

Annex 1

York Supported Housing Strategy 2014-2019

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Introduction

Why we need a supported housing strategy

Safe, warm, secure housing is central to a person's health and well-being, to their ability to enjoy and contribute to community life, and the ability to participate in work, education and training. Being unable to access appropriate housing can contribute towards isolation, a loss of independence and in some cases can lead to a need for residential care, to hospital admissions or to homelessness.

In every community there are some people who require more tailored housing, with a degree of support attached, whether this is on a temporary or permanent basis. They may be vulnerable due to old age or ill health, have a long standing illness or disability, or lack the skills to manage a tenancy, and need more support to maintain their independence.

For some people, supported housing may be their last step on the housing ladder, as they grow older and look for a home which will be able to meet their changing needs. For others, supported housing may be a step along the way to fully independent living, for example for those recovering after a period of mental ill-health, or can form a vital part of a planned route into mainstream housing as part of the homelessness route. Through helping people to increase or maintain their independence, supported housing can also be a cost effective way of supporting people, by reducing their future need for more intensive support such as residential care.

We must target resources to have the greatest impact. Therefore it is important that we are able to prioritise need in order determine where to direct investment in supported housing. The priorities identified in this strategy will be used to inform commissioning decisions about future supported housing developments.

What we mean by supported housing

Supported housing is defined as housing designed to meet specific needs and in which there is some level of on-site support provided as part of the accommodation offer. Within this there are many models of provision and tenure type, however this does not include residential accommodation, which is part of care provision. For the purposes of this strategy, this does not include mainstream housing where floating or visiting support is provided, however this is a vital part of the wider spectrum of support.

The support element is dependent on health and social care budgets and allocation of resources, this is particularly relevant in the development of new schemes.

The types of needs this strategy covers

There are many different types of households or communities of people who benefit from supported housing. For the purposes of this strategy, these have been categorised into the following key groups, based around existing services:

- Older people (55 and over)
- People with mental ill-health

- People with learning disabilities
- Young people (aged between 16-25)
- Offenders / ex offenders
- People involved in substance misuse (Drugs/alcohol etc)
- People who are homeless or threatened with homelessness

We recognise that there is often overlap between these groups and lots of diversity within them. It is of central importance to ensure that an individual is able to access the right support to meet their personal needs, regardless of where they live. This is particularly significant where the person has multiple or complex needs.

However, we have used these broad groupings to help build a picture of supported housing provision in the city, the needs it predominantly seeks to meet, and to identify where there are gaps in provision. These groupings fit with the ‘communities of identity’ highlighted in York Equality Scheme 2012-16.

How Supported Housing is funded

There are additional costs relating to supported housing, compared with general needs housing – these include the cost of staffing, and shared facilities and utilities. Part or all of this cost may be covered by a service charge to residents, and elements of this may be eligible for support through Housing Benefit.

The support element of supported housing may also be funded through the Early Intervention and Prevention Commissioning team (previously Supporting People team), which commissions housing related support services. This funding has been reduced, following national policy changes and local budget reviews.

If there is more intensive care or support provided on site through health or social care services then there are further costs attached to this. This is determined through eligibility checks, for example the Fair Access to Care Services (FACS) criteria.

While this strategy is primarily concerned with the housing element of supported housing provision, this cannot be considered in isolation from the support element. The support element is dependent on health and social care budgets and allocation of resources, this is particularly relevant in the development, commissioning and monitoring of new schemes.

Our overarching vision for supported housing in York

Our overarching vision is to ensure the right supported housing options are available at the right time and the right place for those that need them. Through this, we will help to increase or maintain independence, and to help to prevent future reliance on services.

Supported Housing is part of a wider network of support services including visiting care and support provided in general needs accommodation, education, training, volunteering, and employment support, advice and

handyperson services and health related support. For many people it is more appropriate to their needs and wishes for them to be supported to access or to remain in general needs accommodation, or to return to this after a after a period of more intensive support in Supported Housing. Therefore it is vital to ensure that these services are in place to enable a seamless transition where this occurs.

Our vision is both informed by and directly contributes to wider strategic aims and objectives identified by City of York Council and the York Health and Wellbeing Board:

- City of York Council strategic priorities:
 - Building strong communities
 - Protecting vulnerable people
- City of York Council adult social care plan
 - Enhancing the quality of life for people with care and support needs
 - Delaying and reducing the need for care and support
 - Ensuring that people have a positive experience of care and support
 - Safeguarding people whose circumstances make them vulnerable and protecting them from avoidable harm
- York Health and Wellbeing strategy:
 - Reduce inequalities in health and wellbeing

- Meeting the challenges of an aging population
- Improving mental health and intervening early
- Creating a financially sustainable health and wellbeing system

- Single Equalities Scheme:

- Design our policies and practices to be inclusive from the start
- Provide services that are flexible enough to meet the needs of our different communities
- Work with our partners to support and inspire our communities to continue to ensure that York is a fair, inclusive and a welcoming city

Links to other strategies and plans

There is increasing recognition of the need for different agencies to work more effectively together around joint outcomes, and in particular strong links between health, social care and housing to meet the holistic needs of residents. Early intervention and prevention is at the core of our approach as it serves to reduce the overall need for services in the longer term.

This strategy therefore sits alongside a range of other local strategies and plans that seek to enhance the health, care and wellbeing of households needing support services to achieve and maintain independent living. These include;

- York Older People's Housing Strategy
- York Health and Wellbeing Strategy

- Long term commissioning strategy for adult social care
- York Valuing People Partnership action plan
- York Homelessness strategy
- Children and Young People's Plan

We have used a wide range of data and evidence to help develop this strategy:

- Joint Strategic Needs Assessment 2012 (health and wellbeing)
- Strategic Housing Market Assessment 2011
- Older Person's Housing Market Assessment
- Analysis of Housing and Support for Adults with Learning Disabilities 2011-17
- Homelessness business intelligence data
- City of York Council Housing Revenue Account Asset Plan

Consultation:

Informal consultation with service providers and stakeholders took place from September 2012 – June 2013. A formal consultation event was held on 25th July 2013. Relevant stakeholders and service providers were invited to attend, these included:

- Private Registered Providers (Housing associations)
- Local councillors
- Charities and non-statutory agencies involved in the provision of housing or housing related advice/support
- Probation service

- Police
- Health partners

Through consultation the highest priority across all 7 key groups was clearly identified as a need for a supported housing option for those with mental-ill health in conjunction with other issues such as substance misuse, long term homelessness or high risk offending.

Older people

Overview

Like many places, York has an ageing population.¹ Over 75% of older households are owner-occupiers², and specialist accommodation is not always the preferred option for older people any more.

However, as the number of older people grows, especially those aged 85 and over, so too does the number of people who have a disability or other vulnerability that makes it difficult for them to remain independent and safe in their current home. There is also an increase in the number of older people experiencing mental health conditions, such as depression, anxiety and dementia that can be better met within a supported housing environment. Good quality supported housing can help to maintain independence for some people, and prevent or delay the need for 24 hour residential care.³

Currently in York this is a long term option for older people, however Supported Housing can also be a short term option to help older people to regain skills and confidence, which can then lead to a return home. This is usually used to help an older person to make a 'step down' after a stay in hospital, or a 'step up' for someone who may be struggling in their own home (e.g. after an illness or bereavement). This type of short

¹ 2011 census contains detailed information on changes in age bands.

² Older person's accommodation and support needs 2010

³ Assessing the mental health needs of older people, Social Care Institute of Excellence 2001 (updated 2006)

term supported accommodation follows the Re-ablement model, as a targeted intervention to help prevent long term need for increased care and support.

The Older People's Housing Strategy 2011-15 said:

- Investment in Advice and information.
- A shift from residential care to support at home.
- Community based extra care – especially to meet more specific needs.
- A need for more mixed tenure developments.

As GP's take over more responsibility for commissioning services in their local area this will impact on the way services are delivered in future. In addition, changes in the Fair Access to Care criteria mean that care will only be available for those with 'substantial or critical' needs. A key challenge is to co-ordinate our response to the needs of older people, and ensure these are prioritised and met in the most appropriate way.

The charging cap introduced following the Dilnot Commission will mean that the Local Authority has to cover the cost of residential care above the level of the cap in the majority of cases. Therefore it is particularly important that there are suitable alternative housing options to meet the need of older people.

Our vision

Our vision is to support older people to stay in their own homes for as long as possible. This includes providing the

right advice and information to help people to make informed choices.

We will ensure that the supported housing we provide for older people is able to meet the changing expectations and needs of older people, in particular the rise in dementia, and reduce the need for 24 hour residential care.

Needs analysis

There is little awareness about housing options for older people. Although guides and information sites exist, terms can be confusing and there's little support to consider options and make plans.⁴

Older people supported housing schemes:

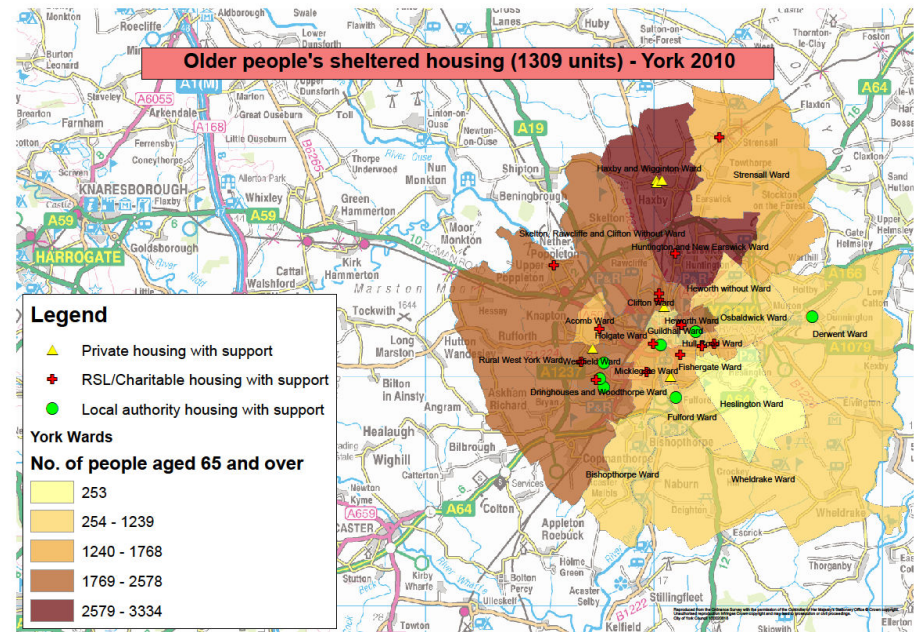
- The council manages seven sheltered housing schemes (208 units), and a further four sheltered with extra care schemes (156 units).
- There are 25⁵ commissioned sheltered housing schemes in the Registered Social Landlord/Charitable sector (697 units) and 5 sheltered with extra care/frail elderly schemes (302 units)
- There are of 9⁶ private developments(414 units).

There is no centrally recorded information about quality or stock condition of these schemes.

⁴ Older person's housing strategy

⁵ 21 are rented, 4 are shared ownership schemes

⁶ 8 are owner occupied, 1 is shared ownership



The council has undertaken an EPH review, which will see 3 purpose built facilities replacing the existing, outdated homes, this will include a community village for older people⁷. However the provision of beds for customers with lower care needs will cease within council run homes. This may lead to an increased demand for sheltered housing or sheltered with extra care for this group.

Nationally, dementia is on the increase. It is estimated that dementia will affect an additional 700 people in York over the next 15 years, so that an additional 105 people could require

⁷ The community village for older people will include 25% affordable properties

services.⁸ It is clear that all future development of supported housing for older people must plan for the increased demand for housing that is appropriate for people with dementia.

Younger people with long term conditions or disabilities are currently largely supported in their own homes, with a tailored package of adaptations and care/support services. Some younger people with long term conditions and disabilities are currently housed in sheltered housing for older people, where this seems to be the most appropriate way of meeting their needs.

Our priorities

Enable older people to remain independent at home for as long as possible and ensure provision of adequate supported housing when extra care is needed		
Key Indicators		
No. of older people receiving 'level 2' housing advice		
No. of people entering residential care		
No. of older people supported to live independently at home		
Priorities	Target date:	Lead
Increase advice/ information on housing and support options for older people through creation of a dedicated post.	October 2013	Homeless accommodation and development manager
Complete a stock condition survey of sheltered and 'extra care' accommodation and develop modernisation programme based on findings	Report with recommendations by April 2014	Head of building services / Supported Housing Manager
Review the model for sheltered with extra care schemes to ensure these are sustainable and will meet future demand	Report with recommendations by December 2013	Commissioning and contracts manager
Develop a mixed tenure community care village for older people	Completion in 2016	Assistant Director, Adult Commissioning, Modernisation and Provision
Explore the possibility (funding and location) for 're-ablement flats' for older people	September 2014	Public Health team

⁸ Joint strategic needs assessment 2012

Mental ill health

Overview

One in four people experience mental ill-health in any given year⁹. For the purposes of this strategy, mental ill-health includes a range of conditions, including those such as personality disorders, or mental health which is also accompanied by substance misuse.

This may be a temporary condition or one that can be or can effectively managed through treatment. However, for some people mental ill-health impacts on their ability to work, sustain accommodation or maintain relationships. About 400 people in the city have severe or enduring mental health conditions and need more intensive support.¹⁰

Mental ill-health is often not experienced in isolation, nationally:

- 43% of those accessing homeless services have a mental health condition
- An estimated 69% of rough sleepers have both a mental health and a substance misuse problem.
- 72% of male and 70% of female prisoners also have a mental health issue

⁹ NHS Choices, 2012

¹⁰ Joint Strategic Needs Assessment, 2012

- 22-44% of adult psychiatric in-patients in England also have a substance misuse problem¹¹

Stable and appropriate housing is vital to allow people to address and receive treatment/support for mental ill-health. This promotes individual outcomes, and reduces impact on communities and on interventions from health, social work, and housing teams. For most people general needs housing is the best place to live, with visiting care or support tailored to their needs. However for some people supported housing is a 'step down' from residential or hospital based care, or can be a temporary 'step up' for people struggling to manage in their existing home. A small minority of people may always require some level of supported housing.

There is a clear driver for a co-ordinated approach between the council and health partners and for joint commissioning on supported housing for people with health conditions.

Our vision

Our vision for York is that those with mental health support needs should have these met through mainstream housing wherever possible, rather than in residential or institutional settings.

Supported housing can be key to achieving this, by providing a more intensively supported environment as part of the route back into mainstream housing. Close links with community

¹¹ Key facts and trends in mental health (mental health network NHS confederation)

mental health teams and with other involved professionals are vital. (See appendix x report on mental health supported accommodation)

Needs analysis

Specialist interventions are provided by a range of health based community teams, with plans to increase ease of access to services through the introduction of a single access point. There is also a floating support service commissioned through the Council, and a range of support including living skill, therapeutic sessions, and work related support provided through York and District Mind.

A range of supported housing is available and is accessed via the mental health accommodation panel:

- 14 units with 24 hour support provided through Leeds and York NHS trust
- 13 units of short term 24 hour supported housing¹² through the Council.
- 31 units of supported housing through York Housing Association. These offer a range of medium and long term accommodation, across a range of shared and self contained.

¹² 10 are available for up to 2 years, 2 are crisis beds, and 1 is a short stay/respite bed

- 5 units of medium term low level supported accommodation through Richmond Fellowship

There are a relatively small number of people with multiple needs and exclusions. These may include mental ill-health, substance misuse, homelessness, long term homelessness or offending. These individuals can struggle access services, as it is not clear which is the 'primary presenting need' or they fail to fit service criteria due to substance misuse, or chaotic lifestyle.

These individuals can represent a disproportionate cost to services and the community, as they are more likely to become 'revolving door' admissions as the situation breaks down in one place, and they are forced to move on. They can remain stuck in the homeless resettlement route, as they are unable to achieve resettlement outcomes.

Further partnership working across housing, health and social care is required to provide targeted support to these complex individuals. The MEAM (Making Every Adult Matter) approach¹³ suggests a toolkit for use at local level, in building partnerships to deliver co-ordinated interventions to those with multiple/complex needs and exclusions.

¹³ MEAM: Making Every Adult Matter is a coalition of Clinks, DrugScope, Homeless Link and Mind, formed to influence policy and services for adults facing multiple needs and exclusions.

Our Priorities:

Enable those with mental health support needs to have these needs met through mainstream housing wherever possible and ensure the provision of suitable supported housing as a route back into mainstream accommodation for those needing extra support in the short to medium term		
Key Indicators		
Delivery of minimum 10 supported housing placements for multiple needs		
no. of bed days on acute ward		
no. of people with mental ill-health in residential placements		
Priorities	Target date:	Lead
Develop a supported housing model for those with multiple needs/exclusions or high risk behaviour (including substance misuse, and high risk offending behaviour)	New model in place by April 2015	Supported Housing Manager
Develop the evidence base for unmet needs in order to inform future service planning	Report with recommendations by April 2014	Through Joint strategic needs assessment
Improve links with mental health teams. Develop a joint approach to working with those with very complex needs (i.e. Through a MEAM approach)	Joint working protocol in place by December 2014	tbc
Review individuals in residential accommodation, to promote return into community settings.	Yearly reviews - ongoing	group manager responsible for Adult Mental Health and Mental Capacity
Develop a 'mental health charter' for York to ensure a consistent approach from all services.	Sept 2014	Mental health provider forum

Learning disabilities

Overview

Those with learning disabilities represent an extremely diverse group in terms of their physical and social support needs, as well as their family circumstances. For the purpose of this strategy 'learning disabilities' is distinct from 'learning difficulties' which has a wider application in education.

There is not a 'one size fits all' housing solution for people with learning disabilities, and options include mainstream rented housing, living with family, extra care or supported housing schemes, adult family placements, low cost home ownership¹⁴, home ownership funded through family investments, etc. Supported housing is an option that can be right for some people, depending on their circumstances.

Our vision

The vision for York is for people with learning disabilities to be able to access mainstream services as much as possible, with specialist services being a last resort.

Our primary goal, consistent with those set out in the council's adult social care plan and Valuing People agenda, is to support people in the most appropriate setting to promote

¹⁴ Schemes such as HOLD (Home Ownership for people with long term disabilities) or homebuy help applicants with long term disabilities including learning disabilities who want to part purchase / part rent a property (called 'shared ownership') allowing them to choose their own home and giving them long term security

independence and to reduce the need for care and support wherever possible.

"All people with learning disabilities and their families should have the opportunity to make an informed choice about where, and with whom, they live."¹⁵

People with Learning Disabilities are supported to access the most appropriate housing to meet their needs. Each individual is assessed based on their current situation, and supported to make their own choices about where they want to live, in line with their circumstances and need. If eligible, they will also receive care and support to enable them to live independently.

The majority of supported housing tenancies for people with learning disabilities are long term tenancies. However, some people benefit from short or medium-term supported housing, this is especially relevant for people moving out of the family home, or out of a residential setting for the first time.

Needs analysis

York is well ahead of the national average in supporting people with learning disabilities to live in their own tenancy. York has a higher percentage of people with profound and multiple disability than other similar areas. This is largely due to a previous long stay hospital in the area being closed, and

¹⁵ Valuing People Now, 2009

people choosing to stay in the York area.¹⁶ In response a number of supported housing and extra care options have been developed.

In York, of those that are known to social services:

- 29.1% of people with a learning disability live in the family home
- 18% live in residential care, either in York or out of area placements
- 48.1% currently have their own tenancy (compared to only 15% nationally)¹⁷

There are a range of other support services for people with learning disabilities. These include a floating support service commissioned through the council, and supported working placements which help people to develop work based skills.

People with learning disabilities are living longer as a result of advances in healthcare and better support for people with learning disabilities. However, as people live longer, dementia (especially early onset dementia) is becoming more of an issue.

Currently there is no specialist provision for people with learning disabilities *and* dementia in the York area. Good practice suggests that people with dementia should continue to be supported in their existing home wherever possible.

¹⁶ York Joint Strategic Needs Assessment, 2010

¹⁷ An Analysis of Housing and Support for Adults with Learning Disabilities in York
2011 - 2017

People with autism may have learning disabilities which can affect all aspects of their life. Based on demographic projections, and analysis of current students at Applefields¹⁸ there is expected to be an increase of people on the autism spectrum in York.

Currently individuals with autism are successfully supported in a variety of supported living settings in York. Some specialist supported living settings for individuals who have more complex needs have been developed, although some individuals are currently supported out of area either at college type settings or specialist residential settings.

The supported housing options described above have been developed for people in York with a learning disability. This is a specific definition when applied in terms of access to support and services, and can be an issue in particular for people with Autistic Spectrum Disorder, or learning *difficulties* who often do not fit the criteria for services specifically for those with learning disabilities.

These individuals can struggle to cope and, can be very vulnerable, in mainstream housing, and especially so in hostel environments, however they do not qualify for supported housing for people with learning disabilities, and may struggle to access other supported housing options, e.g. those for older people. There is a need to find better ways of supporting these individuals within existing supported housing, or to provide new solutions to meet their needs.

¹⁸ Secondary school for pupils with special educational needs

Our priorities

Enable people with learning disabilities to access mainstream services and reduce the need for care and support with specialist services whenever possible		
Key Indicators		
No. of people with LD in their own tenancy		
No. of out of area placements		
No. of people with LD living in residential care		
Priorities	Target date:	Lead
Continue to conduct regular reviews with people placed out of area and support their return where individuals chose to do so	100% annual reviews	Locality manager - Adult Learning Disabilities Team
Act on findings from the review of supported living services	Report with recommendations by April 2014	Locality manager - Adult Learning Disabilities Team / Contracts and commissioning team
Ensure that information and advice about housing options is available and accessible through the provision of dedicated housing options advice (Housing Options guide and single access worker)	100% satisfaction with information and advice services by Dec 2014	Homeless accommodation and development manager
Ensure close links between social care commissioners and housing staff to ensure a more joined up approach to housing options for people who do not meet the criteria for specific learning disability services.	Quarterly meetings - ongoing	Supported Housing Manager / Commissioning Manager
To improve information and advice for people with Autistic Spectrum Disorder through the creation of an autism strategy	Autism strategy completed by December 2013	Commissioning Manager

Young People

Overview

For the purposes of this document, young people are defined as 16-25 years old. Many people of this age are able to stay at home until they are earning enough to move out on their own. Some, however, are not able to stay at home for a variety of reasons including family or relationship breakdown, a move to a smaller house or a change in the family make up. High market rents and a shortage of affordable homes put them at particular disadvantage in York. This is especially true in times of austerity when there is greater competition for jobs.

Nearly half of male remand young offenders and 42 per cent of female sentenced young offenders have experienced homelessness.

Our vision

Our vision is to ensure young people are able to make informed choices about their housing options, are able to plan their housing moves early and are fully equipped with the knowledge and skills required to sustain independent living.

We can do this by supporting young people's housing pathways through a process of early intervention and prevention to ensure young people avoid a crisis that could have devastating impacts on their long term health and wellbeing.

Supported Housing for young people facing housing crisis can be an effective way to provide much needed stability and develop skills to maintain a general needs tenancy, preventing future homelessness. This includes support to access education training, employment and other services.

Needs analysis

Connexions provide young people with a range of advice and support including sexual health, counselling, training, employment, housing and benefits. Timely access to the right advice and support is vital in preventing crisis and improving outcomes for young people.

There is a range of options for supported housing for young people in York, including tier 1 and tier 2 accommodation¹⁹:

- Nightstop provides emergency housing for age 16-25, standard stay of up to 3 nights family placement, capacity varies, but between 1-2 beds per night
- Howe Hill for young people (HH4YP) has recently been refurbished, and is now a tier one hostel staffed 24 hours a day, offering 21 units for age 16-21, although the majority of residents are under 18. There is an additional emergency bed and crash-pad available for those who become homeless at short notice.

¹⁹ Tier 1 accommodation is entry level accommodation with more intensive support (often 24 hours). Tier 2 accommodation is move on or resettlement accommodation, usually accessed on a referral basis after a period of time in tier 1 accommodation. This allows people a 'step down' towards independent accommodation.

- Southlands Road (Foundation) offers five tier 2 units for age 16-25 for up to two years with 24 hour support.
- Scarcroft Road (York Housing Association) provides nine tier 2 units for 16-19 year olds.
- SASH (Safe and Sound Homes): supported lodging in a family placement for up to two years, there are currently 15 hosts available. This provides a family environment for the young person, and is more appropriate than hostel or supported housing for some young people.
- There are up to 12 places available in assured short hold tenancy managed by YHA on behalf of CYC for young people who need extra support to move from a hostel environment to an independent tenancy.

There is a recognised shortfall in tier 2 provision. This can result in young people becoming 'stuck' in a hostel environment, and have a negative impact on their wider outcomes. This has a knock on effect on the number of tier one places available for young people leading to high use of crashpad²⁰ beds.

Young women who are pregnant or have young children usually cannot be accommodated within existing supported

accommodation. They are housed in mainstream accommodation, missing out on a supported environment.

The Youth Offending Team provide support to young people aged 15-17, however young people who display complex offending behaviour can struggle to be accommodated in supported housing, and are likely to have different needs to older offenders. In particular, young people who are seen as presenting a high risk may be referred to tier 1 homeless accommodation which is not targeted for their needs.

Since November 2012 local authorities have a duty to provide accommodation for young people held on remand. December 2012-April 2013 this affected 4 young people, who were placed into secure children's homes or foster placements out of area.

Young people with a learning *difficulty* can struggle in supported housing. They often do not meet the criteria for access to support and housing services for people with learning *disabilities*, but can be extremely vulnerable within mainstream services. These young people are likely to need some level of on-going support to maintain accommodation, and can find it difficult to demonstrate that they are progressing through the re-settlement route. Young people leaving care may have very complex support needs, which are difficult to meet in a large scheme.

²⁰ Emergency bed spaces used to prevent young people from rough sleeping as part of the 'no second night out' protocol.

Our priorities

Enable young people to make timely and informed choices about their housing options and ensure they are equipped with the knowledge and skills required to sustain independent living		
Key Indicators		
No. of young people accepted as homeless		
No. of young people accepted as homeless		
No. of young people placed into temporary accommodation		
Priorities	Target date:	Lead
Ensure information and advice is available to young people and their families at an early stage to enable planned housing moved and to ensure joined up support.	ongoing	Head of Services Resources (children's services) / Homeless accommodation and development manager
Develop appropriate supported accommodation for young pregnant women/single parents	by April 2014	Commissioning Manager - Early Interventions & Prevention Manager
Develop further tier two accommodation to allow young people to have a 'stepping stone' towards fully independent accommodation	April 2014	Commissioning Manager - Early Interventions & Prevention Manager
Explore options for further supported accommodation for young people held on remand, and complex care leavers	April 2015	Head of Services Resources (children's services)

Offenders and ex-offenders

Overview

For the purposes of this document, the term offenders is used to describe those who have a history of criminal offences, such as repeat offending or offending which poses a high risk in terms of community safety.

Criminal offending can be linked to many other social issues, such as theft to fund an addiction, or crimes committed through lack of skills, education or training to gain legal paid employment. Offending behaviour can become part of a lifestyle, in which the majority of an individual's peers are also involved in criminal activity.

A 2012 screening of the caseload held by the York and North Yorkshire Probation Trust indicates that:

- 86% had a significant mental health problem (compared to 16.5% of general population)
- Mental health problems were linked to offending behaviour for 49%
- Alcohol misuse was linked to the offending behaviour for 46%
- Almost half of offenders with a mental health problem also had a problem with alcohol misuse, and almost 30% misused drugs.²¹

Many offenders are either homeless or living in precarious accommodation, and the majority of those leaving prison will have no secure accommodation to return to. Homelessness is strongly linked with criminal behaviour, and evidence shows

²¹ Joint Strategic Needs Assessment 2012

that access to appropriate supported housing can contribute to a crime prevention agenda by helping to tackle the issues linked with offending.

54% of offenders re-offend within 1 year of release, 68% within 2 years of release.

*In 2011 44 per cent of offenders sentenced had 15 or more previous convictions*²²

*35% of young offenders re-offend*²³

*It costs approximately £35,000-£45,000 per year per offender in a closed prison.*²⁴

Our vision

Our vision is to ensure that we have the right level of supported housing to provide a stable environment and support in order to reduce re-offending and increase community safety.

While offending must not be seen as a route into social housing, supported housing is one of the tools for promoting community safety, by helping people to tackle the issues which underlie their offending behaviour, and to get back in to training or employment, and to participate actively in the community.

²² ministry of Justice: Prisoners' criminal backgrounds and proven re-offending after release: results from the Surveying Prisoner Crime Reduction (SPCR) survey

²³ <http://www.justice.gov.uk/statistics/reoffending/proven-re-offending> (13.03.13)

²⁴ Costs per place and costs per prisoner by individual prison National Offender Management Service Annual Report and Accounts 2010-11: Management Information Addendum Ministry of Justice Information Release
Published 27 October 2011 1

Needs analysis

There is currently some supported accommodation for offenders in York.

YACRO²⁵ provide 24 hour tier ²⁶1 supported accommodation for 14 people, with plans to expand this provision in 2013, as well as a further 26 tier 2 supported housing placements. The service works with a wide range of offenders, including those who have committed violent or sexual crimes, there is high demand for this accommodation.

SouthView is an Approved Premise providing twelve spaces for high risk offenders released from custody. Access is through the probation service only.²⁷

Foundation: Provide short term low level supported accommodation for 3 offenders with plans to develop a further two places.

Through the Gate (Foundation) provide housing related advice and support relating to offenders prior to release. The service primarily works with men over 18, and aims to prevent homelessness on release.

²⁵ York Association for the Care and Resettlement of Offenders

²⁶ Tier 1 accommodation is entry level accommodation with more intensive support (often 24 hours). Tier 2 accommodation is move on or resettlement accommodation, usually accessed on a referral basis after a period of time in tier 1 accommodation. This allows people a 'step down' towards independent accommodation.

²⁷ Approved premises provide controlled accommodation for offenders under the supervision of the Probation Service. They provide a 24 hour supervised environment to help resettle offenders back into the community, to manage risk, and to ensure that bail or licence conditions are adhered to.

Ex-offenders can struggle to find work, as a result of their offending history, and this in turn reduces their ability to reintegrate and contribute towards the community. Therefore support which helps ex-offenders to access work or develop work related skills, is particularly important in reducing re-offending as well as improving individual life outcomes. It is also especially important that people are able to access floating support in general needs accommodation, in order to support transition.

It can be difficult to place some offenders through the social housing register when they are ready to move on from supported housing, due to risk issues that restrict the areas where they can be housed (how close it is to schools, pubs etc).

There is currently no supported housing specifically for young people with a history of offending, who usually have a different set of needs to older offenders. Helping young people to break the pattern of re-offending, and to achieve positive life outcomes, is a key part of a prevention agenda. There is also a need for ongoing support for those with entrenched and problematic behaviour related to offending.

Government proposals to introduce a system of 'payments by results' and privatisation in the probation service which will have a significant impact on the post-release package for offenders, however the full implications of this are not yet clear.

Our priorities

Ensure the right level of supported housing to reduce re-offending and provide a stable route to independent living		
Key Indicators		
Proportion of offenders that re-offend within one year of release		
Proportion of young offenders that re-offend		
No. of offenders presenting as homeless on release		
Priorities	Target date:	Lead
Ensure timely and accessible housing information and advice to offenders before and on release from prison to ensure planned housing moves	ongoing	Commissioning Manager - Early Interventions & Prevention
Increase partnership working between housing providers and probation services regarding risk	Revised protocols in place by Sept 2014	Supported Housing Manager
Explore options for long term accommodation with support for ex offenders especially where there are complex issues or high risk of re-offending	Report produced by Dec 2014	Commissioning Manager - Early Interventions & Prevention
Explore options for supported accommodation specifically for younger offender (under 25) leavers	Report produced by Dec 2014	Commissioning Manager - Early Interventions & Prevention

Substance Misuse

Overview

About a third of the population admit to taking drugs at some stage in their lives, and about a quarter of young adults say that they have used drugs in the last year, however few people will develop a serious problem.

Problematic drug or alcohol use is often related to other issues, such as lack of stable housing, mental ill-health, or relationship issues. Stable accommodation is critical to being able to address the reasons behind substance misuse, to enable the individual to manage and reduce substance misuse.

For many people this can be achieved within their existing accommodation, however some individuals are unable to succeed in these environments for a variety of reasons, such as other substance abusers in the vicinity. This can be especially important for women, who can be particularly vulnerable through addiction, as prostitution can be a cause of, or a result of, substance misuse.

Our vision

Our vision is to ensure that the right kind of supported housing is available to help people to manage and reduce substance misuse, and associated social problems such as street drinking or theft committed to fund a drug habit. We will aim to achieve this by providing support and services that help

people to address other underlying issues in addition to substance misuse issues.

Strong links with other services, including addiction services and mental health services, are required in order to achieve positive outcomes and move-on.

Needs analysis

Specialist intervention (without housing) is provided through Lifeline, who provide services including harm reduction, counselling on addiction issues, prescribing and detox services. The Cyrenians provide abstinence based support through Oaktrees, for those who have chosen abstinence as their method of recovery. The majority of those who are recovering from addiction live in general needs accommodation, or other supported accommodation, such as homeless accommodation.

- Orwin House provides 6 person shared housing accommodation as part of the homeless re-settlement route. They have a secondary service user base of people with addiction issues.
- Housing without on-site support is commissioned through Restore, for those who wish to access abstinence based housing, to support their recovery.

Substance misuse relating to alcohol is getting increasing recognition. Street drinking in particular is related to other issues such as anti-social behaviour.²⁸

The role of supported housing in providing a stable base, while helping people to tackle alcohol misuse, can form part of a prevention agenda in reducing ongoing admissions, or prescriptions through health services.

Substance misuse can be a barrier to accessing a diagnosis or support from mental health services, as the substance misuse issue can be seen as the primary presenting need, or as a barrier to treatment.

²⁸ Specific targets around addressing this are included in the anti-social behaviour strategy.

Our priorities

Ensure the right kind of supported housing is available to help people address underlying issues such as substance misuse		
Key Indicators		
No. of people presenting as homeless with a substance misuse issue		
Proportion of people sleeping rough with a substance misuse issue		
No. of people presenting as homeless with complex needs		
Priorities	Target date:	Lead
Assess the need for further supported accommodation for those with a substance misuse issue as part of the re-settlement route	September 2014	Commissioning and Contracts Manager Substance Misuse / Commissioning Manager - Early Interventions & Prevention
Increase partnership working with addiction services and front line staff awareness in order to provide the best possible services for those with substance misuse issues in their own accommodation	December 2014	Supported Housing Manager / Commissioning and Contracts Manager Substance Misuse
Explore options for supported accommodation specifically for women with complex/multiple issues and vulnerabilities	December 2014	Commissioning and Contracts Manager Substance Misuse / Commissioning Manager - Early Interventions & Prevention

Homeless

Overview

Homelessness can affect anyone, and has many causes, some are specific to the individual, while others relate to the local housing or job market, or wider economic context.²⁹ It can have a devastating impact on individuals and disrupt all areas of life. Homelessness can impact on a person's life for many years, even after they return to stable housing.

In York and Selby there were over 3,700 reports of domestic violence made to the police in 2010, although work focuses on making people safe at home, this is not always possible. Some become homeless as a result of fleeing violence. York and North Yorkshire commissioning and police are planning to pool funding across the region, to ensure that a suitable spread of provision is available.

Lack of accommodation is rarely the only challenge faced by someone who is homeless, Over 40 per cent of those engaging with homeless services have a mental health condition, and an estimated 69 per cent of those who are street homeless will have a mental health condition and a drug addiction.

Our vision

²⁹ Full details on those affected by homelessness in York can be found in the Homeless strategy.

Our vision is to prevent homelessness in as many cases as possible, and to reduce rough sleeping by ensuring that the right supported housing is available to help people back into safe and stable housing.

York takes a preventative approach to homelessness through partnership working and pro-actively engaging with those at risk of homelessness at an early stage. Supported Housing for provides structured and holistic support to help people address the root cause of their homelessness, and to develop the skills to maintain a tenancy.

Needs analysis

There is a range of supported accommodation currently available in York including tier 1 and tier 2 accommodation³⁰. There is also supported temporary accommodation for those that the Council has a statutory duty to house whilst their circumstances are investigated, or permanent accommodation is sought.³¹

- Arc Light is a tier one hostel which provides accommodation for 39 homeless people, providing 24 hour support for up to two years as part of the resettlement route

³⁰ Tier 1 accommodation is entry level accommodation with more intensive support (often 24 hours). Tier 2 accommodation is move on or resettlement accommodation, usually accessed on a referral basis after a period of time in tier 1 accommodation. This allows people a 'step down' towards independent accommodation.

³¹ People who are considered 'priority need' for housing under homeless legislation, due to their family circumstances or other vulnerabilities.

- Peaseholme is a tier 1B hostel that provides accommodation for 22 people, providing 24 hour support as part of the resettlement route.
- Foundation shared housing provides tier 2 accommodation for 20 people as part of the resettlement route.
- The council provides temporary accommodation to those it has a statutory duty to house, Ordnance Lane (31 units), Holgate Road (8 units) and Crombie House (7 units). All referrals come through the housing options team.
- Orwin House is a tier 2 hostel providing move-on accommodation for 6 people, as part of the resettlement route – not 24 hour.
- Melbourne project provides tier 2 hostel accommodation for 5 people, as part of the resettlement route – not 24 hour.
- There are additionally a number of services targeted at young people (16-25) which have been described in the young people section above.
- York Independent domestic abuse service provides refuge accommodation for 10 families for a maximum of 2 years. They also help men who are experiencing

domestic violence, and who need to flee as a result, to find a safe place to stay.

- York Housing Association provide medium term accommodation for 6 women who have experienced domestic violence, the main referral route is women leaving refuge accommodation.

All referrals to the tier one and two hostels come from the Single Access Point.

There is also support through advice services such as Salvation Army and Housing options. Changes to welfare benefits will make it more difficult for homeless people to access the private rented sector. However York runs a Bond Guarantee Scheme and a social lettings agency, YorHome, to help homeless people to access private rented accommodation.

Tier 1 services in particular have a customer group which includes a large number of individuals with multiple and complex issues, especially mental ill-health and substance misuse. These individuals

can become 'stuck' in service or move in a 'revolving door' between different services and street homelessness without getting any closer to stable housing. This creates blockages in the service. These individuals can also be very disruptive within the service, as well as creating 'blockages' in the resettlement route. There are waiting lists for tier 1 and 2 accommodation.

Our priorities

Prevent homelessness and keep the level of rough sleeping to as near to zero as possible through the provision of appropriate supported accommodation that provides a route back to independent living		
Key Indicators		
No. of people accepted as homeless and in priority need		
No. of people prevented from being homeless		
No. of people in temporary accommodation		
Priorities	Target date:	Lead
Increase the provision of information and advice to help prevent homelessness, especially in light of welfare reform	ongoing	Housing Landlord Service Manager / Homeless Accommodation and Development Manager
Improve standards of temporary accommodation	April 2015	Supported Housing Manager
Develop and fully embed a hospital discharge protocol	September 2014	Supported Housing Manager / Homeless Accommodation and Development Manager

Planning for the future

In difficult economic times it is vital that resources are targeted to have the greatest impact. Therefore it is important that we are able to prioritise the competing needs of different groups in order determine where to direct investment in supported housing. At present York does not have a system for prioritising need, and to do this will require planning across all council services, as well as other partner agencies – especially health services.

- Make use of existing evidence and knowledge (JSNA, SHMA, health and well-being strategy) to identify areas of unmet need
- Raise the profile of supported housing as part of a prevention agenda through the health and well-being board.
- Developing greater links between housing and social care commissioning in planning for and delivering supported housing.
- Develop joint working protocols with health services in meeting the needs of local residents, and providing preventative solutions.

- Making full use of the asset board to identify buildings which may be suitable for future supported housing developments
- Understand the cost effectiveness of services through a better understanding of downstream savings achieved.

Delivering

It is proposed that this strategy will be monitored through the partnership boards under the health and well-being board:

1. - Older people and long term conditions
2. - Tackling deprivation and health inequalities
3. - Mental health and learning disabilities
4. - Children and young people