

Appendix 1 – Profile of Services

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Geographics



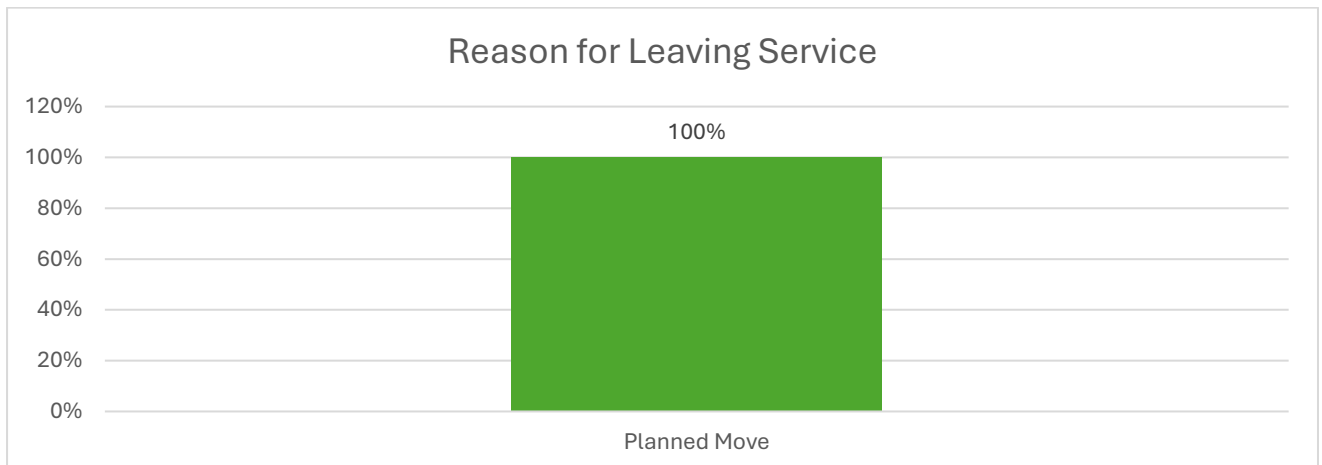
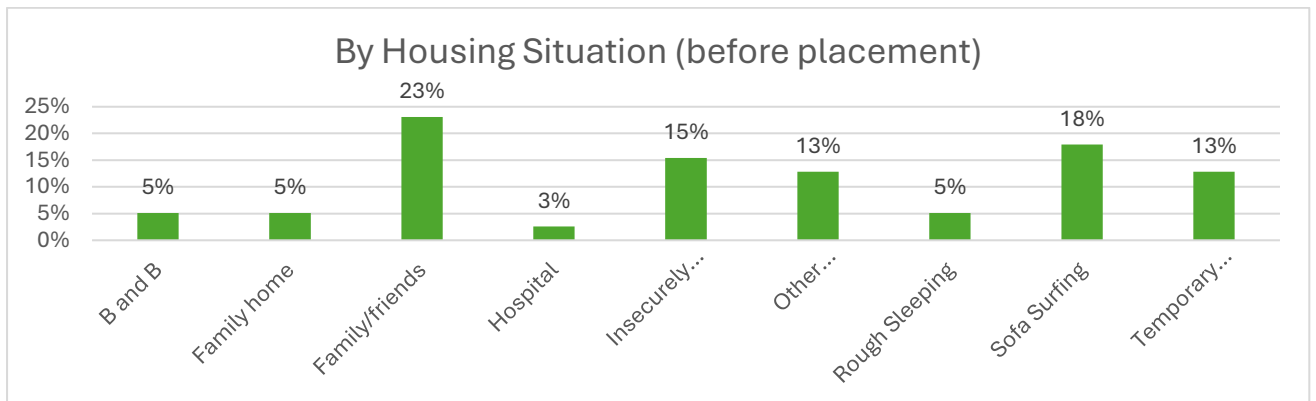
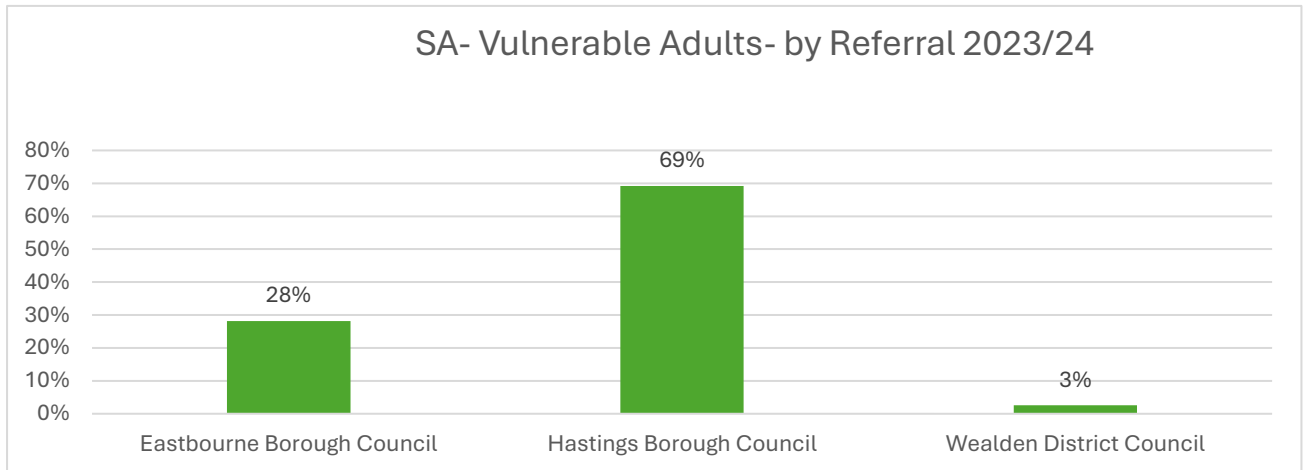
The five services are situated in Eastbourne, Bexhill and Hastings. Three are supported accommodation services for adults with mental health, and two services for people with additional needs (vulnerable adults).

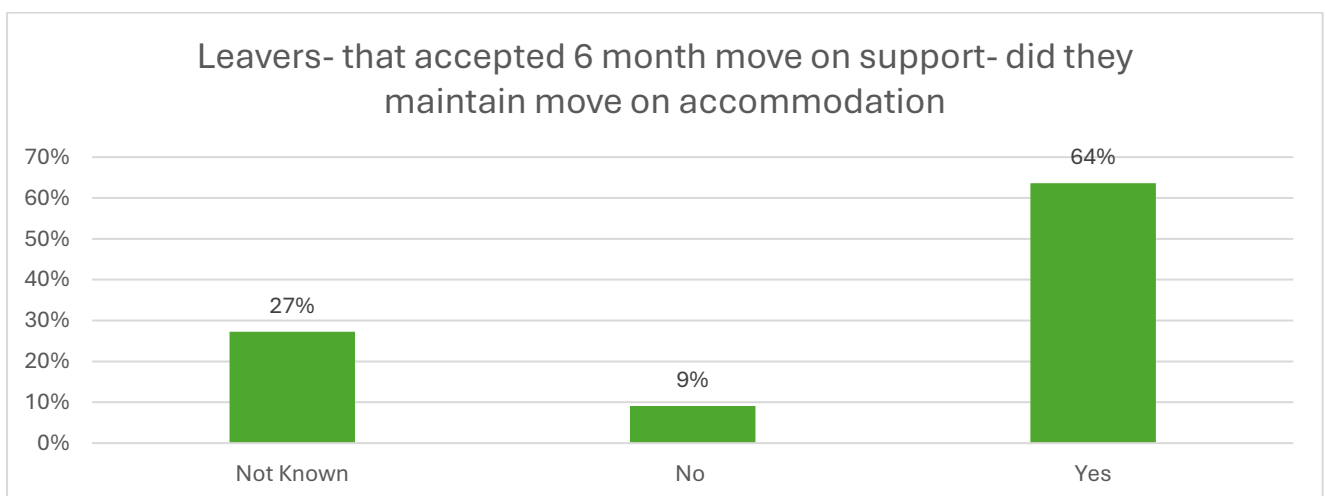
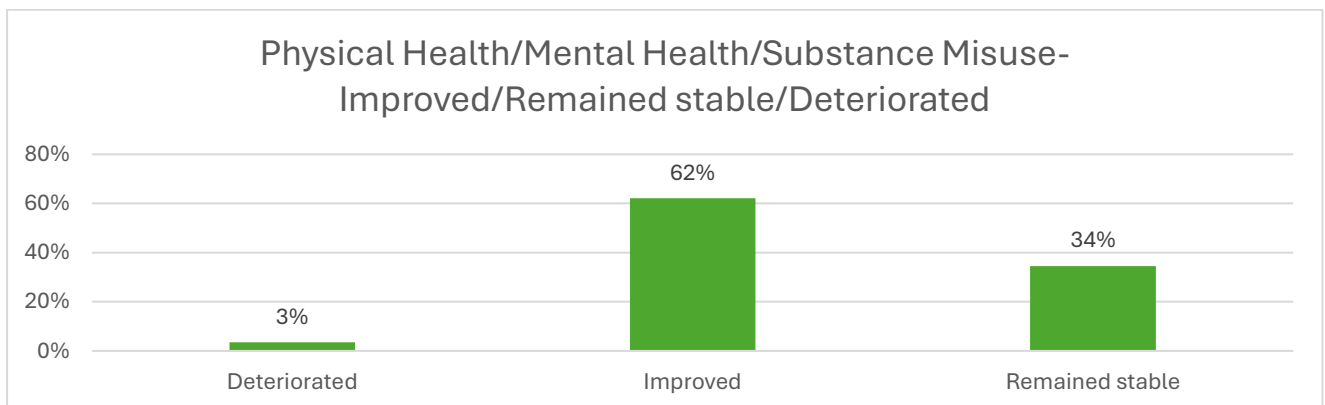
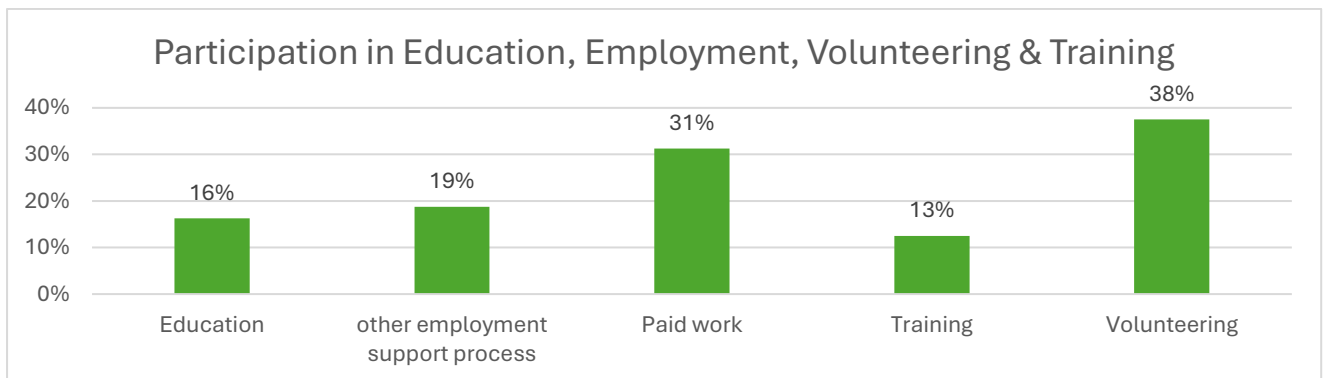
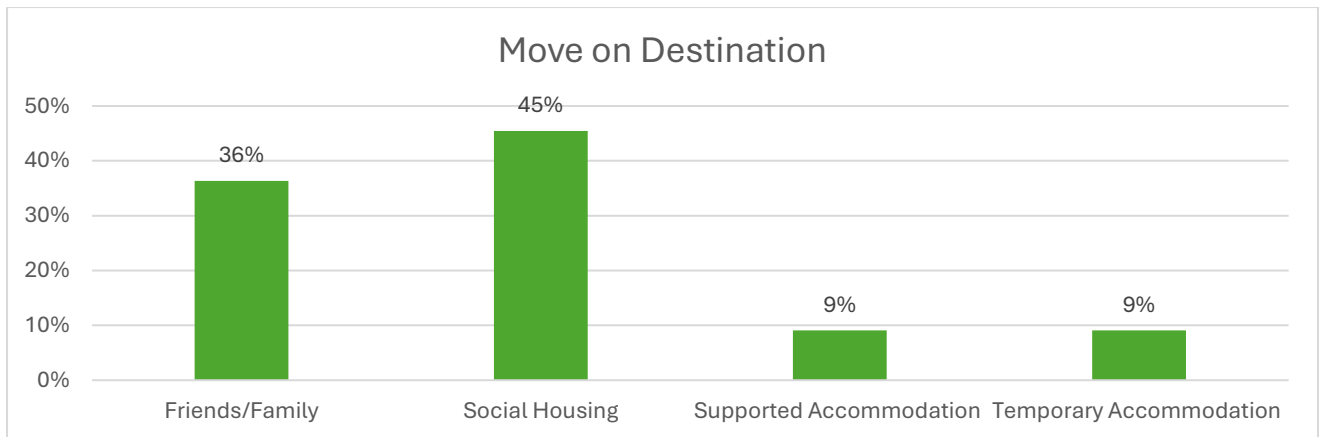
Tenancies

Service	Number of Assured Shorthold Tenancy agreements	Number of License agreements
Hyde Gardens	19	0
Pathways	0	14
Bal Edmunds	12	0
St Aubyn's	1	8
Priory Avenue	0	19
Totals	32	41

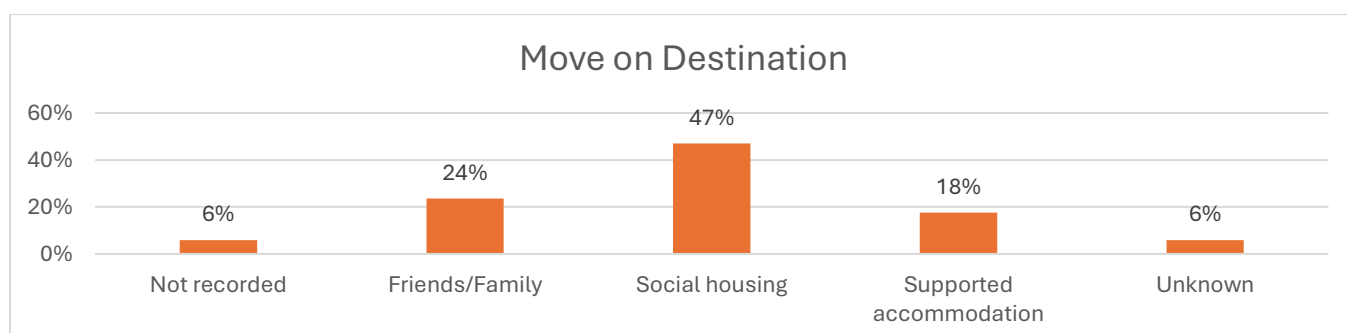
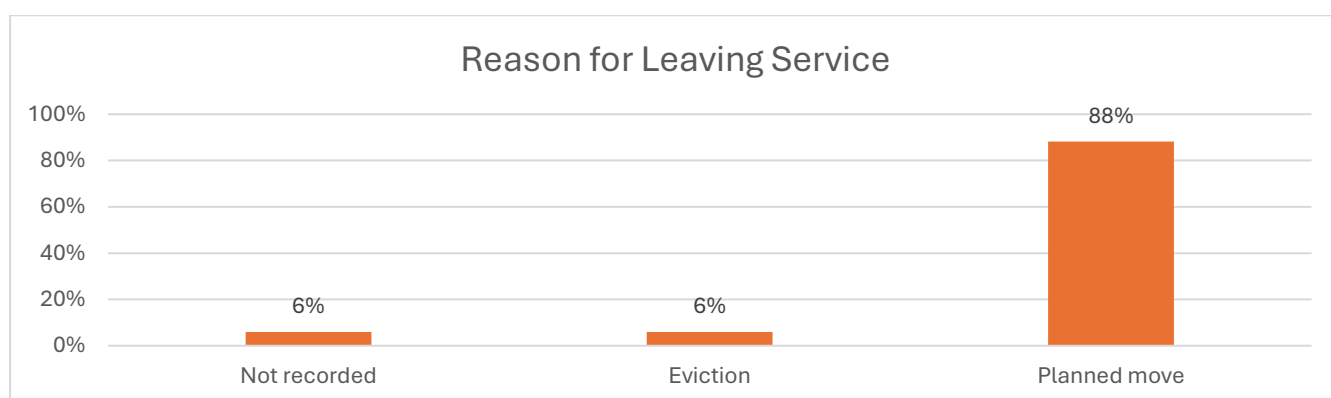
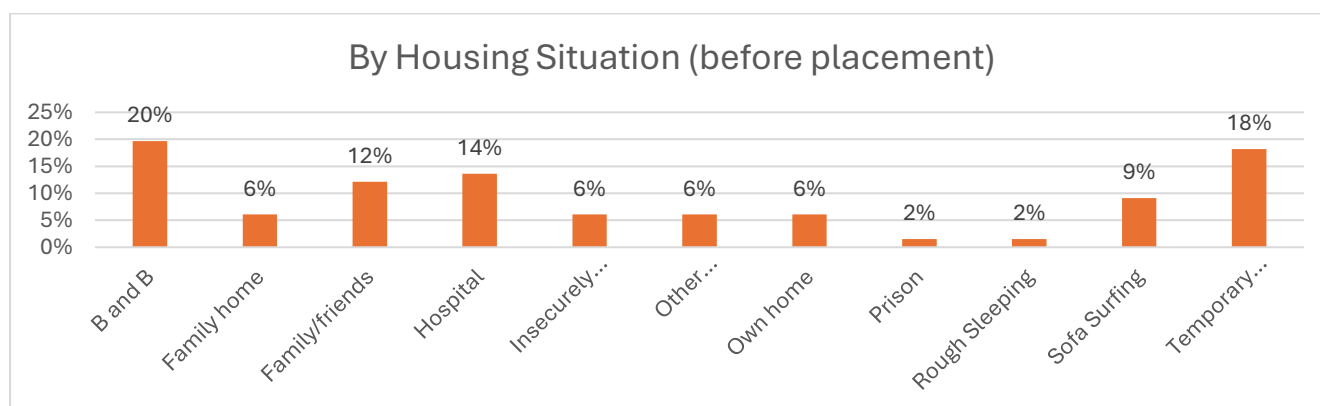
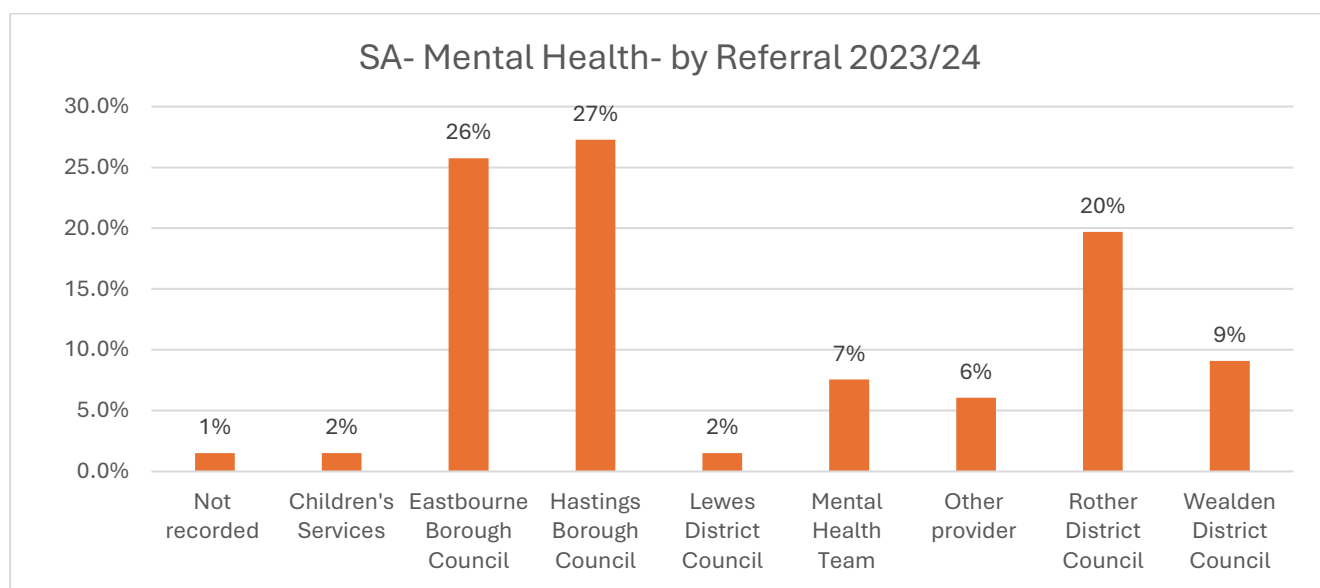
About the Services:

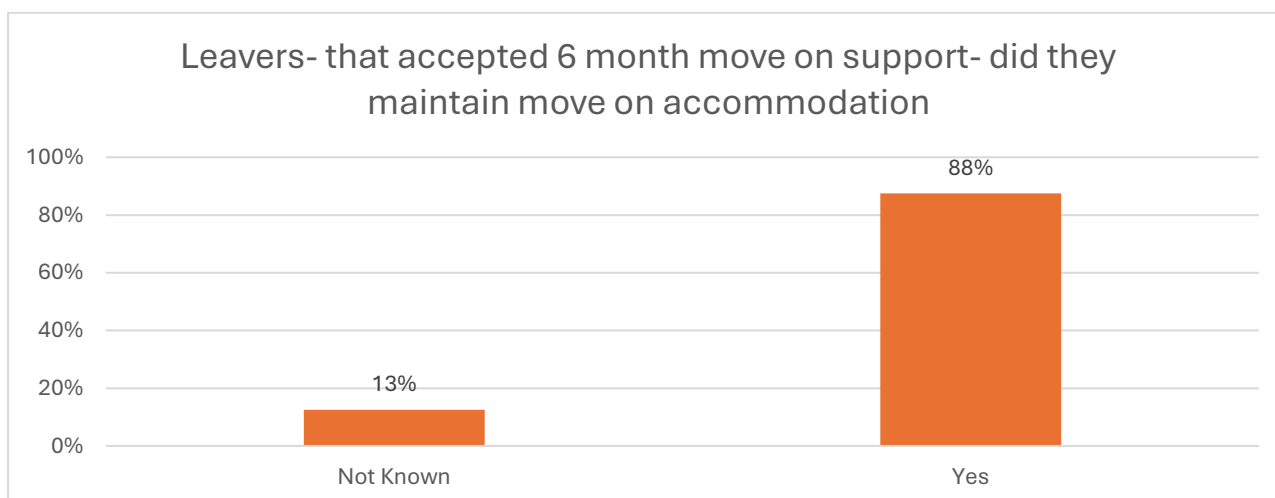
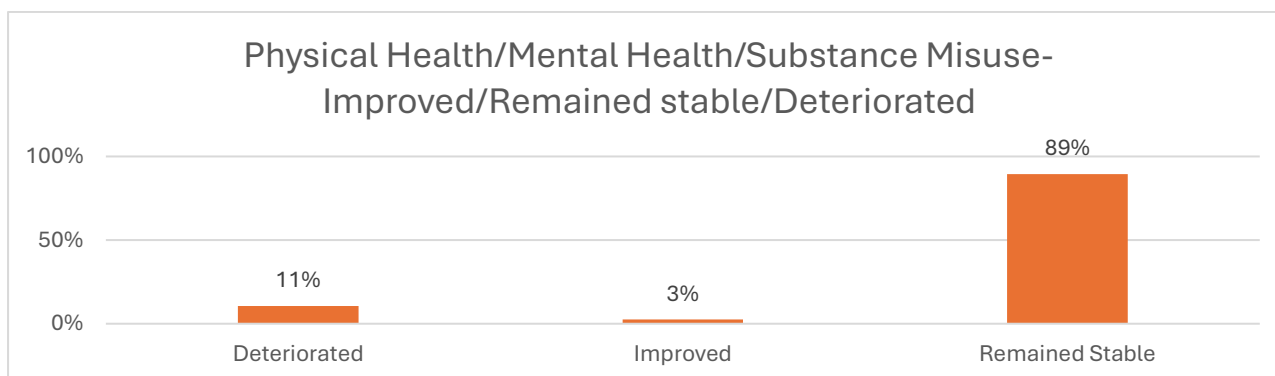
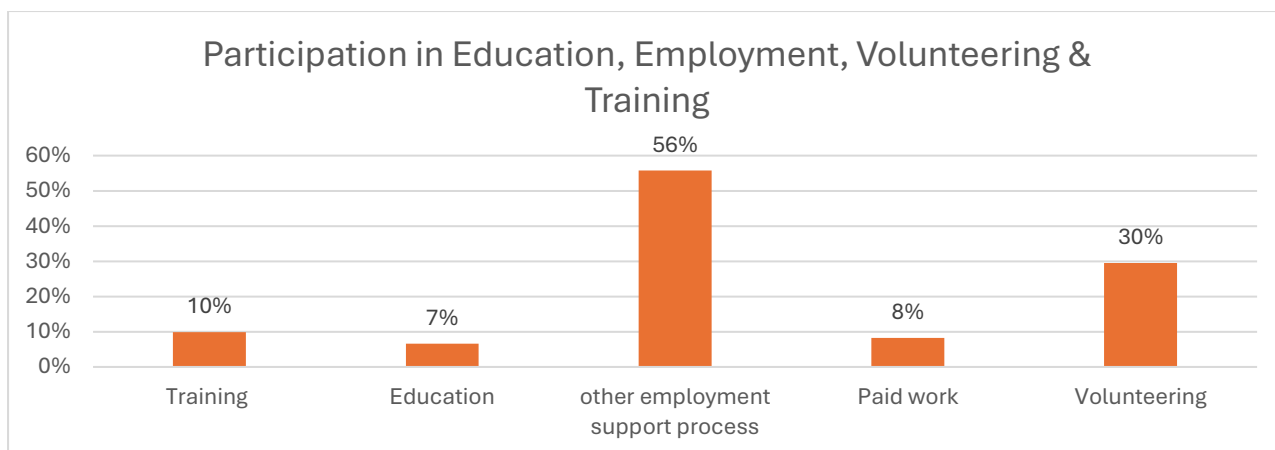
Vulnerable adults (Additional Needs)





Mental Health:





Case Studies:

Case Study: #1 – Additional Needs (Vulnerable Adults) supported accommodation service:

An East Sussex resident was released from a lengthy prison sentence with no housing options. They were released on a Life Licence into Additional Needs supported accommodation. During this time in the service they have engaged with the staff team, working in partnership with Probation Service, NHS, the District and Borough Council and the person's family, to facilitate transition back into society.

How supported housing made a difference

The person is engaging with and adhering to all of the expectations of probation and has begun to access support from their GP, and engage with Adult Social Care. They have been reestablishing their social networks, maximised their benefits and is now exploring volunteering options. They are now on the local housing register and actively bidding on properties.

"I don't know what I would've done without [the supported accommodation staff team], they have helped me so much. Without the staff I would've been set up to fail, I cannot thank them enough"

Case Study: #2 – Additional Needs (Vulnerable Adults) supported accommodation service:

Following a difficult and emotional relationship break up, a period of street homelessness, and subsequently exacerbating the impact on their mental health and wellbeing, this East Sussex resident was accepted into Additional Needs supported accommodation.

Upon arrival, their presentation was described as being "chaotic", and "in turmoil", and had "lost faith and hope" which led to them socially isolating and locking themselves away from everyday life. The staff feared that they might "explode at any moment" due to them feeling "on edge" and unable to cope.

How supported housing made a difference

It took some time to build trust but after 6 months they started to build a constructive relationship. They now feel better able to manage their anger and emotions, mental health and anxiety, has overcome some of their social anxiety, has more hope and self-worth, and is looking after his appearance and improving his activities of daily living skills.

"I came close on several occasions, due to a sense of everything being out of control, to doing something stupid, being locked up for years or worse; not being around, I was that low. At this service, they [the staff team] welcomed me. I was safe and secure, and it felt like someone cared".

Case Study: #1 – Mental Health supported accommodation service:

An East Sussex resident was referred to supported housing after two years rough sleeping in the area. On arrival at the scheme, they were socially isolated and struggling with severe depression coupled with paranoid thoughts and intrusive voices. Without access to either benefits or health services they were self-medicating with alcohol and experiencing frequent suicidal thoughts.

How supported housing made a difference

With help from their key worker and the wider staff team, they were able to consider both their immediate and his longer-term life goals, and to identify strategies for their achievement.

Supported by their key worker, an early step was to access the financial benefits to which they were entitled. With a regular income they were able to learn to budget, pay their bills, and eventually to open a savings account. Another important step was to register with a GP,

dentist and optician, and with support they were able to engage with much-needed help for their physical and mental health issues for the first time in many years; building a relationship with their GP and managing their own medication as prescribed. When intrusive voices and suicidal thoughts led to emergency hospitalisation, living within a supported housing scheme meant that they were able to avoid either a lengthy stay in hospital or discharge to the streets.

Thanks to the security of the supported housing environment, they felt able to access specialist group counselling for the first time in their life. Successfully reducing their alcohol use, they eventually became a much-valued volunteer peer leader, working regularly with a local charity supporting people who are experiencing homelessness.

After two years as part of the supported housing scheme, they moved on to independent living. They keep in touch with scheme staff and continues to do well.

Case Study: #2 – Mental Health supported accommodation service:

An East Sussex resident whose childhood was marked by experiences of extreme trauma. Much of their life to date has been spent in young offender institutions or prison. They had spent very little time living in the community. They had a history of alcohol and substance misuse, severe anger management issues and extreme self-harm.

How supported housing makes a difference

They came to the scheme reluctantly as they were opposed to the idea of support and had a firm belief that their mental health was fine. On their first day at the project they self-harmed and were extremely distressed. This pattern of behaviour continued sporadically over the following 12 months. Slowly, however, they developed a trusting relationship with staff members and by the end of two years was able to approach them independently for support when they needed it.

With help from their key worker and the wider staff team they were able to consider both their immediate and longer-term life goals, and to identify strategies to achieve these. An urgent goal for them was to reduce their self-harm. With support, they were able to engage with psychiatric services and specialist counselling with the result that they have come to accept their own need for support with mental health and was able to accept help, both from scheme staff and mental health services.

During the last six months they achieved an unprecedented level of stability in mental health and managed to avoid self-harming. It is likely that without the support they received they would not only have self-harmed more frequently, but it is also highly likely that they would have returned to offending behaviour and to further prison sentences. After 18 months living in a supported housing environment, they were ready to move on to independent accommodation and have maintained their new accommodation and still contacts staff from time to time.