

Short Term Supported Housing Needs Assessment

August 2019

1. EXECUTIVE SUMMARY

- 1.1 The City of Bradford Metropolitan District Council (the Council) has commissioned Campbell Tickell to undertake research and conduct a needs assessment to identify the current and future (to 2025) requirements for short term supported housing across a range of client groups in the district. The work is intended to inform the District Council's future investment.
- 1.2 The Council is currently producing a renewed Homelessness and Rough Sleeping Strategy and this work will help to strengthen the evidence base to provide focus and direction for the strategy.
- 1.3 The client groups covered by this research include:
- People with support needs including:
 - Younger people (16-25) leaving care
 - Young people in transition preparing for adulthood
 - Complex needs
 - People with dual diagnosis
 - Mental Health
 - Substance Misuse
 - Socially excluded people including:
 - Men and women experiencing domestic abuse
 - Risk of offending or re-offending; those with forensic histories
 - Homeless or at risk of homelessness
 - Substance Misuse (including social care & physical health needs)
 - People working in the sex industry
 - Those requiring enhanced risk management arrangements.
- 1.4 The research and needs assessment have been carried out through:
- A data review of locally provided information from Council Officers and providers of commissioned and non-commissioned short term supported housing services and national statistics;
 - Development of an Excel model addressing projected need, projected supply and benchmark costs per unit;
 - Stakeholder engagement through a series of one-to-one discussions and a stakeholder workshop;

- Service user engagement through four focus group meetings with service users, including one workshop specifically for young people; and
 - A review of good practice service models from across the UK and elsewhere.
- 1.5 This triangulation of methods provides a robust needs assessment that can be adapted over time to address changing circumstances.
- 1.6 We have looked at whether the right people are being housed in the right provision, evidence of 'silting' up of accommodation, and the move on options available and the capacity of the social housing and the private rented sector (PRS) to deliver more move on and/or a Housing First model.
- 1.7 Our findings and recommendations are summarised below.
- 1.8 Rough sleeping in Bradford fell by 50% between 2010 and 2014 but has risen back to previous levels in 2018. However rough sleeping Bradford is lower than the prevalence in the Yorkshire and Humberside region and nationally in 2018.
- 1.9 In 2018/19 the greater number of cases of homelessness relief for single households recorded resulted in a move to new accommodation (777), while only 87 resulted in support to keep or return to existing accommodation. This raises the issue of whether more needs to be done to prevent homelessness and for those with support needs whether more work is required to support tenancy sustainment through floating support or other similar services.
- 1.10 Bradford Metropolitan District Council at June 2019 has 1,607 units of short term supported housing, of these 449 are commissioned and 1,158 are non-commissioned and provide Intensive Housing Management (IHM), funded via Housing Benefit and other charitable funds secured by providers. There are also 455 units of floating support provided across the district.
- 1.11 The Council has been operating a Housing First Pilot, run by The Bridge Project and aiming to support 16 individuals over a 12-month period. The Council, based on the interim evaluation report produced at six months into the pilot, considers this service to be successful in accommodating people who would otherwise have been very difficult to house successfully. There are uncertainties about the true cost of Housing First as a result of the fact that the duration of support is very much client led.
- 1.12 In terms of general needs social housing, Bradford has a good amount available, however move on from short term supported housing to this form of housing is often problematic for a number of reasons.
- 1.13 Bradford's PRS is relatively affordable including for those in receipt of Housing Benefit, however concerns regarding the quality of some of this accommodation were raised.
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Considerable use of PRS is being made by commissioned and non-commissioned service providers as well as No Second Night Out (NSNO).

- 1.14 The main route into commissioned short term supported housing is via the Gateway; this is administered by Housing Options and was introduced to ensure better control and fairer access to commissioned supported housing. This review recommends a number of improvements to the Gateway process to reduce the number of double assessments and improve the customer experience. One initiative being piloted is that of joint assessments between Gateway staff and providers.
- 1.15 NSNO in Bradford plays an important role in addressing urgent housing need for people with support needs. There are 17 bedspaces available, and in 2018 these were used by 160 people, with a utilisation rate of 88%. 80% of NSNO residents moved on in a planned way to commissioned and non-commissioned supported housing or the PRS, and in some cases back to family and friends. Some people we spoke to wanted to see much closer working between NSNO, The Salvation Army Day Shelter and hostel provision.
- 1.16 Floating support, we were told, often experiences delays between referral and the service commencing.
- 1.17 Maximum stay in short term supported housing is set at six months, this was felt by many stakeholders to not be long enough, particularly for those not meeting the threshold for social care but who did require long term support.
- 1.18 For young people there was significant support for moving away from hostel provision to dispersed accommodation and potentially Housing First for some young people with more complex needs.
- 1.19 There was a recognition that mental health services struggle to meet the needs of homeless and vulnerable people and short term supported housing services struggle with gaining access to mental health services for their clients. Greater joint working between short-term supported housing services and commissioners and mental health services (CCG and NHS, as well as adult social care) is needed. The NHS Mental Health Commissioners are reviewing their complex care pathways and this is a possible opportunity to address these issues collaboratively.
- 1.20 There is also a need for greater collaboration between short term supported housing services and commissioners of substance misuse services.
- 1.21 Stakeholders expressed concerns in getting emergency accommodation for offenders requiring housing at short notice.
- 1.22 There is a need for wet provision as well as for more abstinence based provision.

The projected need for short term supported accommodation

- 1.23 The needs analysis has identified the main 'needs groups' that individuals fall into. Many individuals have multiple overlapping needs, particularly those requiring commissioned services, while those requiring non-commissioned services generally have lower needs. The needs are therefore shown as a percentage of the total in the table below.

	Commissioned	Non-Commissioned
Young person	27%	30%
Mental Health	59%	31%
Substance Misuse	51%	22%
Offending	66%	20%
Other	8%	0%

- 1.24 The definitions of high, medium and low are based on the those used by the Gateway, with data on these needs recorded on the Gateway Referral Database. The survey of providers asked non-commissioned providers to use the Gateway definition.
- 1.25 The model shows that the need for short term supported housing is expected to increase year on year over the next five years to 2025. There will therefore be a need to increase the number of short term supported housing units, both commissioned and non-commissioned going forward to meet the increased need.
- 1.26 This report proposes that commissioned services should meet complex needs, with medium needs being met by non-commissioned short term supported housing with floating support meeting low needs. All low needs should be met by floating support and not by short term supported housing.
- 1.27 Rather than developing specialist supported housing for each type of need, this report proposes that specialist homelessness workers are employed to work across the complex needs pathway with supported housing providers. These specialist workers should cover the following:
- Mental health
 - Drugs and alcohol
 - Offenders
 - Clinical Psychologist input
- 1.28 There may be joint commissioning opportunities for the above posts, where they meet more complex needs.
- 1.29 Consideration should be given to commissioning an abstinence supported housing scheme for those with complex needs.

- 1.30 There is a case for commissioning Housing First to support those with the most complex needs including young people.
- 1.31 All commissioned short term supported housing services should be specified so that they are delivered on the basis of Psychologically Informed Environment (PIE) principles.
- 1.32 Consideration should be given to increasing non-commissioned supported housing for offenders in recognition of the fact that a large number use the supported housing pathway.
- 1.33 The Council should work with a provider to develop a non-commissioned 'wet' supported housing service, with additional specialist harm reduction and/or preparation for detox support provided in collaboration with substance misuse services and with NHS/CCG Commissioners.
- 1.34 It is proposed that a hub model of floating support is introduced. The model will involve service users visiting a hub rather than a support worker travelling to the individual. The hub service could operate on a surgery basis, open to those who have already been assessed and have a support plan. The hub could also visit those who are more difficult to engage, have mobility problems or are having a crisis – however the focus of this service will be on those with low needs rather than complex needs.

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