Housing Benefit, Guarantee Credit element of Pension Credit, Income Support or Job Seekers Allowance will not be charged for their housing related support service.

Other service users who would like help paying their housing related support charge can apply for a financial assessment under Fairer Charging rules.

### **Supporting People subsidy payments**

Supporting People subsidy is usually paid direct to the service provider on behalf of all service users who have been assessed as eligible for a reduction in their support charge or for a free service (except long leaseholders). The service provider is responsible for collecting money from service users who must pay towards their own support charge.

Long leaseholders who receive a Supporting People service may also be eligible for Supporting People subsidy. Leaseholders are paid Supporting People subsidy direct according to a signed 'leaseholder's agreement'.

### **Review of financial circumstances**

These rules apply to existing passported service users and new service users. They are based on the rules for financial reviews for means tested benefits applied by the Department of Work and Pensions.

Unless there is a change of circumstance, eligibility for Supporting People subsidy will be reviewed as follows:

- Service users aged under 65 – review financial assessment every year.
- Service users ages over 65 – review financial assessment every 5 years.

Any decrease in income that leaves a service user worse off will always result in an early financial assessment review.

Increases in income will only be reviewed early if the increase is more than £5 per week.

### **Change of circumstance**

Service users who receive Supporting People subsidy in respect of their support charge are responsible for telling the Supporting People team and their service provider about any relevant change of circumstance.

Organisations providing Supporting People services under a subsidy contract are also responsible for telling the Supporting People team about any service users who leave the service or have a relevant change of circumstance. This should be done using the provider return.

## **Payments of Supporting People Grant**

### **Period of subsidy payment**

Supporting People subsidy can be paid from the service or tenancy start date if the request for subsidy form is received before or within one week of that date.

If the request for subsidy form is received more than one week after the service or tenancy start date; Supporting People subsidy will be paid from the Monday after the form was received.

### **Backdating**

Subsidy payments are dependent on receipt of evidence that the service user is eligible for subsidy. Any request for evidence from the Social Services Department Financial Assessment team must be responded to within one calendar month of the date of the letter sent. Payments can only be backdated (in accordance with 5.1) when the relevant evidence has been received.

It is recognised that there may be legitimate reasons for delay in providing evidence such as Housing Benefit notifications. Payments can still be backdated (in accordance with 5.1) when the relevant evidence has been received, provided that the delay has been communicated to the Social Services Department Financial Assessment team within one month.

If no communication is made within that month, the application will be closed and a new application will need to be made. Payments can only then be backdated to the Monday after receipt of the new form.

Payments can only be backdated further in exceptional circumstances with good cause<sup>1</sup>. Individual appeals will be considered by the Head of Supporting People and the Head of Financial Services.

### **Recovery of overpayments**

Supporting People subsidy is usually paid four-weekly to service providers two weeks in advance and two weeks in arrears. These payments are not classed as overpayments as long as the service provider uses the provider return to report any variations in eligibility or errors in payment on behalf of service users. East Sussex County Council will recover any overpayments made from the service provider.

Supporting People subsidy is paid to long leaseholders twice a year six months in advance. The 'leaseholder's agreement' obliges leaseholders or their representatives to tell the Social Services Department Financial Assessment team about any changes in their financial circumstances. Overpayments made to a long leaseholder will be recovered from the individual or their estate.

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<sup>1</sup> As defined in Housing Benefit regulations.

### Writing off overpayments

Overpayments will only be written off if the cost of recovery exceeds the overpayment value. Delegated powers for write-off of overpayments are:

- up to £100 – Head of Supporting People
- up to £1,000 – Assistant Director, Performance and Quality
- up to £2,500 – Director of Social Services
- over £2,500 - Cabinet

### Transitional arrangements

The ODPM use the term 'transitional' to describe the interim period from 1 April 2003 until the end of the interim contract for a given service.

Authorities are required to offer protection to service users who were receiving housing related support on 1 April 2003 **and** who were previously receiving housing benefit or who were previously in local authority services with pooled costs. These people should receive the same level of service and pay no more than they previously paid under the housing benefit regulations until a review of their services.

Any Supporting People service user who was receiving an amount of Transitional Housing Benefit (THB), Income Support<sup>2</sup> or Jobseeker's Allowance<sup>3</sup> on 31 March 2003 (full or partial) will not be charged for their housing related support service. During the interim period, they should not pay more than they were paying on 1 April 2003.

### Supporting People and Community Care

Any service user who receives a social (community) care service and a Supporting People service will have a single financial assessment under Fairer Charging.

- Service users who are assessed as eligible for full financial support will not need to pay for their Supporting People *or* social care service.
- Service users who do not qualify for any financial support will have to pay their support charge to their service provider (Supporting People service), *and* the charge for their social care service to social services.
- Service users who are assessed as eligible for some (partial) financial support will have their charges apportioned between Supporting People and the Social Services Department. They will need to pay their support charge to their service provider (Supporting People service), *and* the charge for their social care service to social services.

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<sup>2</sup> Where Income Support is paid in respect of service charges for support services relating to housing.

<sup>3</sup> Where the Jobseeker's Allowance is paid in respect of the service charges for support services relating to housing.

### **Temporary Absence**

Supporting People grant may continue to be paid for any chargeable floating support service that is not being received due to a temporary absence of up to one calendar month.

Housing related support in accommodation-based services (such as sheltered housing) is usually a condition of the tenancy agreement and individuals are usually still liable to pay their support charge while they are temporarily absent. In these cases, subsidy payments will continue as long as the tenancy exists and the support charge is being made up to a period of one year.

### **Complaints**

If a service user, carer or service provider considers that this policy has been unfairly or inaccurately applied they should complain in the first instance to the Head of Supporting People. All complaints will be resolved in line with the Social Services Department Complaints Procedure.

### **Fraud**

East Sussex County Council is determined that the culture and tone of the organisation is one of honesty and opposition to fraud and corruption. The Supporting People team and financial support officers will work within the county council's Anti-Fraud and Corruption Strategy (May 2004).

Overpayments of Supporting People subsidy arising from fraud will be recovered and specialist advice sought on investigation and prosecution.

### **Data Protection**

All personal data held by the Supporting People team and the Supporting People Financial Assessment team will comply with the eight Data Protection Principles in the Data Protection Act 1998.

## 15 Agreed list of services

The table below lists services that have been commissioned to provide housing-related support to people in our priority client groups.

primary client group	units	description	location	support provider	capital source	support cost	SP funding currently available	other revenue funding	proposed date of opening
Frail older people	35	Extra care service	Ticehurst, (Rother)	Rother Homes	ADP	Total care and support £176,000	£14,000	Community Care funding	Jan 05
People with a learning disability	2	Highly supportive move-on	Field Cottage, Ringmer (Lewes)	Kelsey	ADP	Total care and support £40,000	None	Community Care funding	Jan 05
People with a learning disability	2	Supportive accommodation for people with a mild learning disability.	Phoenix Court, Hailsham (Wealden)	Southdown	ADP	£10,000	£10,000 from de-commissioned support service for people with a learning disability		Jan 05
People with a learning disability	6	Supportive accommodation for people with a mild learning disability.	Palesgate Lane, Crowborough (Wealden)	Southdown	ADP	£20,000	£20,000 from de-commissioned support service for people with a learning disability	None	Jan 05
People with a learning disability	9	Highly supportive move-on (staged)	Park Lane, Eastbourne	Kelsey	ADP	Not yet agreed	None	Community Care funding	06
People with a learning disability	6 x 1 or 2 bed	Supportive accommodation (will accept people who also have a physical disability)	Vernon Close, Uckfield (Wealden)	Town & Country /Elizabeth Fitzroy	ADP	Not yet agreed	None	Community Care funding	Not known
People with a learning disability	4 x 2 bed and 2 x 1 bed	Extra care service	Churchill Court, Hastings	1066	DoH Expression of interest: not accepted	Total care and support £145,000	None	Community Care funding	06
Homeless people with complex needs	11	accommodation-based service – a pipeline re-provision of a sheltered service	Bal Edmund, Hastings	Carr Gomm	ADP	Support £350,000	£350,000	None	Jan 05
Homeless people with complex needs	48	Floating support	Hastings, Rother Eastbourne	Seaview	N/A			None	Pilot in Dec 04

## 16 'Wish list' of services

The table below is a list of services that meet our strategic commissioning priorities and client group priorities. These are services that could be funded by Supporting People grant if extra money was available.

primary client group	units	description	location	support provider	capital source	support cost	SP funding currently available	Other revenue funding	proposed date of opening
Older people	Not yet agreed	Floating support service to older people who are owner-occupiers or living in private rented sector – including handyperson, safety check services,	County wide	To be selected through commissioning framework.	N/A	Not yet agreed	None		Pilot in Wealden DC area in 06/07
Older people	40	Extra care	Peacehaven/Newhaven (Lewes)	To be selected through commissioning framework.	ADP? DoH Extra Care Housing Fund? PFI?	Total care and support £200,000	None		06/07
Older People	Not yet agreed	4 integrated extra care scheme	To be agreed	To be selected through commissioning framework.	Exploration of Private Finance Initiatives	Not yet agreed	None		2010
People with a physical disability	4 x 4 bed	accommodation-based service	To be identified	To be selected through commissioning framework.	Not required	Support £45,000	None		07/08
People with substance misuse problems	85	Floating support	County wide	To be selected through commissioning framework.	N/A	£105,000	£105,000 legacy funding from existing national service.		Dec 05
Homeless people with complex needs	48	Floating support	County wide	Seaview	N/A		None	None	06/07 if pilot successful
Travellers	Not yet agreed	Very short-term support.	Southerham transit site (Lewes)	Not identified	Not identified				



NATIONAL PROBATION SERVICE  
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