

# **Brent Supporting People Five-Year Strategy 2009-2014**

***FINAL DRAFT***

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## **1.0 Introduction**

This Strategy provides an update on progress in delivery of the objectives of the 2005-10 Supporting People Strategy and emerging themes that will be taken forward in the Supporting People Strategy 2009-2014. This new strategy is a document that will guide the work of the Council's Supporting People Team over the next five years. It identifies what our priorities are and how we intend to address them.

We have made significant progress on meeting the long term vision of the 2005-10 Supporting People Strategy. One of our main aims was to develop more flexible support options. We have achieved this through rapid expansion of floating support for a range of client groups. Twenty five Supporting People providers now offer floating support, with over 1500 people in Brent receiving floating support at any time. We have also developed a single access route into and out of supported housing, START Plus, ensuring that people who need housing support and move on from supported accommodation can easily find it.

In partnerships with Housing Associations, 138 new units of Extra Care housing for older people have been developed and there are plans in place to develop additional units each year to reach our overall target of 650 units by 2014. A hospital discharge scheme and expanded handyperson service are also helping us to meet the needs of older people, the top priority identified in the 2005-10 strategy.

Refurbishment of supported housing properties has additionally delivered improved accommodation for people in shared housing and hostels, with further developments to be completed by 2010. We have contributed to the Community Safety agenda through developing services for offenders, people escaping violence and those who have drugs and alcohol issues.

This new Five Year Supporting People Strategy (2009-14) has responded to local people's needs by planning for the future of housing related support in Brent. It has done this by combining an assessment of needs and gaps and national and local and policy agendas with feedback from clients, local people, stakeholders in health, adult social services and family and children's services and provider organisations. The strategy will operate within the wider strategic priorities agreed by the Council and its partners.

The Housing and Community Care Department is responsible for the delivery of the Strategy on behalf of the Supporting People Commissioning Body, a partnership between the Council Probation and NHS Brent, and a range of internal and external partners and stakeholders and service users.

## **2.0 Executive Summary**

This Strategy sets out the Supporting People Programme' priorities for the next five years, taking into account the key achievements of the first Supporting People Five Year Strategy (2005-10) and the changing strategic context within which preventative housing related support services will need to be delivered over the next five years.

### **2.1 The Purpose and Aim of the 2009-2014 Strategy**

This document's purpose is to set out Brent Council's vision for the provision of housing related support services over the next five years and provides the framework for a detailed action plan for achieving this.

It reflects the national and local strategic and policy agendas, takes into account the 2001 census and research data (updated to 2007 projections), and the needs and views of service users, service providers and other key stakeholders and partners in the programme. The feedback has enabled us to identify gaps in either information system or service, and to develop a plan to fill them.

### **2.2 Challenges and Opportunities**

A number of challenges exist for the next stage in the development of the Supporting People programme nationally, and these will have an impact at a local level. The key issues addressed by this strategy are:

- The commissioning of housing support services that are fit-for-purpose and of high quality that meet the future needs of vulnerable people in Brent
- The introduction and implementation of Personalised services and self-directed support, and the role of Supporting People in this
- Responding to the impact of the current and future economic climate on services and achieving further efficiency savings within commissioned services
- Mainstreaming of the programme and its inclusion in the Area Based Grant from 2010/11
- Demonstrating the wider benefits of the programme and its contribution to the Council's preventative agendas

## **2.3 Key Priorities for 2009-2014**

The key priorities for the programme for the next five years are set out below. The accompanying action plans in Section 12 detail how we intend to deliver against these priorities.

### **Strategic Priority 1**

Ensure the delivery of high quality housing support services that support the preventative agendas of the Council and its partners and enable individuals to achieve and sustain independent living

### **Strategic Priority 2**

Increase move on from supported housing services, to support achievement of LAA target NI141 (percentage of clients who have moved on in a planned way) and to meet shortfalls in accommodation based services through more efficient use of housing resources

### **Strategic Priority 3**

Develop pathways through Supporting People services to increase independence, social inclusion and the achievement of positive outcomes

### **Strategic Priority 4**

Review the spread of floating support services across the borough and the fit between generic floating support and specialist floating support services

### **Strategic Priority 5**

Increase the available supply of self-contained accommodation for vulnerable people

### **Strategic Priority 6**

Facilitate continuous service user involvement in the delivery of high quality housing support services that enable vulnerable people to achieve positive outcomes

### **Strategic Priority 7**

Increase choice and control for service users through the implementation of Personalised services

### **Strategic Priority 8**

Deliver greater procurement efficiencies to ensure all purchased Supporting People services provide value for money and meets the Supporting People Programme's commissioning priorities.

### **Strategic Priority 9**

Work with partners across sectors to deliver outcome based commissioning and, monitoring of services

### **Strategic Priority 10**

Contribute to the delivery of the wider strategic agendas, targets and priorities of Health, Social Care, Housing and Criminal Justice partners

This Strategy and the accompanying action plan will be reviewed and updated each year.

Signatures

*Chief Executive, London Borough of Brent*

*Chief Executive, NHS Brent*

*Assistant Chief Officer, London Probation, Brent Area*

## **3.0 Vision and Objectives**

The vision for the Supporting People Programme in Brent agreed in 2005 (when the first Supporting People Strategy was developed), continues to guide the future direction of the programme from 2009-2014:

### **The Vision**

- To promote independence, enabling people to live safe and fulfilling lives in the community by delivering high quality, responsive and diverse housing related support services that meet the needs of vulnerable adults from across our community.
- To ensure that our services make the best use of the resources available, integrate well with related services and take into account the needs and views of all groups of vulnerable adults living in the borough.
- To strive for service excellence so services reflects the needs and aspirations of our local community and deliver real improvements to the quality of life in Brent.

The Supporting People programme aims to deliver this vision through:

- Offering preventative housing related support services that support the objectives of all key partners

- Develop better quality, more flexible services that respond more effectively to the needs of a highly diverse and rapidly changing community
- Prioritise services for the people who need and can benefit from them the most
- Provide preventative services delivering outcomes with real costs and quality of life benefits to the community, regardless of tenure
- Provide services that contribute towards making Brent a safer place to live
- Offer support services that aim to invest in our young people to secure their inclusion and achievement in our community
- Deliver innovation, new partnerships and more joint funding arrangements to improve effectiveness and value for money
- Respect the rights of and listen to the views of the users of services when planning, delivering, reviewing or procuring services; helping them to deliver real change
- Provide good quality information about services and how to access them
- Be at the centre of the work of the West London sub-region and London Region to deliver the vision for Supporting People in London and cross authority services
- Work with providers to develop skills and knowledge and provide high quality and innovative services

#### **4.0 Achievements from the Supporting People programme since 2005**

The Supporting People programme in Brent provides services at an annual cost of £12.8 million to over 3,500 service users with housing support needs. Services are provided across a range of client groups from single homeless people with support needs to teenage parents and people with drug and alcohol issues. It has done this within budget and within a climate of tight financial pressures. The programme budget has not increased since 2005/6, yet the programme has been able to deliver significant efficiency savings through successful negotiations in contract monitoring, service reviews and the on-going tendering and re-procurement of existing services and commissioning of new services.

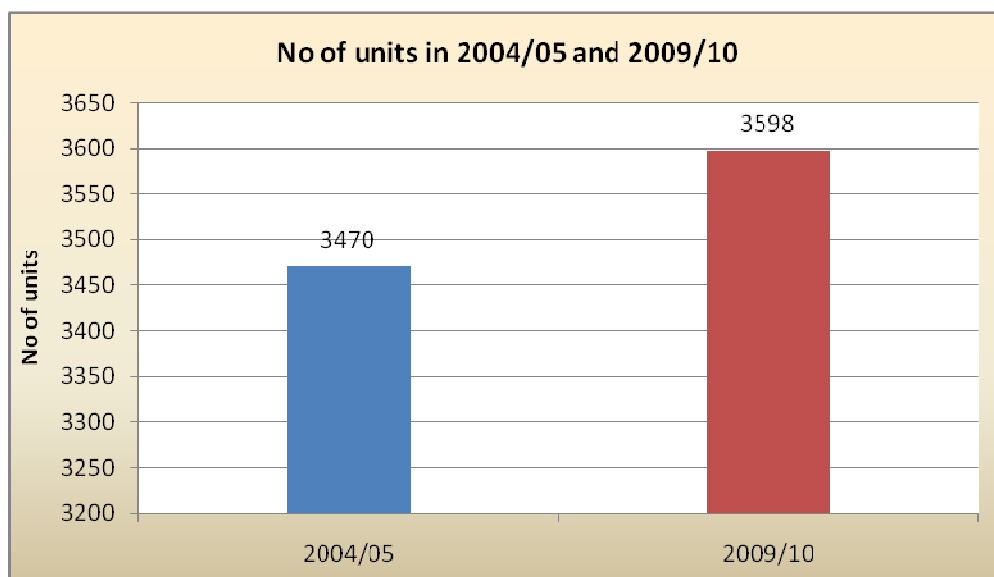
The programme has contributed significantly to meeting the strategic agendas of the Council and partners in Health and Probation:

- We have expanded the number of people receiving floating support to help them stay in their own homes from 1107 in 2005 to 1541 in April 2008
- At the end of 2006 we set up a new floating support service provided by Thames Reach Broadway for 50 people with mental health needs.
- We increased support for homeless families, so that 10 families attending Brent Homeless Families Centre could receive specialist housing support.
- We set up a new floating support scheme in partnership with the Drug and Alcohol Action Team to support up to 60 offenders.
- With partners in the London Probation service we remodelled our accommodation based offender services and provided extra funding to increase the levels of staff provided at offender hostels.
- Elders Voice has been funded to provide an accident prevention service and a handyperson service for older people, and Willow Housing provides hospital discharge workers to support older people and those with disabilities to return home after a period in hospital.
- We funded Innisfree Housing Association to pilot a housing support service for up to 15 vulnerable Irish people living in the private rented sector
- We set up a new service jointly with NHS Brent (Drug and Alcohol Action Team) and Paddington Churches Housing Association to provide a floating support scheme for 40 people at risk of homelessness because of drug misuse.
- In 2007 we started implementing our strategy for people with a learning disability by selecting preferred providers and expanding the range and quality of services offered
- Achieved a positive outcome from one of the earliest Supporting People inspections led by the Audit Commission in 2004, being scored as providing a good, two star service with excellent prospects for improvement
- In partnership with our West London partners we established a cross authority floating support service (led by our colleagues in Hammersmith and Fulham)
- We set up a single access point called START in November 2006 through which all floating support referrals were channeled. This developed into an expanded service in October 2008, START Plus which is now the single access point for all supported accommodation, floating support and move on
- Raised the profile of service user involvement, funding an initiative to train service users to become peer consultants. Co-ordinated by BHUG, this has enable a range of service users to become involved in strategic reviews, the tendering and procurement of services, to join the Core Strategy Group as full members and produce regular service user newsletters
- Led on ensuring the Accreditation of Supporting People providers for the West London Supporting People Partnership

## 5.0 The Supporting People programme in Brent

### Current Supply of Housing Support Services

The number of available Supporting People units increased from 3470 in 2004 to 3598 in 2009/10. The split of services is shown below.



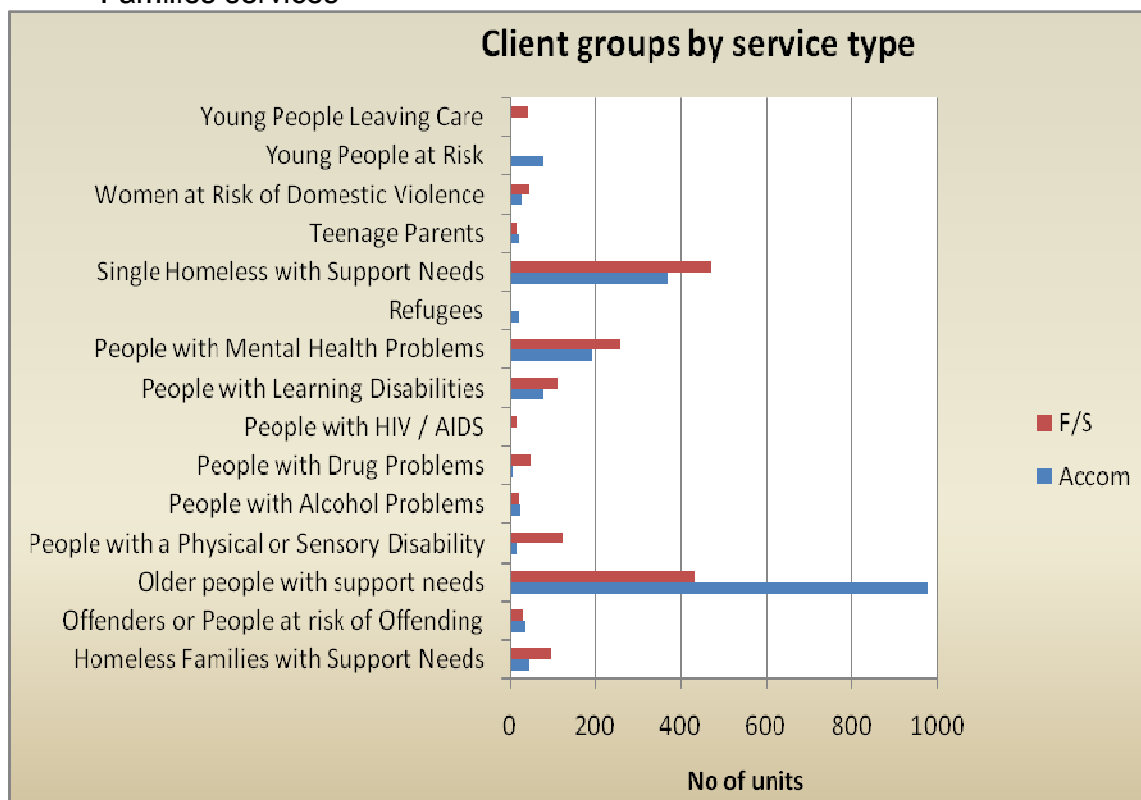
At August 2009, the number of Supporting People service users by type was as follows:

Client Group	Number of SP units	
	Accommodation	Floating Support
Homeless Families with Support Needs	48	98
Offenders or People at risk of Offending	35	30
Older people with support needs	978*	475
People with a Physical or Sensory Disability	14	123
People with Alcohol Problems	23	21
People with Drug Problems	6	50
People with HIV / AIDS	0	15
People with Learning Disabilities	79	110
People with Mental Health Problems	192	258
Refugees	19	0**
Single Homeless with Support Needs	370	468
Teenage Parents	22	15



Women at Risk of Domestic Violence	25	47
Young People at Risk/Leaving Care	79	43
<b>TOTAL</b>	<b>1890</b>	<b>1753</b>

- \* 138 of these being extra care units
- \*\* 15 floating support units for refugee families included with Homeless Families services

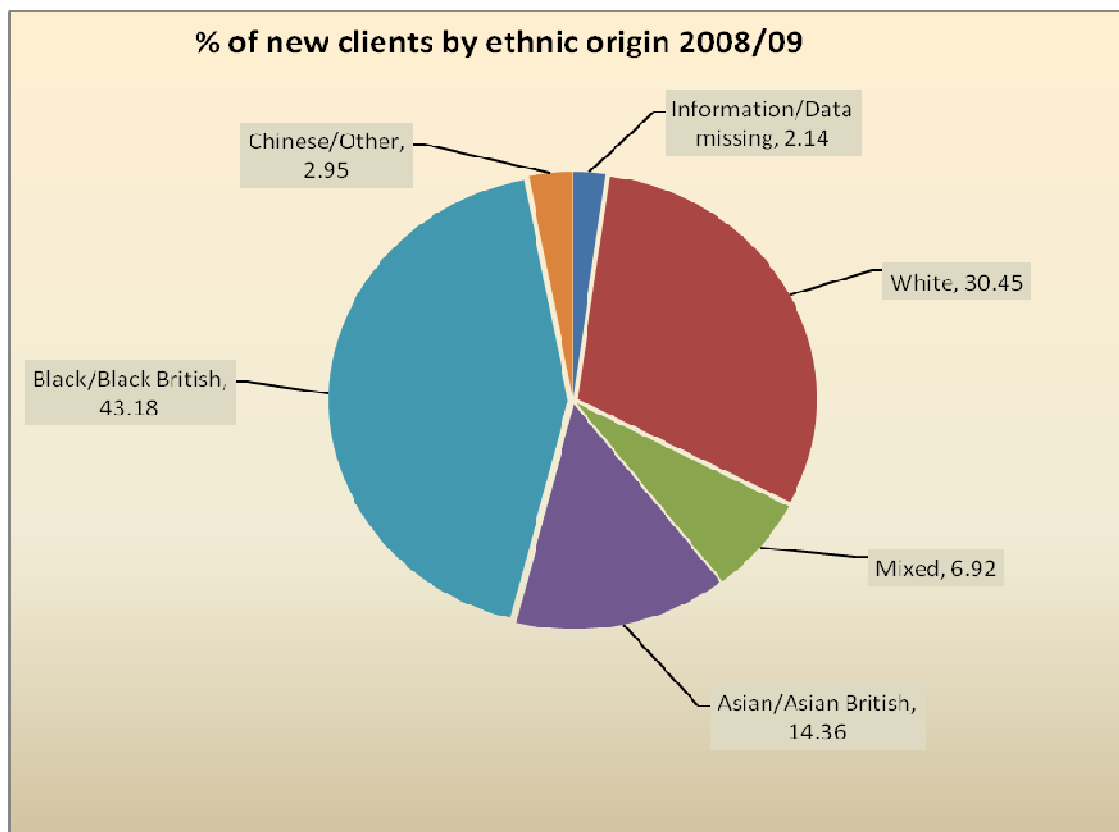


An estimated 3,643 people in Brent receive a Supporting People funded service at any time. Of these people 52% receive an accommodation-based service, and 48% (over 1700 people) receive floating support. Accommodation based services are housing-related support services that are tied to a specific accommodation provision. Floating support is not tied to any specific accommodation. Rather, it is attached to the person, and follows them if they move to another address. This flexible model of support remains in place as long as the person requires it (usually up to a period of two years but it is often shorter), and then it can move to another service user who requires it. Floating support can also provide intermittent support to individuals to assist them in dealing with short term crises and enable them to sustain their tenancies. This is an element of the preventative nature of the Supporting People programme.

### Supporting People service user profile

A total of 1029 new client record forms were collected from April 2007 - March 2008, meaning that at least this many new clients started receiving services in Brent over the year. This is a 50% increase on the previous years, mainly due to increased participation, but also due to an expansion in the number of services available as providers expanded services. More men than women started receiving services: 566 men compared to 457 women, reflecting that Brent still has several large male-only hostels with a high turnover. These hostels accommodate single homeless men, people with drug and alcohol problems and mental health clients.

The graph below shows the breakdown of clients by ethnic origin



The largest ethnic group of new clients is the black or black British group (43%) followed by the White group (30%) and then the Asian group (14%). The breakdown by ethnicity is compared with the census figures for Brent as shown in the table below. As in the preceding years, the people who are accessing Supporting People funded services in Brent are not accessing them in the same

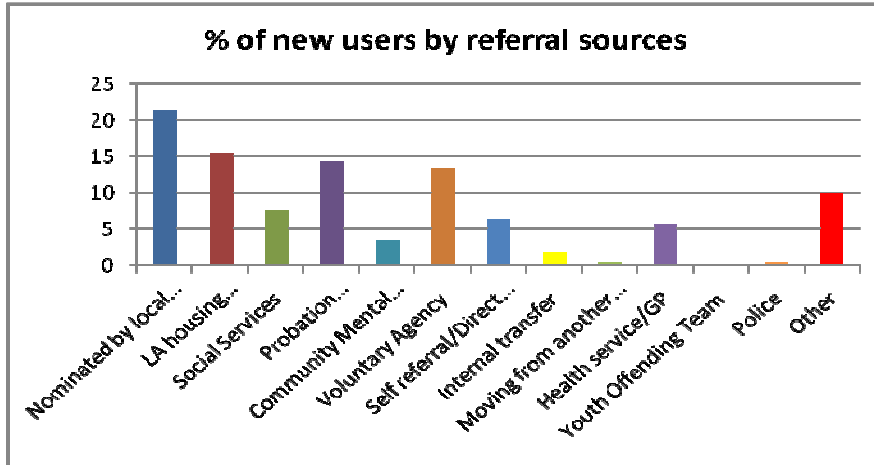
proportions. The black group continue to represent the highest percentage of new service users proportionally (over 40%) compared to their census representation of 20%, whilst fewer white and Asian people are accessing services than suggested by census representation. The table also below compares representation in Supporting People services with homelessness approaches, showing the same patterns of over-representation.

<b>New Service Users compared to total Brent Population 2007-8</b>					
<b>Ethnic Groups</b>	<b>Total Brent Population</b>	<b>%Total Population</b>	<b>New SP Service users in Brent</b>	<b>% of New SP service users</b>	<b>% Homelessness approaches</b>
<b>White</b>	119278	45%	354	34%	23.4%
<b>Asian or Asian British</b>	73062	28%	125	12%	15.4%
<b>Black or Black British</b>	52337	20%	420	41%	49.6%
<b>Mixed</b>	9802	4%	67	7%	11.2%
<b>Other</b>	8985	3%	18	2%	
<b>Unknown</b>			45	4%	
<b>Total</b>	263464	100%	1029	100%	100%

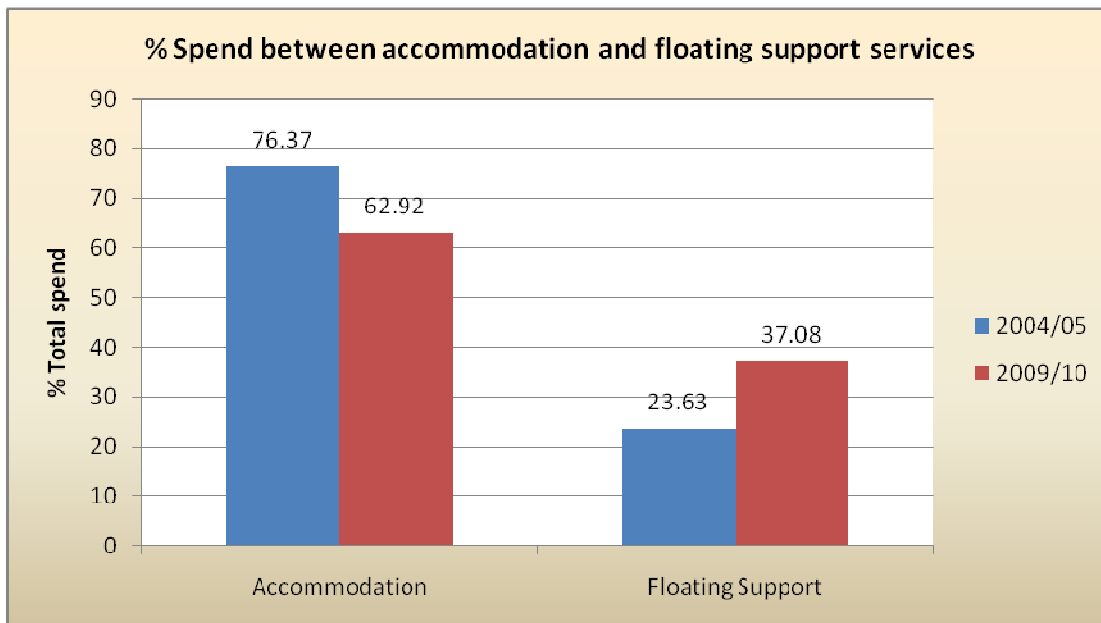
### **Referral Sources**

The main referral source is the local authority housing department (37%). This is followed by the National Probation Service (14.29%), voluntary agencies (13.41%), social services (7.48%), self-referral (6.41%) and health (5.64%). The other referral sources are community mental health, internal transfers, other Registered Social Landlords, Youth Offending Team and the police all of whom account for less than 6% of the total referral sources.

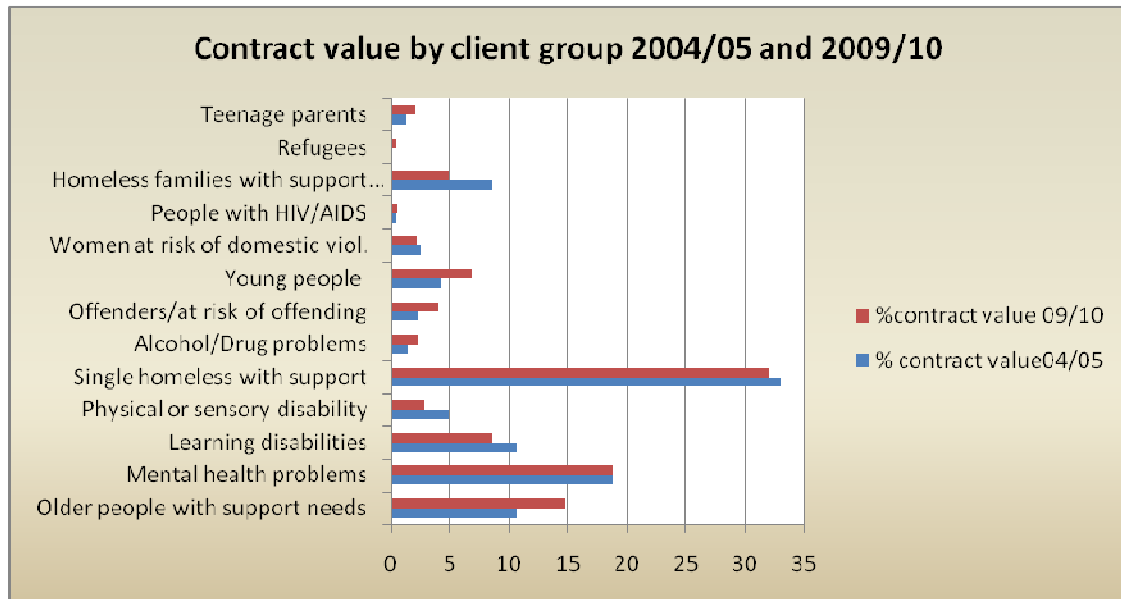
The chart below shows the full breakdown



## Spending

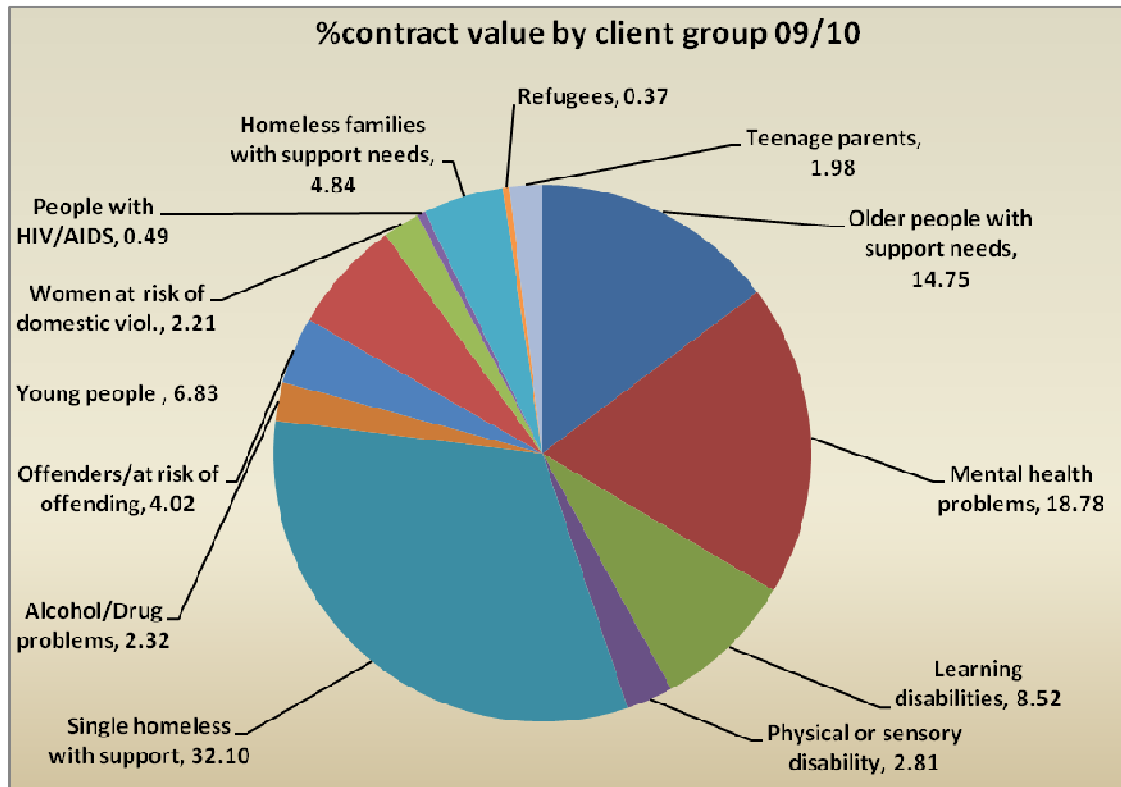


The figure compares the spend in the years 2004/5 and 2009/10. At the inception of the programme, the majority of services were accommodation based. However, over the years increased number of floating support services for various client groups have been developed. The graph reflects the historic inheritance of the disproportionate funds allocated in early days of Supporting People for accommodation based services. Over the years we have managed to bring most of the contracts in line with benchmark figures. Overall the numbers receiving Supporting People funded services have increased.



The graph above gives a breakdown of the contract spent for each client group, comparing what was spent in 2004/5 with 2009/10. This is the total budget including both floating support and accommodation based services. It is important to note that where the value has reduced, either the number of services or the number of support hours have increased. Some of the services have been tendered, for example the learning disability services, older people floating support services and handy person services.

The greatest variance is in the families service and this is due to renegotiating costs in line with benchmark figures for similar services. However, for single homeless, offenders and older people, costs have risen by approximately £1.4m but the number of clients in receipt of support at any given time has increased by 50%.



The three largest client groups on which the Supporting People grant has historically been spent are single homeless, mental health and older people. This has not changed since 2004/05 as we have not yet tendered for these services, with the exception of Older People's floating support services. However, over this period there has been a substantial remodelling of services to meet the changing needs of clients, 55% of the budget is spent on people considered to be socially excluded, for example people, single homeless, those with drug and alcohol problems and ex-offenders. Although the Supporting People budget has been reduced, we have still managed to maintain and expand services over this period through our focus on value for money and achieving efficiencies where possible.

### **START Plus – Single point of access to services**

The START Plus service commenced in October 2008 and is the access route to both supported accommodation and floating support and move on. Since its inception it has received 578 referrals for floating support and 546 referrals for supported accommodation. More referrals have been linked with a floating support service than an accommodation service, with longer waiting periods currently to access accommodation schemes. There is an identified need for providers to move on clients assessed as ready to move on to avoid silt up in services, and a continued drive required to make increased use of the private rented sector. These workstreams directly impact on the achievement of

National Indicator 141 which is one of the borough's LAA targets. Improving access to move on accommodation and use of the private rented sector is a key strategic priority for the programme over the next five years and work will continue with service providers to achieve this.

### **Service User involvement in Governance and Policy**

We have improved service user involvement in the Supporting People programme and have co-ordinated delivery of a series of training programmes and events to increase involvement. This has included participation in procurement and tendering, consultation on the strategic review programme and on the refreshed Supporting People strategy. A number of service users have completed an accredited training course with BHUG to become Peer Consultants, and will be invaluable in contributing to the future shape and delivery of the programme.

Service user involvement in the governance arrangements of the programme has also been strengthened, and we now have service user representatives included on the Core Strategy Group with voting rights. This will further enhance the ability of the programme to ensure that services meet service user needs and that the views of service users inform delivery and development.

## **6.0 National and Local Context for the Strategy**

### **6.1 National Strategies**

A number of national strategies set the context for future delivery of the Supporting People programme and its implementation at a local level. These include:

#### **Supporting People Strategy 2007 – Independence and Opportunity**

The strategy is based on four key themes:

- Keeping people that need services at the heart of the programme and of local delivery of the services;
- Building on partnerships with the Third Sector;
- Delivering in the new local government landscape, and;
- Increasing efficiency and reducing bureaucracy

At the outset, the strategy retains a focus on the role of housing in increasing opportunity and improving the quality of life. Service user choice, particularly through the use of Individual Budgets continues as a theme and there is a suggestion that many benefits could be gained from these, both for service users and commissioners.

There is a clear recognition of the importance of the role of the Third Sector, both in developing and delivering Supporting People services over many years. The importance of key links with the wider Sustainable Communities Strategies is highlighted, and additionally the need to co-ordinate Supporting People at a local level with the wider regional housing agendas.

### **Social Exclusion agenda and Regeneration Strategy**

The *Reducing re-offending by ex-prisoners* report by the Social Exclusion Unit (2002) identified that people who have been in prison account for one in five of all crimes committed. Nearly three in five prisoners are re-convicted within two years of leaving prison. Offending by ex-prisoners costs society approximately £11 billion a year. Up to a third of prisoners lose their home when in custody, and two-thirds are homeless on release.<sup>1</sup> Research suggests that stable accommodation can make a difference of over 20 per cent in terms of a reduction in reconviction. Approximately one in every twenty prisoners claimed to be sleeping rough prior to imprisonment.<sup>2</sup>

The Social Exclusion Unit's 2002 report *Reducing Re-offending by ex-prisoners* set out the seven 'pathways' to reducing re-offending: accommodation; skills and employment; health inequalities; drugs and alcohol; children and families of offenders; finance, benefit and debt; and attitudes, thinking and behaviour. This work provided the framework for the Government's Reducing Re-offending Delivery Plans in 2004 and 2005<sup>3</sup>. The Five Year Strategy for Protecting the Public and Reducing Re-Offending details how work on the seven pathways is taken forward.

### **The National Commissioning and Partnership Framework 2008-09: NOMS**

The Make Communities Safer Public Service Agreement, published as part of the Comprehensive Spending Review 2007, set out the need for a cross-Government approach to reducing re-offending and protecting the public.<sup>4</sup> This emphasises the need to develop local partnerships to deliver national priorities. Good quality, settled accommodation provides security and stability to offenders, and there is need for relevant housing, homelessness and housing support data is available to inform commissioning decisions.

Supporting People services contribute to the Community Safety agenda in a number of ways, including the public protection agenda, reducing substance misuse and alcohol misuse and tackling anti-social behaviour.

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<sup>1</sup> Home Office, OASys pilot study, 2001 (unpublished)

<sup>2</sup> Home Office, Resettlement survey 2001 (forthcoming publication)

<sup>3</sup> Social Exclusion Unit Report, Reducing Re-offending by ex-prisoners, 2002

<sup>4</sup> National Commissioning and Partnership Framework 2008-09: National Offender Management Service, February 2008



## **Transformation Programme – Adult Social Care**

The introduction and implementation of Personalised services is a key central government agenda to improve choice and control for service users in the type and range of services they are able to receive.

The ‘Transformation Agenda’ of which Personalisation is one component represents a significant shift in central government policy concerning the provision of health, housing and social care from a statutory service led approach to a service user led framework. There is a key emphasis here on increasing choice and ownership for service users in all elements of their care and support from deciding what services they want to purchase, to receipt of services. The role of Supporting People services in this agenda is evolving nationally and locally and will influence the future commissioning of services for a number of client groups. Supporting People has a role to play in ensuring services are “joined up” and that vulnerable individuals can access housing related support, as well as care, if they need it.

### **Health**

The Department of Health vision for commissioning of health care services, World Class Commissioning, is about delivering better health and well-being for the population, and improving health outcomes and reducing health inequalities. It is a statement of intent designed to raise ambitions for a new form of commissioning that has not yet been developed or implemented. Taking this approach, commissioners are expected to demonstrate better outcomes; adding ‘life to years and years to life’.<sup>5</sup>

### **Shaping the Future of Care Together**

The Green Paper *Shaping the Future of Care Together* sets out proposals to reform the care and support system for adults in England so that the system becomes fair, simple, high quality and affordable. Following consultation the intention is to produce a White Paper in 2010. The Green Paper introduces the concept of a new National Care Service and identifies six elements that would define this:

1. prevention services
2. national assessment
3. joined up service
4. information and advice
5. personalised care and support
6. fair funding.

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<sup>5</sup> World Class Commissioning: Vision, Department of Health, December 2007

The key driver for the proposals is the anticipated growing demand on services with 1.7 million more adults predicted to need care and support by 2026 – the number of people aged over 85 will also have doubled and the number of people over 100 quadrupled. The ratio of people in work to pensioners will also decrease and this creates an imperative for reform of the care and support system.

The government is suggesting a vision of a fair, universal, simple, and sustainable system which empowers people to live their lives how they want to. To achieve this, health, housing, social care and the benefits system need to work in a way that is joined up and reduces costs. This does not necessarily involve structural change but improved joint working.

A key aspect of the six elements in a 'National Care Service' is Prevention. The Green Paper defines these as '*services to help people stay independent and well for as long as possible and to stop care and support needs getting worse*'. Supporting People services have a key role to play in delivering these services in conjunction with other funding streams.

## **Drugs and Alcohol**

The Alcohol Harm Reduction Strategy for England was published in 2004. The strategy was reviewed in 2007 and *Safe, Sensible, Social – Next Steps for the Alcohol Strategy* incorporates the review of the strategy and sets out the next steps. The Department of Health local implementation toolkit sets out the framework for the delivery and review of local alcohol strategies.

Key actions in the Alcohol Strategy include:

- Sharpen criminal justice for drunken behaviour
- A review of NHS alcohol spending
- More help for people who want to drink less
- Toughened enforcement of underage sales
- Trusted guidance for parents and young people
- Public information campaigns to promote a new sensible drinking culture
- Public consultation on alcohol pricing and promotion
- Compulsory local alcohol strategies

The National Drug Strategy launched last year *Protecting Families and Communities* (2008), with a guide for local partnerships set out in the London Drug Policy Forum and building on the strategy *Tackling Drugs, Changing Lives: 2008-2018*. Key actions in the Drug Strategy include:

- Protecting communities through robust enforcement to tackle drug supply, drug-related crime and anti-social behaviour
- Preventing harm to children, young people and families affected by drug misuse

- Delivering new approaches to drug treatment and social re-integration
- Public information campaigns, communication and community engagement
- Details of all the above are to be delivered during the next ten years starting from 2008

### **Valuing People Now – People with Learning Disabilities**

'Valuing People Now ' (2009) sets out how the Government will deliver services that meet the human rights of people with learning disabilities and emphasises social inclusion, personalised services, choice and control and maximising the opportunities to live independently and have a range of housing options to choose from, to have a job, and a family life.

### **Children and Young People**

Every Child Matters (2005) indicates the national and local priorities for young people's services which includes five outcomes given legal force by the Children Act 2004. They define and challenge local authorities and partner agencies to meet a set of universal aspiration for all children and young people and must be integral to any provision:

- Being Healthy
- Staying Safe
- Enjoy and Achieve
- Make a Positive Contribution
- Achieve Economic Well-being

## **7.0 Local Strategies and Plans**

The Supporting People programme in Brent operates within the context of the Council's wider strategic priorities and those of partners in Health and Probation. The following sections summarise the key local drivers that Supporting People is concerned with.

### **The Community Strategy**

This Community Strategy 2006-2010, produced by Brent's Local Strategic Partnership, *Partners for Brent*, sets out how the council and its partners will meet the needs and aspirations of Brent's residents. The Community Strategy sets out the shared vision for the Borough:

"Brent will be a prosperous and lively borough, full of opportunity and welcoming to all. A place that will thrive for generations to come whose future will be determined by local people."

Three values underpin the Strategy:

- delivering efficient, accessible and sustainable services to excellent standards;
- developing tailored solutions to meet the needs of individuals, families and communities; and
- celebrating our Borough's diversity and building upon our national reputation for nurturing successful community cohesion.

Supporting People services contribute to the following key commitments within the strategy:

- reduce the fear of crime and the impact of violent crime and robberies;
- reducing the gap in life expectancy across the Borough and promoting wellbeing.
- creating settled homes for the large number of families with children based in temporary accommodation; and
- supporting those children and young people whom experience the greatest barriers to learning, live transient lives, within priority neighbourhoods, low-income households and/or whom have additional or acute needs.

### **Corporate Strategy**

The Corporate Strategy and the Community Strategy set out the vision and priorities for the Council and its partners. This strategy aims to support the delivery and achievement of these priorities and complementary strategies and agendas. The Corporate Strategy has five crosscutting themes. The areas of concerns for local people are:

- Supporting children and young people
- Promoting quality of life and the green agenda
- Regeneration and priority neighbourhoods
- Tackling crime and community safety
- Achieving service excellence

The Corporate Strategy vision is for Brent to be:

- A great place: with a focus on reducing crime, disorder and drug misuse, improving cleanliness and environmental stability and giving local people a greater say in shaping the services that affect their lives
- A borough of opportunity: with a focus on increasing choice, improving health and prosperity;
- One community: a focus on physical regeneration, improvement to housing and improving chances for young people, providing care and support to the vulnerable and supporting independent living

The Strategic Review programme has demonstrated how current Supporting People services contribute to the wider government preventative agendas. There is also clear evidence of how services actively contribute to the vision set out in the Corporate Plan. The range of constructive interventions that the programme has commissioned has contributed to reducing homelessness, reducing reoffending and reducing hospital admissions. Particular examples relate to how services tackle multiple and complex needs such as substance misuse, mental health and address literacy and worklessness. The Supporting People programme will continue to focus on preventative housing related support services that support the vision for Brent.

### **Housing Strategy 2009-2014**

The updated Housing Strategy 2009-2014 sets out how the delivery of housing and housing related services will be actioned, while maintaining a focus on the role of housing services in delivering the wider vision of the Corporate and Community strategies.

The Strategy sets out the following priorities for the next five years:

- To work with partners to deliver new supply targets particularly on larger homes and housing with support for vulnerable people
- Ensure an appropriate mix of tenures
- Ensure social regeneration objectives including employment and the creation of sustainable neighbourhoods are prioritised
- Tackle homelessness by ensuring the best of use of existing stock to meet the target of reducing the use of temporary accommodation by 50%
- Maintain an emphasis on preventative services and provide a range of housing options
- Continue a programme of funding, advice and support to private landlords and encourage their continued participation in the mix of housing options available

Specific targets related to Supporting People priorities include:

- Developing new schemes to support increased move on
- Developing schemes to improve warmth and energy efficiency, particularly for older households
- Reducing the use of residential care through the provision of more appropriate housing solutions, such as extra care and other assisted living schemes.
- Expanding the provision of floating support services that can assist people to sustain their tenancies, particularly to those in the private rented sector and will also contribute to the range of housing options available to people in Brent.

## **Homelessness Review, Strategy and Action Plan, 2008-2013**

Brent's latest Homelessness Strategy was published in July 2008 and is an accompanying document to the Housing Strategy.

The strategic objectives identified for 2008-13 are:

- Prevention of homelessness
- Increasing supply of housing and widening housing options
- Supporting the vulnerable
- Keeping rough sleeping as near to zero as possible
- Limiting the use of hotel accommodation and reducing the use of temporary accommodation
- Improving customer service and accessibility
- Improving and developing partnership working and protocols

Supporting People services play a key role in preventing homelessness by providing referral, assessment and placements through START Plus, and enhancing the housing options available locally through the provision of floating support and supported housing services.

### **Local Area Agreement and Local Strategic Partnership**

Brent's Local Strategic Partnership, Partners for Brent, oversees the delivery of the Local Area Agreement in the borough. Supporting People contributes to a number of the priority targets within the LAA for 2008-2011. A specific LAA target, National Indicator 141 relating to move on, has been adopted by the borough. This seeks to increase the percentage of vulnerable people achieving independent living on an annual basis and has a year on year stretch target attached to it. The operation of the START Plus service will be key to driving this particular target, as there is an on-going emphasis on tackling 'silt up' in supported accommodation and increasing move on to independent accommodation, including the private rented sector.

Other LA targets that Supporting People contributes to are:

- NI 40- Number of Drug users in effective treatment
- NI 130 - Number of social care clients receiving self-directed support
- NI142 – number of vulnerable people who are supported to maintain independent living
- NI150 – Adults in contact with secondary mental health services in settled accommodation
- NI156 - Number of households living in temporary accommodation

## **Diversity**

The Single Equality Scheme sets out Brent's commitment to make equality and fairness part of every service we provide to the community. Equality is on the Council's core values and is an integral part of everyday business. The Council will continue to monitor its performance through the systematic monitoring of departmental equality action plans across each service area.

All Supporting People service providers are annually assessed on how they meet Fair Access, Diversity and Inclusion criteria through the Quality Assessment Framework (QAF) exercise. Equal access to services is also a key Performance Indicator for the programme. The revised QAF implemented in 2009 increases the requirements on providers for levels of quality attained in services, thereby demonstrating continuous improvement.

## **Community Safety/Criminal Justice**

Home Office data from 2003/2004 on the economic costs of crime in London boroughs indicates that in Brent the total estimated cost of crime committed by individuals with previous offences was £41,014,337. This includes cost as a consequence of crime such as physical and emotional impact on victims, health service costs and the costs associated with the criminal justice system such as police, correctional service and courts<sup>6</sup>.

Prison receptions as a proportion of the resident population for Brent indicate that there were 973 prison receptions in 2007-8, which equates to 0.53% of prison receptions as a proportion of the working age population in the borough<sup>7</sup>.

The Supporting People programme has maintained a strong partnership with the Probation Service, and has provided tailored housing support to individuals released from prison and returning home to Brent. Housing support services funded by Supporting People have been remodelled to meet the changing needs of ex-offenders. The provision of this support has contributed to their successful resettlement in the community.

## **Personalised Services – Adult Social Care**

Personalisation is based on the principal that the individual is best placed to know what they need and how their needs can be met. People can make their own decision but should have the support and information they need to enable them to do this. The aims of the Adult Social Care Transformation Programme in Brent are to:

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<sup>6</sup> MoJ/CLG toolkit: <http://www.lg-em.gov.uk/pp/gold/viewGold.asp?IDType=Page&ID=15741>)

<sup>7</sup> London Resettlement Forum data, October 2008



- To transform the lives of people who need our support so that they enjoy maximum control over their own destinies and achieve best outcomes in their everyday lives.
- For those who need personal Support, to transform social care in Brent into a system of Self Directed Support.
- To help people achieve wellbeing by reducing barriers which prevent people from accessing mainstream services, including transport, housing, leisure, work and financial services

Some key targets for the Adult Social Care transformation programme are:

- To ensure we have 50% less people in Residential Care by 2010
- To ensure we have 50% of our service users on Self Directed Support by 2010
- To use the Care Management role to support people in achieving independence and control over their lives
- To facilitate a significant increase in Direct Payments across all service user groups
- To introduce a transparent system to tell individuals their budget for support costs through a Resource Allocation System (RAS)
- To commission fewer block contracts and create a significant increase in the use of Extra Care Sheltered Housing and other alternatives to residential care

In 2009/10 the Council is piloting Self Directed Support in the following service areas:

- Learning Disabilities – young people in transition services, day centres, all new clients and reviews
- Mental Health – Assertive Outreach and east Sector Community Mental Health Team (for new clients and reviews)
- Older People – A sample of reviews and new referrals
- Physical Disabilities – A sample of reviews and new referrals including Complex cases, and people from the New Millennium Day Centre

In terms of Brent's performance, the number of people receiving Self Directed Support (direct payments and individual budgets) at the end of April 2009 was 449 against a target of 946 for the year 2009/10. This demonstrates good performance in terms of direction of travel, and needs to be build upon incrementally to achieve the target of having 50% of all people on Self-Directed Support by 2010/11.

The role of Supporting People in the delivery of the Transformation Programme is evolving and will become increasingly important during the life of this strategy. In 2009 the key areas of work are in the development of extra care sheltered housing, the provision of hospital discharge services and providing alternatives to



residential care so that the target of reducing the numbers in these services by 50% by 2010 can be achieved. Supporting People will also encourage SP providers to pilot self-directed support and personal budgets where appropriate in SP services.

### **Joint Commissioning Strategy for Mental Health**

The Joint Commissioning Strategy (2007-2012) sets out the future vision of mental health services in Brent and underpins integration of health, social care and housing provision based on national and local priorities. The strategy aims to provide needs led services to adults in the best way possible ensuring equality of access and being sensitive to disabilities, ethnicities, sexuality, age and gender issues.

The Supporting People strategic review of mental health services identified a need for a range of different services to particularly meet medium to higher levels of housing support, and to develop more self-contained accommodation. Development of a pathway through mental health services will ensure that service users can access appropriate housing support services when required, but can work towards achieving increased independence and education, training and employment.

### **Mental Health Accommodation Strategy**

The Mental Health Accommodation Strategy was produced in 2008, in consultation with service users, and our partners in Adult Social Services and the Mental Health Trust and is a key driver for the future development of mental health services.

#### **Gaps identified**

- A lack of self contained supported accommodation
- A lack of shared accommodation where people have access to a private bathroom.
- Difficulties accessing independent accommodation
- A lack of provision for people with multiple needs including people with dual diagnoses of mental health and drug and alcohol problems
- There is no supported accommodation for people with a history of offending and mental health needs in the borough
- The large number of people being placed outside the borough or in residential homes suggests that there is a lack of accommodation offering high support in Brent
- Lack of culturally specific services
- Lack of gender specific services
- Lack of services that meet the need of people who are Lesbian, Gay,

Bisexual or Transgender

- Insufficient focus on supporting people to access work, training and volunteering
- Inadequate access and take up of Self Directed Support

## **Recommendations**

The Supporting People tender for specialist mental health accommodation and support in Brent is designed to address the gaps identified above. The Strategy also recommended:

- There should be service user involvement in all areas of services, especially involvement in letting of shared accommodation.
- A programme of refurbishment should be planned to bring all supported housing up to decent homes standard and to minimise sharing of facilities.
- Additional self-contained accommodation for people with high support needs should be developed.

Supporting People funded mental health services ensure access to independent housing in both the public and private sectors and appropriate support for people with mental health problems to live independently in their homes.

## **Health**

Identifying health needs and interventions locally has been undertaken through work on the Joint Strategic Needs Assessment, Health and Well-being strategy and the Primary and Community Care Strategy.

The picture of local health need in Brent identifies the following key issues:

- An increasingly deprived population
- A relatively young population
- A highly mobile population
- 55% of residents from black and minority ethnic communities
- Circulatory disease and cancer are the largest causes of death

NHS Brent has developed a Commissioning Strategy Plan (CSP) to cover the period 2008 – 2013. The CSP sets out the vision, goals and initiatives for improving health outcomes and reducing health inequalities over the next five years.

The five local goals to be delivered are:

1. Safe and High Quality Services
2. An increase in life expectancy
3. Reduce health inequalities
4. Promote good health and prevent ill health/maintain good health
5. Improve patient satisfaction

Some examples of joint work with NHS Brent and Supporting People include joint commissioning for service users and carers involvement, floating support for substance misuse, START Plus and the Drug Intervention Programme, mental health and homelessness. Further examples of close partnership working are through Supporting People's close involvement in the Substance Misuse Joint Commissioning Group and DAAT representation at the Commissioning Body. One of the key priorities in NHS Commissioning Plan is mental health services, of which Supporting People funds approximately £2.3 million each year. The provision of preventative housing related support services to people with mental health issues contributes significantly to the well-being and maintenance of good health of people with mental health issues, substance misuse issues, and those with physical disabilities, learning disabilities, and frailty associated with ageing.

## **Drugs and Alcohol**

Brent Drug and Alcohol Action Team (DAAT) is the strategic partnership responsible for the local implementation of the National Drugs Strategy. There are three key areas of responsibility that complement the wider crime and disorder and community safety agendas.<sup>8</sup>

1. Harm reduction – reducing the harm people do themselves, their families and the community through their use of illegal drugs and alcohol
2. Demand reduction – reducing the level of demand for illegal drugs
3. Supply reduction – reducing the availability of illegal drugs

Drug treatment services in the borough are funded primarily to work with Class A drug users – heroin, cocaine and crack cocaine.

In 2005/06 there were 933 residents of Brent in treatment for drug use, an increase of 11% from 2004/05.<sup>9</sup> Brent has consistently exceeded its targets for getting people into treatment in each year when the Crime and Disorder Reduction Strategy has been produced. At 85%, Brent also has the highest retention rates (for remaining in treatment) in London. This means that local drug users are tending to stay longer and engage with treatment programmes such as

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<sup>8</sup> Annual Report 2007-2008, Brent Crime and Disorder Reduction Partnership

<sup>9</sup> Brent Joint Strategic Needs Assessment (2008)

structured day care, specialist prescribing and counselling services. The aim of the Brent DIP is to move drug offenders away from a life of crime into treatment, thereby reducing crimes such as burglary, robbery, vehicle crime and gun crime. Brent DIP has consistently performed above the regional and national average. The provision of housing related support services has enabled individuals to sustain the gains they have made in treatment services when they move back into the community. Supporting People has an important and continuing part to play in the treatment pathway for those with substance misuse issues.

### **Alcohol Harm Reduction Strategy 2006 -2008**

The Brent alcohol harm reduction strategy aims to:

- Reduce the level of alcohol-related ill health, accidents and injuries
- Reduce anti-social and criminal behaviour associated with alcohol
- Address the alcohol-related needs of young people, their families, and the communities they live in

Brent became a borough-wide controlled drinking zone in December 2007 following the success of the pilot scheme introduced in July 2006. Brent's approach to management of the CDZ is to balance enforcement with support to those with long-term alcohol related issues. Supporting People funds services that provide housing support to those with alcohol issues and contributes to the borough's harm reduction strategy by supporting individuals to sustain their tenancies and address their alcohol use.

### **Joint Commissioning Strategy for Older People**

The vision of Brent's Joint Commissioning Strategy for Older People is that older people enjoy an independent, active and healthy life in a safe environment. Some of the priorities are:

- Early intervention to prevent older people going into crises and prevent deterioration by providing timely and appropriate services
- Specialist services for older people with special needs such as mental health and dementia
- Service flexibility that adapts to individual needs in their own home

The links between provision of housing support and extra care housing support are very strong. The borough's Older Persons' Housing Strategy 2003-08 and the strategic review of extra care identified the need for more extra care housing in the borough. The Supporting People programme will continue to work with providers and colleagues in Adult Social care to ensure that older people can be maintained in their homes with appropriate floating support and community alarm services, and hospital discharge and reablement services for as long as possible. Supporting People will also work with sheltered housing providers and colleagues in housing to remodel and where possible provide new extra care

housing that will enable older people to maintain the maximum level of independence they can.

## **Brent Children and Young People's Plan**

The Plan has six strategic priorities:

- Creating the conditions in which children and young people thrive
- Early years development
- Education achievement and school improvement
- Focus on excluded and vulnerable groups
- Safeguarding health and well-being

The Supporting People programme funds housing support services for young people at risk, children leaving care, teenage parents and vulnerable families including those experiencing domestic violence. Supporting People works closely with the Council's Children and Families department and contributes to the following objectives in the Children and Young People's Plan:

- Work with partners to provide appropriate housing for families and independent young people
- Reduce teenage conception rates
- Reduce youth re-offending and support re-integration
- Improve support to children, young people and families experiencing domestic violence

## **8.0 Information about the Brent Population**

### **Census Data**

The 2001 Census population for the London Borough of Brent was 263,464. This figure compares with the latest mid-year estimate for 2007 of 278,500<sup>10</sup>. Since 1991 Brent's population has increased by 5% with more than two-thirds of the population aged between 16-64 years. The borough has the second most culturally diverse population in England and Wales. More than 55% of Brent's population are from black/minority ethnic groups (BME), and almost 1 in 10 residents are Irish, and 50% are from either Black or Asian communities. There are marked inequalities between the geographical areas and ethnic and socio-economic groups in Brent<sup>11</sup>.

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<sup>10</sup> Taken from Brent Council website:

<https://www.brent.gov.uk/demographic.nsf/24878f4b00d4f0f68025663c006c7944/b8850a6b0e6ca7ee80256c4d002ab631!OpenDocument>: Based on information from 2001 Census

<sup>11</sup> National Statistics Census - 2001

## Matching the profile of services to future need

Successful service delivery relies on evidence of what the need and demand for services is, now and in the future. To achieve this, needs mapping and gap analysis has been undertaken to identify the profile of needs in the borough and this has been used to map future demand for services. The table below identifies an increased ageing population in the borough.

<b>Brent population aged 65 and over, in five year bands, projected to 2025<sup>12</sup></b>					
	2008	2010	2015	2020	2025
People aged 65-69	9,200	8,800	9,400	9,700	11,400
People aged 70-74	8,500	8,400	7,600	8,200	8,500
People aged 75-79	6,600	6,800	7,000	6,400	7,000
People aged 80-84	4,100	4,300	5,100	5,400	5,000
People aged 85 and over	3,700	3,800	4,500	5,500	6,500
<b>Total population 65 and over</b>	<b>32,100</b>	<b>32,100</b>	<b>33,600</b>	<b>35,200</b>	<b>38,400</b>

Additionally the particular needs of the ageing population also impact significantly on health and social care services, as illustrated in the table below. Therefore, in developing flexible services that meet the future needs of service users it is critical that the architecture and design of services is considered directly with the aims of effective service delivery and the proposed outcomes of maximizing independence and reducing the reliance on residential care.

<b>People aged 65 and over predicted to have dementia, by age band (65-69, 70-74, 75-79, 80-84 and 85 and over) and gender, projected to 2025<sup>13</sup></b>					
	2008	2010	2015	2020	2025
<b>Total population aged 65 and over predicted to have dementia</b>	<b>2,065</b>	<b>2,143</b>	<b>2,345</b>	<b>2,612</b>	<b>2,868</b>

## General Population - Key Facts

The Brent population age profile is young compared to UK, with 43% of residents under 30 years of age. The population is projected to grow by at least 8% over next 10 years with the largest increase in Asian and other BME groups. 12% of the population are over the age of 65 (33,400 people). Of this number 46%<sup>14</sup> of people aged 65-74 years are from BME groups, this reduces to 24%<sup>15</sup> for people

<sup>12</sup> Projecting Older People Population Information System, Department of Health (2008)

<sup>13</sup> Projecting Older People Population Information System, Department of Health (2008)

<sup>14</sup> Data is derived from Healthier Communities and Older People LAA Challenge Day November 2007 using ONS 2001 UK Census information

<sup>15</sup> Projecting Older People Population Information System (POPPI) March 2008

75 years +. Projections show a slight increase in numbers of older people until 2011. However the population of 75+, the most vulnerable, are likely to increase by at least 1,000 to 13,500.

### Population demographics

The Brent Joint Strategic Needs Assessment (2008) describes the demographics and health needs of the population in Brent, and sets out how this will change over the next 5 years.

Brent is only one of two local authorities serving a population where the majority of people are from ethnic minorities, and these groups are growing faster than any other. The population is growing and changing with recent figures indicating that there are significant numbers of people moving into the borough creating new communities. The official population forecast from the Office of National Statistics (ONS) in 2006 was approximately 270,000, although research commissioned by the Council suggests that this could be 15,000 higher. The GLA predicts that the Brent's population will increase by 10,000 every ten years and will reach 305,575 by 2018.

### Expected population growth <sup>16</sup>

Baseline Population segment	Year 1 2007/08	Year 2 2008/09	Year 3 2009/10	Year 4 2010/11	Year 5 2011/12	Year 5 2012/13	Year 5 % Change
≤ 4	21,050	21,283	21,487	21,542	21,252	20,998	0%
5 - 14	33,234	33,562	34,063	34,625	34,971	35,356	6%
15 - 44	130,268	129,285	128,782	128,318	127,025	126,054	-3%
45 - 64	59,758	61,211	62,712	64,224	65,591	66,872	12%
65 - 74	17,902	17,750	17,555	17,452	17,538	17,627	-2%
75 - 84	11,134	11,403	11,686	11,922	12,145	12,287	10%
≥ 85	4,200	4,327	4,471	4,611	4,725	4,901	17%
Population („000)	277,546	278,821	280,756	282,694	283,247	284,095	2%

### Expected population growth by Ward

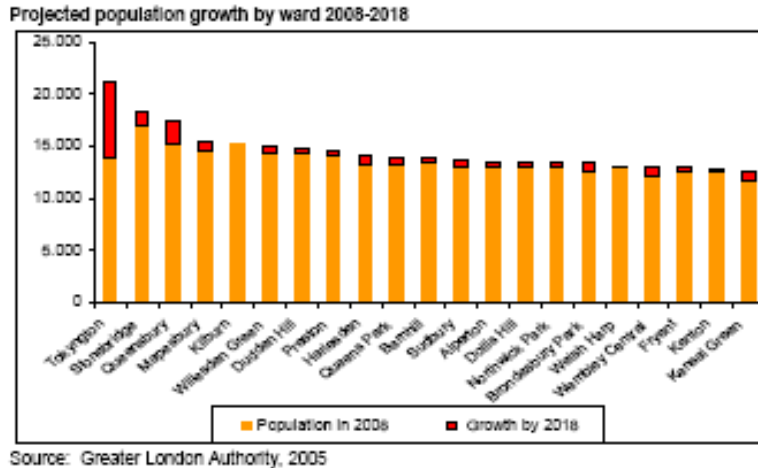
Population projections are provided at neighbourhood level. In Brent Stonebridge is the largest neighbourhood and Kensal Green is the smallest neighbourhood. The highest growth is expected to occur in Tokyington as a result of the Wembley stadium development which is projected to increase by 10,000 by the year 2031. Other neighbourhoods within Brent such as Queens Park and Brondesbury Park are expected to have a decline in their population levels by 2031 <sup>17</sup>. Therefore, the location of future services is critical if they are to meet

<sup>16</sup> Brent Joint Strategic Needs Assessment (2008)

<sup>17</sup> Brent Joint Strategic Needs Assessment (2008)



the needs of service users and to also take account of changing needs in the future.



## Health in Brent

Brent has clear inequalities in health between wards, for example male life expectancy is nearly ten years higher in Northwick Park than in Harlesden. Men under 75 years old have considerably worse mortality rates in Stonebridge and Harlesden.

Overall male and female life expectancy is increasing and slightly exceeds England as a whole (77 male, 82 female). The total number of adults with a mental health diagnosis in Brent is estimated at 6762. African and Caribbean service users are over-represented in inpatient and community mental health services. Information collected about people in Brent<sup>18</sup>, showed a group of people with learning difficulties who will be getting older and need services for older people. Support for carers is also an issue.

## Deprivation

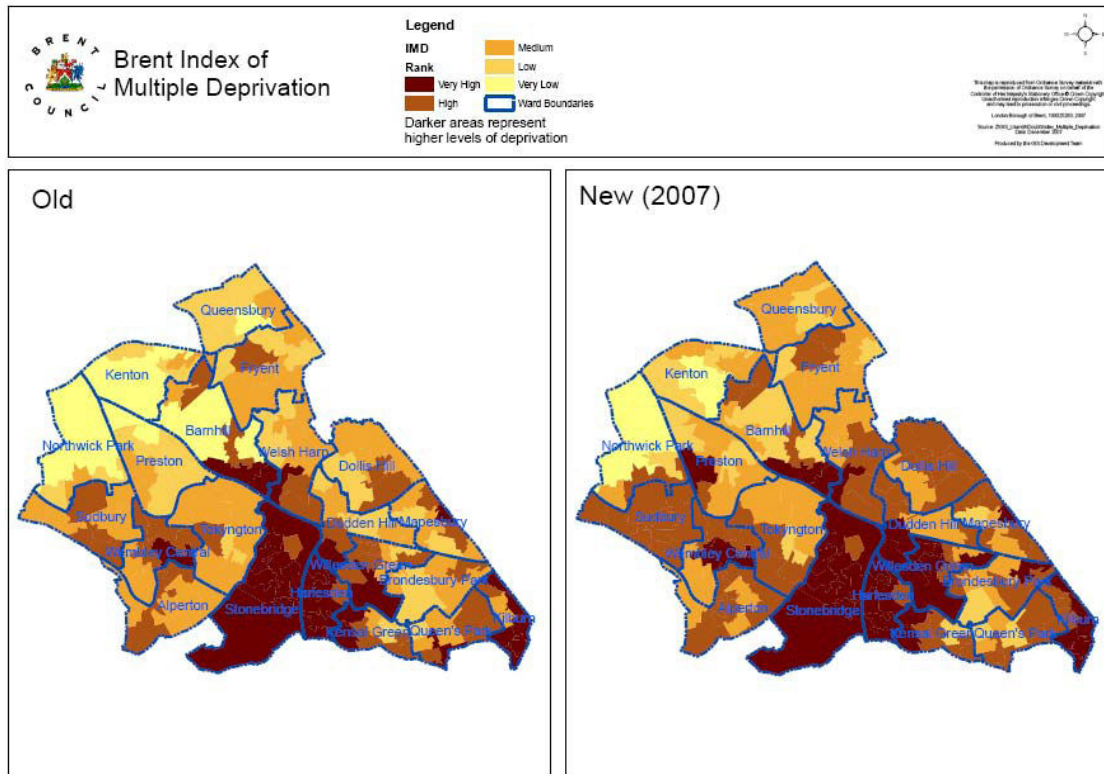
Whilst large sections of Brent are relatively affluent, many residents experience high levels of deprivation and low incomes. The 2007 Index of Multiple Deprivation places Brent within the 15% most deprived local authorities in the country. The neighbourhoods' experiencing the highest deprivation are largely located in the south of the borough. This situation is changing with high levels of deprivation now seen in pockets to the north of the borough. The most deprived residents also have the lowest income levels, highest unemployment levels, poor and overcrowded housing and the worst health outcomes.<sup>19</sup>

<sup>19</sup> Brent Joint Strategic Needs Assessment (2008)



Changes in Brent's deprivation level can be seen across Brent where the majority of neighbourhoods have become more deprived. Only 2 of Brent's 21 neighbourhoods have become less deprived compared with their deprivation levels of the Indices of Multiple Deprivation (IMD) 2004 (Harlesden and Queen's Park).

## Index of Multiple Deprivation in Brent <sup>20</sup>



## 9.0 Needs Analysis and Gaps

### Implications for Supporting People services

In future it is proposed that services should focus most on people in high levels of deprivation and ill health, living in the poorest wards. Floating support services, in particular can be targeted to meet the needs of people in greatest need, to avoid an increase in vulnerability in the future. Services that are responsive and flexible are best able to meet the needs of a changing population, and strongly link with the wider preventative agendas.

<sup>20</sup> Brent Joint Strategic Needs Assessment (2008)

In determining future demand for services against current provision an exercise analysing needs and gaps has been undertaken based on the 'Building for All' model <sup>21</sup>. This model developed by the National Housing Federation in 2007, projects the need for supported accommodation and floating support services by client group and borough in London for the next ten years. The model uses population profile data and also takes account of local available data where available. The model does not identify the levels of support needed, rather it identifies the number of individuals who are likely to need housing related support services. The figures are given for each client group below and an overall projection produced.

In so far as the model is the first of its kind and provides data projection across client groups, it is dependent on local data being available and accurate. Many of the existing data sets for client group need or prevalence are collected in different formats within organisations and may not accurately cross reference to other data sets. Additionally some information may also be outdated. Therefore the information in the data sets below is the most accurate at the time of writing. Where local data is not available the model includes national data and prevalence rates and these have been used instead to provide a 'best estimate' of need.

For each client group the projections identify the current provision in 2009, both accommodation-based and non-accommodation based, and the likely future provision required in 2014 and again in 2017. Overall supply and demand figures across all client groups are listed at the end of this section.

## **Client Group Needs Analysis**

### **9.1 Older People with Support Needs and the Frail Elderly**

The total cost of Supporting People Older People's support services (including accommodation based services) is £1.8 million per annum equivalent to 14% of the total SP budget. The older people's floating support and handyperson services cost £620,867 annually, approximately 5% of the SP budget. A total of 290 people receive the floating support services (8.2% of the total number of people receiving SP services) and approximately 1,300 receive a service from the handyman service in any year. This is set to increase to 2,000 people per year between 2009/10 and 2010/11 as a result of additional funding from the CLG. The Extra Care action plan includes an objective to increase the capacity of social extra care accommodation to approximately 650 units.

A change in accommodation type presents a shift in need for Supporting People services away from traditional models of accommodation based (sheltered housing) support to floating support and the use of assistive technology and

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<sup>21</sup> Building for All, Identifying the Need for Supported Housing in London, NHF (2007)

other preventative support . The emphasis of the older person's floating support and handyperson service is on sustaining tenancies, encouraging independence to live at home and avoiding inappropriate admission to hospital, residential or nursing care. The shift in services requires partnership working with statutory and third sector providers to ensure that future joint commissioning can take place, thereby ensuring that service user needs wherever possible, can be met within their home.

Delayed transfers of care in Brent have improved significantly in recent times, with reported data demonstrating that only two patients per week had a delayed discharge for the June 2009 period, compared with 78 for the same period in 2008. This has resulted in a significant financial saving to the Council as each day of delayed discharge has a cost attached of £120. There has been significant investment in partnership services to tackle delayed discharges from hospital and to utilise local resources and facilities more efficiently and flexibly.

### Older People with support needs

The Table below sets out the projected need for supported people services for older people in Brent derived using the NHF Model. This shows an oversupply of sheltered housing and an under-supply of floating support and a net need of approximately 330-500 units. The model does not take into account the need for extra care and the figures below indicate that there is a case for remodelling or re-providing sheltered accommodation as extra care to meet the Council's needs for extra care provision.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	978	625	-353	475	1162	687	1453	1787	334
2014	978	656	-322	475	1219	744	1453	1875	422
2017	978	679	-299	475	1262	794	1453	1941	488

- Assumptions on baseline data are taken from using the Building for All population in need default figure and reducing this by 50% to create a population in need local figure, as not all of the population in need of older people will require a housing-related support or accommodation-based support service.
- It has also used the Building for All default projections to determine that 35% of people in need will require an accommodation-based service and 65% will require a non- accommodation based service.

### **The needs of Older People**

An increase in the ageing population locally impacts on services by an:

- 10% increase in population of people 75 – 84 years old by 2012/13
- 17% increase in the number of people aged 85 and over for the same period
- A rapidly ageing population presents particular challenges in increased use of and dependency on health and social care services, such as for dementia

#### **To address the needs we will:**

- Focus new service developments on Extra Care and floating support services.
- Work with partners in Adult Social Services and Housing to increase the capacity of rented Extra Care to 650 units by 2013/14. This will be achieved by working jointly to develop new schemes and through the remodeling of existing sheltered schemes.
- Provide extra care housing that can enable the Council to reduce its reliance on residential care and enable older people to maintain their independence and well-being for as long as possible.
- Increase access to floating support for older people in the community.
- Work with partners to increase hospital discharge and re-ablement services

## **9.2 Homeless Families including Travellers and Refugees**

Supporting People funds housing support services for families with support needs to a total of £570k annually. This represents 5% of the total Supporting People budget. Three services for families are SP funded, one accommodation-based service and two floating support services (one for refugees/BME community) and (one for homeless families). Eight staff provide support to approximately 160 service users a year across services with varying levels of need.

The table below sets out the projected need for supporting people services for families and for refugees. This shows an under-supply of services, particularly of floating support where there is a need for an additional 200 -300 units for families and refugees.

- Assumptions on baseline data are taken from using the Building for All population in need default figure.

It has also used the Building for All default projections to determine that 32% of people in need will require an accommodation-based service and 68% will require a non- accommodation based service.

## Families

## Refugees

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	40	123	85	98	283	185	346	496	270
2014	40	139	99	98	296	198	346	505	280
2017	40	143	103	98	301	203	346	544	298

### The needs of Homeless Families, Travellers and Refugees

The Strategic Review of family services carried out in 2009 identified:

- Gap in specialist services for families with complex needs
- Gap in specialist services for Travellers/Roma/Gypsies and Black and Minority Ethnic and Refugee families
- A need for more timely access to move on accommodation, including private rented accommodation so that the capacity of services to work with more families can be increased

#### To address the needs we will:

- Re-specify and re-tender services to provide specialist support to families with complex needs, and to address the specific needs of Traveller families and Black and Minority and Refugee families
- Ensure that families with low support needs are directed to generic floating support services
- Ensure that families are included in move-on initiatives and work with colleagues in housing to enable families to access a range of housing options including the private rented sector

## 9.3 People Escaping Domestic Violence

The Brent domestic violence strategic review has been completed in 2009. Brent has four services for women escaping violence, two accommodation based services including one specialist service for Asian women, and two floating support/outreach services. These services house and support 53 women and their children. Supporting People spending on domestic violence services is £263K, this represents 2.4% of the overall budget.

### Domestic Violence services

- Assumptions on baseline data are taken from using the Building for All population in need default figure.

- It has also used the Building for All default projections to determine that 76% of people in need will require an accommodation-based service and 34% will require a non- accommodation based service.

The table below identifies an oversupply of domestic violence floating support services and an undersupply of accommodation based services. It is important to note however that a significant number of families accepted as homeless cite domestic violence as a reason for homelessness and the figures need to be read alongside those to determine the overall need for services.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	25	32	7	47	11	-36	72	43	-29
2014	25	34	9	47	11	-36	72	45	-27
2017	25	35	10	47	11	-36	72	46	-26

### **The needs of people escaping violence**

- There is a need for services to be provided to women from BMER communities, to those with complex needs, single women, and to those with male children over the age of 13, and to women without recourse to public funds.

- There is a need to ensure floating support services work with the Council's Sanctuary scheme to ensure women who wish to stay in their own homes can continue to do so safely

- There is a need to ensure that trafficked women are appropriately supported

- There is a need for joint work with the Children and Families department to ensure that the needs of children affected by domestic violence are addressed

-There is a need to increase move on from refuge services and to ensure that families are supported to achieve good outcomes in relation to health, education, training and employment.

-There is a need to address the needs of women who are trafficked, are victims of violence and forced into prostitution.

### **To address the needs we will:**

- Review the demand of all current services to determine whether a need remains for a specialist Asian refuge or a broader BMER service.

- Make more efficient use of resources by procuring refuge services through a single provider

-specifying services to work with families with complex needs and make appropriate links with Children and Families department so that the needs of these families can be appropriately addressed

- procuring floating support services for domestic violence clients alongside those of floating support for family services



- Work with colleagues in Community Safety and other relevant agencies and local partnerships to ensure that Supporting People funded services can assist in meeting the needs of trafficked women.

#### **9.4 Offenders and those at risk of offending**

The SP grant spent on specialist Offender housing support services is £480K per year (2008/09), or about 3.7% of the annual SP budget. The number of services users funded for support is 65, with thirty five people receiving accommodation-based support and the remaining thirty in receipt of floating support services. There is an undersupply of services in comparison to other neighbouring boroughs.

In addition, Brent is unusual in having an approved premises hostel within the borough. This is funded by the Ministry of Justice and all referrals are received from Prison and Probation. However, it has an impact on move on accommodation as the majority of offenders leaving the approved premises will be then be referred onto the borough's specialist high support accommodation services due to their licence conditions.

This is an important client group for the Supporting People strategy, in order to meet community safety and corporate priorities. The current services in Brent are highly strategically relevant. Contract reviews previously showed an urgent need to improve standards and re-model service delivery in some services this process has been completed in 2009. There was an undersupply of specialist services for this client group, compared to demand, particularly for high risk offenders, and there is reported inadequate access for offenders to non-specialist accommodation. This is a particular issue with offenders with a forensic history. The borough has a specialist dual diagnosis supported housing scheme with access via the Complex Care Panel, which can preclude access for offenders with particular needs such as a personality disorder.

Demand for offender accommodation services far outstrips available supply. Data presented at the London Resettlement Forum indicated that in 2008 of the new receptions at HMP Wormwood Scrubs, 437 reported that they were Brent residents<sup>22</sup>. Some existing housing support services report having long waiting lists, but further difficulties remain with securing appropriate move on accommodation. The impact of this is that service users can often remain in schemes for far greater periods of time than required, thus reducing access to services for those who may be in greatest need of supported accommodation and where risk can be effectively managed in the community.

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<sup>22</sup> London Resettlement Forum, Brent Offender Profile, 2007/08

## Offender services

- Assumptions on baseline data are taken from OASys assessments undertaken from July 2007 – June 2008 which indicated that 28% of the caseload had a criminogenic need in relation to accommodation. As some of these may include a need for advice in relation to accommodation rather than requiring accommodation, this baseline projection has been reduced to 20% to reflect the likely proportion of offenders requiring housing related support or supported accommodation.
- It has also used the Building for All default projections to determine that 77% of people in need will require an accommodation-based service and 23% will require a non- accommodation based service.

The table below shows an estimated net short-fall of 84 units with a need for almost twice as many accommodation based units as floating support.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	35	90	55	30	59	29	65	149	84
2014	35	93	57	30	60	30	65	150	85
2017	35	95	60	30	60	30	65	150	85

### The needs of Offenders

The Strategic Review of offender services 2008 identified:

- Data taken from the Probation assessment tool, OASys (Offender Assessment System) within Brent for the period July 2007 – June 2008 reported a total of 748 assessments completed on current offenders during this period<sup>23</sup>
- Of the 748 assessments, an accommodation need was identified as a contributing factor to the individual's offending in 209 cases or 28%. This may include a range of factors such as homelessness, unsuitable or insecure housing or inability to be housed in a particular area due to victim issue or the offence
- Female offenders represent a small but significant proportion of the caseload, 13% compared against 87% offenders in the borough who are male, with different needs due to the nature and type of offences committed
- An undersupply of accommodation and floating support services
- There is high demand for all housing support services for offenders in the borough, with significant demand for high risk accommodation services

<sup>23</sup> London Probation OASys data for Brent (Assessments completed between July 2007-June 2008)



**To address the needs of Offenders we will:**

- Re-negotiate existing contracts to gain efficiency savings instead of tendering, as the services demonstrated a quality service and positive outcomes
- Remodel some of the existing offender provision to increase the quality of the accommodation
- Remodel specific single homeless projects into accommodation services for offenders in order to increase the availability of high and medium risk provision
- Work in partnership with the DAAT to jointly commission appropriate treatment services for offenders with drug and alcohol issues.

**9.5 People with Physical Disability, Sensory Impairment and HIV/AIDS**

This strategic review for this client group is scheduled for 2009/10. The borough has some specialist housing support services for people with a physical disability and/or sensory impairment, but it is difficult to access appropriate move on accommodation for service user which results in people remaining in supported accommodation longer than expected.

The borough also has one floating support service in operation for people living with HIV and AIDS, but there may be more demand for services than is currently known. Previous research on access indicated that there was reluctance from some service users to reveal sensitive personal information in order to gain access to services, and there is further work to be done to engage certain client groups.

**Physical Disabilities and HIV/AIDS**

- Assumptions on baseline data are taken from using the Building for All population in need default figure.
- It has also used the Building for All default projections to determine that 13% of people in need will require an accommodation-based service and 87% will require a non- accommodation based service.

The tables below show a small need for accommodation based services and a greater need for floating support for people with physical disabilities and HIV/AIDS.

**Physical and Sensory Disabilities**

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	14	39	25	123	264	141	137	303	166
2014	14	41	27	123	275	152	137	316	179
2017	14	42	28	123	281	158	137	323	186

## HIV/AIDS services

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	0	12	12	15	73	58	15	85	70
2014	0	12	12	15	77	62	15	89	74
2017	0	13	13	15	78	63	15	91	76

### **The needs of people with physical disability, sensory impairment and HIV/AIDS**

- there is a need for additional accessible accommodation
- there is a need to ensure that an assessment for a Disabled Facilities Grant (DFG) has been carried out for service users, where appropriate,
- there is a need to review the current floating support service for people with HIV/AIDS to ensure and remodel as required

#### **To address the needs we will:**

- Review the profile of services for people with physical disability or sensory impairment in a Strategic Review in 2010 Implement the recommendations from the review
- Work with colleagues in Housing and Community Care to ensure that the ability of individuals to access self-directed support is maximised

## 9.6 People with Drug and/or Alcohol issues

The SP grant spent on specialist Drug and Alcohol housing support services is £279K per year (2008/09), or about 2.2% of the annual SP budget. The number of services users funded for support is 100, with twenty nine people receiving accommodation-based support and the remaining seventy one in receipt of floating support services

Services for this client group contribute directly to the Community Safety and health agendas locally. Identified gaps for people with alcohol issues included services to the hidden population of people with alcohol issues, services for people with physical disabilities and older people and services for people with complex needs/dual diagnosis, and Korsakoff's syndrome.

A snapshot survey from current providers of some single homeless services identified that approximately 30% of their service users had an offending history, and between 25-30% also had a drug and/or alcohol misuse issues. A significant proportion of service users had multiple and complex needs relating to both offending and substance misuse issues.

There is a growing need for services for people with drug and alcohol issues and this is an important priority for our partners, and for this strategy. It contributes to the Community Safety, Health and Young People's agenda. Jointly with NHS Brent we re-specified and re-tendered a dual diagnosis service for people with mental health and drug problems in September 2005. The review of single homeless services to be completed in 2009 will inform future commissioning for this client group.

### **Drug and Alcohol services**

- Assumptions on baseline data are taken from using the Building for All population in need default figure.
- It has also used the Building for All default projections to determine that 75% of people in need will require an accommodation-based service and 25% will require a non-accommodation based service.

The table below identifies a need for more accommodation based services and a slight over-supply of floating support services for these client groups. This reflects the over-representation of this client group in single homeless services and rough sleeping and the significant impact that substance misuse issues have on individual's abilities to sustain accommodation.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	29	135	106	71	44	-27	100	179	79
2014	29	142	113	71	45	-26	100	187	87
2017	29	144	115	71	46	-25	100	190	90

### **The needs of people with Drug misuse issues**

- There was a substantial increase in the number of drug users in Brent receiving treatment in 2007/08. 1441 people accessed services against a target of 1056 and a stretch target of 1300. Of those accessing treatment programmes, 86% remained in treatment programmes for 12 weeks or longer: the highest performance of any London PCT
- There is a need for timely access to treatment services across all Tiers

### **The needs of people with Alcohol issues**

- Data taken from Community Care Drug and Alcohol team for 2007/08 indicated that 124 referrals were made during this period, with a total of 108 people in treatment.
- Timely access to treatment services across all Tiers is needed

- A need to provide services to people suffering from alcohol related dementia including Korsakoff's syndrome, of which there is a high incidence amongst the older population

**To address the needs we will:**

- Re-negotiate existing contracts to gain efficiency savings instead of tendering, as the services demonstrated a quality service and positive outcomes
- Increase access to floating support for people with drug and alcohol issues moving on from accommodation based services to enable them to sustain their tenancies and ensure to increase the availability of existing provision
- Remodel specific single homeless projects into accommodation based service for substance misuse in order to increase the availability of supported housing for this client group in the borough
- Increase access to move on accommodation so that more efficient use (through increased throughput) of accommodation based services is achieved
- Work in partnership with the DAAT to jointly commission appropriate treatment and housing support services

## 9.7 People with a Learning Disability

Brent Learning Disabilities Partnership Housing Plan 2003 – 2007 identified that approximately 787 people in the borough had a learning disability, and of those people in the region of 60% live with their parents<sup>24</sup>. Information is taken from the database managed by Brent Learning Disability Services which holds information about people using learning disability services in Brent, assessed as or registered as having a learning disability or known to learning disability services or people using health services as of 2001. The figures exclude people who have died, moved away, are too young or old to qualify for services or were assessed as not having a learning disability. It also excludes those whose needs take them outside the FACS (Fair Access to Care Services) criteria.

Projections of the number of people with a learning disability in the borough indicate that there will be a slight decrease in the number of younger people with learning disability between 2008 and 2025, and an increase in the number of older adults over the same period.

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<sup>24</sup> Seema, August 2002

People aged 18-24, 25-34, 35-44, 45-54 and 55-64 predicted to have a learning disability, projected to 2025 <sup>25</sup>					
	2008	2010	2015	2020	2025
People aged 18-24 predicted to have a learning disability	762	740	671	627	663
People aged 25-34 predicted to have a learning disability	1,352	1,370	1,397	1,389	1,335
People aged 35-44 predicted to have a learning disability	1,078	1,070	1,034	1,057	1,102
People aged 45-54 predicted to have a learning disability	782	823	879	883	866
People aged 55-64 predicted to have a learning disability	522	536	599	673	721
Total population aged 18-64 predicted to have a learning disability	4,497	4,538	4,580	4,629	4,687

Supporting People funds housing support services for people with a learning disability to an annual total of approximately £1m annually. This represented about 7% of the SP budget. There is an identified demand for services for the increasingly ageing population of people with a learning disability.

A total of 185 people receive specialist services (5% of the total number of people receiving SP services), with others receiving generic floating support. The specialist services provide accommodation based housing support for 77 people, additionally SP fund up to 25 people in Adult placement, and provides funding for floating support up to 18 people in private rented sector accommodation. One Housing Options worker and 2 Housing Support workers work along side Brent Council Learning Disability Team (BCLDT) to bring people out of high cost residential homes into supported living.

### Learning Disability services

- Baseline data taken from Brent Learning Disabilities Partnership Housing Plan data 2003 – 2007 identified that approximately 787 people in the borough had a learning disability, and approximately 60% of that overall number lived with their parents. Of those 60%, many will already receive services from a range of sources, including Supporting People services. The remaining 40% may also require a housing related support or supported housing service or also receive services from a range of sources.
- The number of actual people in need could be higher than the 787 people recorded as known to services, and therefore there may be numbers of people who may require a service in the future,. Additionally there be

<sup>25</sup> Projecting Adult Needs and Service Information (PANSI), 2008

some people who are not receiving a service currently but who may require one due to not meeting the FACS criteria of having a critical or substantial need.

- Of people known to services, baseline figures used for the Building for All default projections determined that 40% of people in need will require an accommodation-based service and 60% will require a non-accommodation based service.

The table below shows a net need for both accommodation based and floating support services for this client group. This reflects the need for alternative provision for residential care, for provision to meet the needs of out of borough placements that are due to return to the borough and the need for move on accommodation and support for those in existing SP services.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	79	126	47	110	189	79	189	315	126
2014	79	130	51	110	196	86	189	326	137
2017	79	135	56	110	201	91	189	337	148

**The needs of people with a learning disability:**

- There is a need to reduce group home style provision to meet the demand for an increased choice of accommodation and housing support services throughout the borough
- There is a need to provide more opportunity to live more independently and an increased demand for move on and community based support options as well as self-directed support
- Efficiencies would be provided if services were jointly purchased with Adult Care Services
- There is an identified demand for services for the ageing population of people with learning disabilities
- There is a need to provide alternative housing and support solutions for individuals no longer needing residential care

**To address the needs of people with learning disabilities we will:**

- Continue remodelling services to change the emphasis from sustaining the level of support provided to focus on helping individuals to progress to greater independence, where possible we will work with colleagues in adult social services to release funding to deliver the required changes
- Move away from reliance on a single model of support provision which provided shared accommodation-based housing support services providing low levels of support

-Increase access to self-contained accommodation and flexible support, including self-directed support and individual budgets as well as floating support  
- Work with providers to increase floating support services for people with learning disabilities

## 9.8 People with Mental Health Needs

450 service users with mental health problems in Brent receive Supporting People services, 182 in accommodation based services and 273 accessing floating support. The total cost of the services provided is £2.39 million, which is approximately 19% of the annual Supporting People budget.

The number of users of mental health services receiving specialist SP services has increased by 605 since 2003. In addition to SP funded provision, many people with mental health needs are receiving other SP funded support, with approximately 35% of floating services for single homeless people being provided to people with a mental health need. Approximately 25% of all referrals to START Plus have an identified mental health support need.

NHS Brent's initiative to 'improve mental health and wellbeing' reflects a commitment to working with stakeholders to develop a joint strategy that will deliver a step-change improvement. The LAA also reflects a commitment to working with partners to improve access to employment for those with mental health needs<sup>26</sup>

### Mental Health services

- Assumptions on baseline data are taken from 2008/09 data from START Plus which identified that approximately 25% of all referrals to START Plus have an identified mental health support need. It additionally includes the number of spot purchase accommodation placements made for 2007/08.
- It has also used the Building for All default projections to determine that 40% of people in need will require an accommodation-based service and 60% will require a non- accommodation based service.

The table below identifies a net need for both accommodation and floating support services. This reflects the need for alternative provision for residential

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<sup>26</sup> NHS Brent Commissioning Strategy Plan 2008-2013



care, for provision to meet the needs of out of borough placements that are due to return to the borough and the need for move on accommodation and support for those in existing SP services.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	192	294	102	258	336	78	450	630	186
2014	192	307	115	258	345	87	450	652	202
2017	192	313	121	258	356	98	450	669	219

**The needs of people with a mental health issue:**

- There is a need to provide medium to higher levels of housing support services
- There is a need to increase access to move on from accommodation based services
- There is a need to provide in borough services to relieve the heavy reliance on costly out of borough placements
- Services should be commissioned to focus on maximising independence, helping people move on and to gain and sustain employment
- There is a high demand for specialist dual diagnosis services and a demand for forensic service for mentally disordered offenders

**To address the needs of people with a mental health issue we will:**

- Implement re-tendering of existing services to provide for:
  - Complex mental health needs
  - Forensic and dual diagnosis needs
  - Culturally sensitive and competent services
  - Women with mental health needs
- Increase access to self-contained accommodation for people with mental issues through remodelling of existing shared accommodation and where possible accessing additional self-contained units
- Commission future services on a pathways model to support independence
- Increase access to move on accommodation in order to make more effective use of accommodation based services and increase throughput.

**9.9 Single People and Rough Sleepers**

The Single Homeless strategic review will report in late 2009. The single homeless client group is the second largest group receiving Supporting People funded services in Brent, with approximately 1152 people in receipt of services. It is the largest area of grant spend with £3.8m, and represents 35% of the



Supporting People Budget. A large number of single homeless people with support needs may also have other complex needs such as mental health or substance misuse issues.

The number of people in Temporary Accommodation in Brent as at the end of December 2007 was 3,953; the majority of these are cases that Brent has accepted a duty to. At any one time there are approximately 250 to 300 homeless applications under investigation. Approximately 50% of referrals to START Plus are single homeless people with support needs.

### Single Homeless services

- Assumptions on baseline data are taken from 2008/09 data from START Plus which identified that approximately 50% of all referrals to START Plus are from single homeless people with support needs.
- It has also used the Building for All default projections to determine that 73% of people in need will require an accommodation-based service and 27% will require a non- accommodation based service.

The table below identifies a slight over-provision of single homeless services, specifically floating support and a slight additional need for accommodation based services. It is important to note that within this client group 35% of floating support services are for people with a mental health issue and 30% of single homeless clients have an offending history and 25-30% have a drug or alcohol issue (see information above on these client groups).

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	370	694	324	468	256	-212	838	950	112
2014	370	729	359	468	269	-199	838	998	160
2017	370	764	394	468	283	-185	838	1047	209

#### The needs of single homeless people with support needs

- There is a need to increase move on, including to the private rented sector, to ensure more efficient use of accommodation based services and increase throughput
  - There is a need to improve access to education, training and employment and social inclusion
  - There is a need to improve access to health care services, including mental health and substance misuse services
- There is a need to review the designation of some services as single homeless and identify those that can be redesignated to meet specialist needs for mental health, alcohol and/or drug misuse and offending behaviour

**To address the needs of single homeless people we will:**

- Implement the recommendations from Single Homelessness Strategic Review.
- Work in partnership with housing providers to improve and develop support services and the outcomes for single homeless people
- Continue to tackle silt up in supported accommodation and agree move on targets for each service
- Work in partnership with housing providers to ensure that service users are offered support and advice services which are focused on homelessness prevention.
- Promote the use of floating support services to enable individuals to sustain tenancies in the private rented sector.
- Complete the re-opening of Pound Lane hostel (funded by Places for Change/CLG) in 2010 and integrate this modern 85 unit provision (including 35 units of direct access accommodation) into the pattern of services available for socially excluded and homeless clients.

### **9.10 Young People/Teenage Parents**

Supporting People currently funds housing support services for young people (aged 18 -25) and care leavers and teenage parents to a total of £1.1 million per annum, approximately 9% of the total SP budget.

Seven services are for young people, with five being accommodation based and two floating support services in operation. Three services are for teenage parents, one of these services has been jointly commissioned with the London Borough of Harrow. In addition, the SP funded generic single homeless floating support service can support young people aged 16 plus unable to access specific young people's services and through provision of supported lodgings and a 'crash pad' crisis support service has enabled the Supporting People programme in Brent to prevent homelessness and widen the options available to young people. Overall 162 young people and teenage parents are able to access Supporting People funded support services (3 of these in Harrow).

In 2006 Brent accepted a duty towards forty eight 16 and 17 year olds which represents 7% of the Brent total of homeless acceptances. This rose to nearly 8% in 2007/08. A significant amount of work has been undertaken between departments within the Council to develop solutions to particularly tackle the issue of 16 and 17 year olds presenting as homeless and Supporting People funded services have a crucial role to play in this.

In terms of teenage parents, a concentrated area of risk has been identified in Harlesden and South Kilburn as well as additional hotspots in the north of the borough. Brent has a current rate of just over 45 teenage conceptions per 1000,

above the England average. In 2007/8 Brent made 86 decisions on homeless applications from teenage parents and accepted a duty to house 54 (63%) of these households.

### Young People at risk/Care Leavers and Teenage Parents

- Assumptions on baseline data are taken from using the Building for All population in need default figure.
- It has also used the Building for All default projections to determine that 60% of young people in need will require an accommodation-based service and 40% will require a non- accommodation based service.

The tables below indicate that there is a slight overall need for floating support services for young people and teenage parents and a greater need for floating support services for teenage parents.

### Young People at risk/Leaving Care

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	79	80	1	43	54	11	122	134	12
2014	79	80	1	43	54	11	122	134	12
2017	79	80	1	43	54	11	122	133	12

### Teenage Parents services

- Assumptions on baseline data are taken from using the Building for All population in need default figure.
- It has also used the Building for All default projections to determine that 45% of people in need will require an accommodation-based service and 55% will require a non-accommodation based service.

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	22	39	17	15	47	32	37	86	49
2014	22	39	17	15	47	32	37	86	49
2017	22	38	16	15	48	33	37	86	50

### The needs of young people and teenage parents

There is a need for:

- A range of accommodation options, with floating support and clear structured routes into and out of supported housing, including access to life skills training and family mediation to prevent homelessness.
- An increase in move-on accommodation (with floating support) to enable young people and teenage parents to continue to receive support to sustain their tenancies
- A need to ensure that services can respond to the very complex needs of some young people and enable them to achieve positive outcomes, particularly in relation to education, training, employment and independent living skills
- Services that can support young people who misuse substances or who have mental health issues, or offending behaviour

**To address the needs we will:**

procure a range of accommodation and support options to meet the needs of young people and teenage parents including:

- 'Night stop' placements through emergency and very short term placement with suitable families for young people,
- provision for young male offenders aged 16-19
- decommissioning and/or remodelling of unsuitable teenage parent accommodation
- continue to jointly fund the Harrow service for teenage parents
- 24 hour supported accommodation for young people
- Increase access to move on with appropriate floating support
- Work jointly with the Children and Families department to meet the housing care and support needs of young people and teenage parents
- Ensure services working with young people and teenage parents promote social inclusion and independence through the provision of life skills, training and access to mediation.

**9.11 Total Units for all Client Groups – Supply and projected demand**

Year	Accommodation-based			Non-Accommodation based			Total		
	Current	Need	Difference	Current	Need	Difference	Current	Need	Difference
2009	1874	2311	437	1631	2785	1154	3542	5096	1554
2014	1874	2415	541	1631	2901	1270	3542	5316	1774
2017	1874	2494	620	1631	2995	1364	3542	5489	1947

Using the above projections it is estimated that there is a 20% undersupply of accommodation based services and a 40-45% undersupply of non-accommodation based services in Brent. This projected undersupply needs to be seen within the context of decreased funding for the Programme since 2005, and creates considerable pressure on the Supporting People Programme to make the most effective and efficient use of resources. To ensure this there is a need to:

- Commission services jointly in partnership with other Commissioners where appropriate
- Reduce 'silt up' in supported accommodation and greatly improve throughput
- Increase the use of move on to the private rented sector
- Increase the supply of extra care sheltered housing, floating support and reduce the number of residential care beds
- Make links to the Affordable Housing Strategy and remodel and re-designate services where possible and appropriate to meet the requirements set out in this strategy
- Improve the use of information generated by the START Plus service to monitor supply and demand for housing related support services in Brent
- Ensure that Supporting People services are appropriately targeted at those who have clearly identified support needs and that they are assisted to move on to independence as soon as possible with floating support when needed
- Empower and enable vulnerable people through personalised services, and self-directed support to determine their own care and support
- Maintain close collaborative partnership working with the voluntary sector to ensure a wide range of innovative and high quality services are made available to vulnerable people at the best value for money to the Council
- Direct resources at floating support services for those who can benefit from this to help them live independently in the community
- Focus on outcome based commissioning and link this with the Quality Strategy for Adult Social Care
- Reflect joint priorities the Council shares with NHS Brent, particularly on delayed discharge and intermediate care
- Demonstrate the financial benefits of the programme and secure continued investment in preventative housing related support services.

## **10.0 Financial Benefits arising from the Supporting People programme**

### **Financial Benefits**

The Department of Communities and Local Government produced a tool to calculate the financial benefits of the Supporting People programme across all client groups, the *CLG Supporting People Financial Benefits Model*. This model has been used to calculate the financial benefits that the Supporting People Programme provides in Brent. This demonstrates that for every £1 spent by SP £1.96 is saved to other budgets. The needs and gaps analysis in section 9 indicates a continued and increasing need for housing related support services.

Flexibility in use of budgets now that the grant is no longer ring fenced will enable us to achieve local priorities in:

- preventing vulnerable individuals from falling through gaps in services,
- reducing the use of residential care
- reducing crime, tenancy breakdown and homelessness
- supporting individuals to maintain their independence in the community.

The model demonstrates that investment in SP services can provide real savings for the Council and its partners in health, probation, and criminal justice.

The biggest area where spending on SP services creates potential savings to other budgets is that of residential care. The CLG model indicates that the £11.9m spent on the SP services covered by the model<sup>27</sup> the Council potentially realises savings of £11.7m. The main client groups where savings to residential care budgets is realisable are mental health, learning disabilities, substance misuse and physical disabilities.

The other key area where spending on SP services creates potential savings to other budgets is crime costs where the model calculates that a saving of £4.7m is realisable. This supports one of the Council's key priority areas, Tackling Crime.

The model is a new and important tool demonstrating where preventative housing related support services can add the most value. The Supporting People Programme in Brent is committed to working with colleagues in Social Care, the PCT, Probation and other partners to refine its use for determining future commissioning priorities as well as joint commissioning arrangements with our partners so that the Supporting People Programme in Brent can continue to play its part in the pattern of services available to people in the borough.

## **11.0 The Supporting People programme in Brent: Continuing to Deliver**

### **Key issues influencing the future direction of the programme**

A number of key issues impact on the direction of the Supporting People programme in Brent and will govern its future, including:

#### **Taking a strategic approach to managing the budget**

The Council has established an objective of making significant financial savings in the next four years across all services areas and to also reduce procurement costs. It is therefore anticipated that the pressure on Supporting People to

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<sup>27</sup> The model does not include some services local to Brent such as START Plus

contribute to the savings targets will continue and become more acute with the future budget settlement for all local authorities and public services.

### **Inclusion of Supporting People funding in the Area Based Grant**

In 2009/10 the ring fence has been removed, and as of 2010/11 the grant will be paid to the Council as part of the Area Based Grant. The careful management of the SP budget in previous years resulted in a surplus carried forward each year, which has enabled the Supporting People Team to commission new services to meet strategic requirements and to take a planned approach to the savings that need to be made. Demand for services continues to be high, with services having been reconfigured or retendered to meet the needs of service users more effectively and make efficiency savings. There will be a continued need to demonstrate both the value and effectiveness of Supporting People services in Brent if the investment in services is to continue. This will be achieved by:

- Ensuring services promote social inclusion and community Integration
- Demonstrating the positive outcomes achieved by services and developing the evidence base for this
- Contributing to reduced re-offending, reduced hospital admissions, and reduced reliance on residential care
- Developing solutions with partners in social care, and health that respond to the pressures of the ageing population on health and adult social care
- Promoting independence by tackling worklessness, and increasing access to employment education and training for vulnerable people
- Contributing to public protection and community safety
- Demonstrating continued value for money
- Using accommodation based resources more effectively by focusing very strongly on accessing appropriate move-on accommodation and commissioning high quality accommodation and flexible support within the community
- Matching the profile of services to future needs
- Focussing on the preventative role of housing related support services

### **Breaking the link between accommodation and support**

The traditional model of housing support equating to accommodation-based support has now changed. Research has demonstrated that accommodation-based services do meet the needs of certain client groups, particularly those with more long-term and enduring needs and those with chaotic lifestyles and rough sleepers. However, many more people can and do benefit from floating support services or assistive technology which are sufficiently flexible to meet and adapt to changing needs and can be delivered to people in their current accommodation. Such services enable service users to retain their independence and have increased control. They can offer a model of support



which can change to fit the service user's individual requirements and is a more cost-effective way to delivering services to a larger number of people. The borough requires services that are flexible and responsive as well as cost-effective if it is to deliver on its preventative agenda and ensure that vulnerable individuals are able to access self-directed support and more personalised services.

### **Achieving Quality Standards and Demonstrating Outcomes**

Supporting People services are assessed annually using the performance management framework as set out in the Quality Assessment Framework (QAF) and the monitoring of performance indicators. Since its inception in 2003 this has concentrated on achieving continuous improvement in services across a range of measures. Overall performance has incrementally increased over time, with more providers now achieving results in the upper quartile. To strengthen this further, any new contract will only be awarded to a provider who is able to achieve at least a Level B award on three out of the five areas of the new QAF. The same approach will apply to the future performance monitoring of services. In addition the Programme will develop an increasingly outcomes based model of commissioning and contract monitoring.

### **Supporting People Programme, Ten Key Priorities**

The key issues outlined above are reflected in the ten key priorities set for the programme. The accompanying action plans in Section 12 detail how we intend to deliver against these priorities.

#### **Strategic Priority 1**

Ensure the delivery of high quality housing support services that support the preventative agendas of the Council and its partners and enable individuals to achieve and sustain independent living

#### **Strategic Priority 2**

Increase move on from supported housing services, to support achievement of LAA target NI141 (percentage of clients who have moved on in a planned way) and to meet shortfalls in accommodation based services through more efficient use of housing resources

#### **Strategic Priority 3**

Develop pathways through Supporting People services to increase independence, social inclusion and the achievement of positive outcomes

#### **Strategic Priority 4**

Review the spread of floating support services across the borough and the fit between generic floating support and specialist floating support services



**Strategic Priority 5**

Increase the available supply of self-contained accommodation for vulnerable people

**Strategic Priority 6**

Facilitate continuous service user involvement in the delivery of high quality housing support services that enable vulnerable people to achieve positive outcomes

**Strategic Priority 7**

Increase choice and control for service users through the implementation of Personalised services

**Strategic Priority 8**

Deliver greater efficiencies by procurement through tender to ensure all purchased Supporting People services provide value for money and meets the Supporting People Programme's commissioning priorities.

**Strategic Priority 9**

Work with partners across sectors to deliver outcome based commissioning and, monitoring of services

**Strategic Priority 10**

Contribute to the delivery of the wider strategic agendas, targets and priorities of Health, Social Care, Housing and Criminal Justice partners

## 12. Supporting People action plan – Delivering Strategic Priorities

Actions	Target date for completion	Lead	Key Partners	Outcome for service users	Resources
<b>Strategic Priority 1: Ensure the delivery of high quality housing support services that support the preventative agendas of the Council and its partners and enable individuals to achieve and sustain independent living</b>					
Use the gap analysis and strategic review results to ensure that the profile of services fits the evidenced need and develop more floating support and services for people with more complex needs	September 2010	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> <li>• Probation</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Work with the Affordable Housing Unit to identify bids for capital development programme and for remodelling of current services	October 2009	SP Team	<ul style="list-style-type: none"> <li>• Affordable Housing Unit</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Capital resources to be identified
Identify potential capital development and remodelling opportunities with SP providers	April 2010 (remodelling)	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Use the needs and gap analysis information to prioritise bids	January 2010	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> <li>• Joint Commissioners</li> <li>• NHS Brent</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources

Set minimum quality standards for services & for all new contracts procured through the tender process	January 2010	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Work with partners in ASC to reduce the use of/need for residential and nursing care and develop Extra Care services and floating support to enable individuals to stay at home for as long as is feasibly possible	On going	SP Team	<ul style="list-style-type: none"> <li>• ASC</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources
Strategic Priority 2: Increase move on from supported housing services, to support achievement of LAA target NI 141 (percentage of clients who have moved in a planned way) and to meet the shortfalls in accommodation based services through more efficient use of housing resources					
Agree individual client group move on targets and include in contractual and monitoring requirements	September 2009	SP Team	<ul style="list-style-type: none"> <li>• START Plus</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Monitor provider move on performance and tackle under-performance	September 2009	SP Team	<ul style="list-style-type: none"> <li>• START Plus</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources
Report on move on performance to the Supporting People Commissioning Body, Core Strategy Group	September 2009	SP Team	<ul style="list-style-type: none"> <li>• START Plus</li> <li>• Providers</li> <li>•</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources

<b>Strategic Priority 3: Develop pathways through Supporting People services to increase independence, social inclusion and achievement of positive outcomes</b>					
Map pathways in to and out of Supporting People services	September 2009	SP Team	<ul style="list-style-type: none"> <li>• START Plus</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness	Within existing resources
Evidence how services support the preventative agendas of partners and demonstrate positive outcomes for service users	October 2009	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> <li>• Service Users</li> </ul>	Increased choice and prevention of homelessness and	Within existing resources
Monitor service user outcomes across a range of different areas	April 2010	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> <li>• Service Users</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
<b>Strategic Priority 4: Review the spread of floating support services across the borough and the fit between generic floating support and specialist floating support services</b>					
Use strategic reviews to identify potential for remodelling of the spread of floating support	April 2010	SP Team	<ul style="list-style-type: none"> <li>• START Plus</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour and personalisation of services	Within existing resources
Develop pathways between generic and specialist floating support services to maximise the quality and quantity of support available	April 2010	SP team	<ul style="list-style-type: none"> <li>• Start Plus</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour and personalisation of services	Within existing resources
Evidence how services support the preventative agendas of partners	April 2010	SP Team	<ul style="list-style-type: none"> <li>• CB members</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and	Within existing resources

and demonstrate positive outcomes for service users				hospital readmissions	
<b>Strategic Priority 5: Increase the available supply of self-contained supported accommodation</b>					
Remodel services to improve strategic relevance and improve value for money	September 2010	SP Team	<ul style="list-style-type: none"> <li>• Providers</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Use strategic reviews to identify potential for self-containment and submit capital bids as required	December 2009	SP Team	<ul style="list-style-type: none"> <li>• Affordable Housing Unit</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Capital resources to be identified
<b>Strategic Priority 6: Facilitate continuous service user involvement in the delivery of high quality housing support services that enable vulnerable people to achieve positive outcomes</b>					
Support service user involvement in strategic reviews and other delivery plans, including procurements	Ongoing	SP Team	providers service users and service user representatives	Increased service user led services	Within existing resources
Maintain service user training initiatives in partnership with west London SP authorities	Ongoing	SP Team	Providers Service users west London SP authorities	Increased service user led services	Within existing resources
Develop service user involvement in quality monitoring of services	April 2010	SP Team	Providers Service Users	Increased service user led services Increased service user perspective on the quality of services	Within existing resources

Strategic Priority 7: Increase choice and control for service users through implementing Personalised services					
Work with ASC to develop new service models which increase service user choice and control	September 2010	SP Team	<ul style="list-style-type: none"> <li>• ASC</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Strategic Priority 8: Deliver greater efficiencies by procurement through tender to deliver Supporting People programme commissioning priorities					
Procurement through tender to achieve efficiencies	September 2011	SP Team	<ul style="list-style-type: none"> <li>• Procurement</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness	Within existing resources
Set efficiency targets & achieve these through tendering and re-negotiation of contracts	October 2009	SP Team	<ul style="list-style-type: none"> <li>• Procurement</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources
Review unit costs and per hour costs in contract negotiations to achieve efficiencies wherever possible	Ongoing	SP Team	<ul style="list-style-type: none"> <li>• Procurement</li> <li>• Providers</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources
Strategic Priority 9: Work with partners across sectors to deliver outcome based commissioning and monitoring of services					
Identify partner priorities within Supporting People work streams	September 2011	SP Team	<ul style="list-style-type: none"> <li>• Probation</li> <li>• NHS Brent</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Align commissioning plans and intentions where possible to deliver improvements and efficiencies	September 2011	SP Team	<ul style="list-style-type: none"> <li>• Probation</li> <li>• NHS Brent</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources

Jointly commission identified priority services with jointly agreed outcome targets	September 2011	SP Team	<ul style="list-style-type: none"> <li>• Probation</li> <li>• NHS Brent</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources
Evaluate achievement of outcome targets and use results to inform future commissioning priorities	September 2012	SP Team	<ul style="list-style-type: none"> <li>• Probation</li> <li>• NHS Brent</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and hospital readmissions	Within existing resources
<b>Strategic Priority 10: Contribute to the delivery of wider strategic agendas, targets and priorities of Health, Social Care, Housing and Criminal Justice partners</b>					
Identify targets that Supporting People contribute to	October 2009	SP Team	<ul style="list-style-type: none"> <li>• Probation</li> <li>• NHS Brent</li> <li>• Joint Commissioners</li> </ul>	Increased choice and prevention of homelessness and anti social behaviour	Within existing resources
Seek opportunities for joint working, including joint commissioning and procurement	October 2009	SP Team	<ul style="list-style-type: none"> <li>• Joint Commissioners</li> </ul>	Prevention of homelessness	Within existing resources
Report on contributions to achievement of wider strategic agendas with partners	April 2010	SP Team	<ul style="list-style-type: none"> <li>• CB/CSG</li> <li>• Joint Commissioners</li> </ul>	Increased prevention of homelessness & hospital readmissions	Within existing resources

## **APPENDIX 1: Results of the Stakeholder and Service User consultation**

Key issues arising from the consultation exercises were:

Stakeholders told us:

- There are sometimes competing priorities between organisation which can affect how work is taken forward
- Supporting People has been a positive initiative and has delivered change across many areas of the Council through joined-up working
- It is not always easy to find out what work internal Council departments are doing in certain subject areas, such as on the Local Area Agreement
- Supporting People and the Council cannot provide the solution to all housing needs, and organisations need to look internally to develop their own solutions, such as concerning move on and re-housing
- Joint commissioning has produced many positive examples of improving service delivery, adding value and achieving efficiencies
- More innovation is needed to tackle issues, with learning from other areas
- Some issues require a Corporate response to produce solutions, such as people with recourse to public funds
- Alignment of planning and commissioning cycles is needed between stakeholder organisations to ensure synergy and joint responsibility
- Particular gaps in services have been identified relating to some Eastern European clients from accession states (A8 nationals) who have no access to public funds but are vulnerable and have support needs.

Service Users told us:

- Some service users were happy with the services provided and found staff to be helpful, whilst others felt there were too many rules
- Move on was a key issue for service users and many expressed concerns about the length of time it took to bid successfully on Locata
- A number of service users expressed a wish to move out of shared housing into permanent independent accommodation
- Some service users agreed that services has improved their quality of life by creating some stability and helping them work towards long-term employment and other goals
- Getting information is not always easy and sometimes it is difficult to find out about what services are available



- Particular support had been given around tackling debts and increasing confidence, with a particular focus on getting people into education and training
- Very positive feedback about the BHUG Peer Consultant training course
- How they had been involved in choosing providers for new services

Service providers told us:

- They had concerns about the ring fence coming off Supporting People funding and the impact on future services
- Move-on accommodation is essential particularly for individuals moving on from higher support provision where there is much demand for services
- Of positive experiences from partnership working and service outcomes
- They would like more information about the impact of personalisation
- About concerns of how service quality will be maintained after the ring fence is removed from the Supporting People funding
- Greater liaison and co-ordination is required between boroughs in order that service users can move on as appropriate, particularly for women escaping violence or offenders
- Prevention of homelessness is a key priority for SP service providers
- Specific services for women are lacking, particularly for those with children
- Of the need for clearer, more flexible pathways between services, including access to move on

Wherever possible we have taken on board the feedback and suggestions and incorporated it into the strategy and action plan.