PROMOTING INDEPENDENCE
THE FUTURE OF HOUSING RELATED SUPPORT

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The LGiU is an award-winning think-tank. Our mission is to strengthen local democracy to put citizens in control of their own lives, communities and local services. We work with local councils and other public services providers, along with a wider network of public, private and third sector organisations. Through information, innovation and influencing public debate, we help address policy challenges such as demographic, environmental and economic change, improving healthcare and reforming the criminal justice system.

Circle is one of the UK's leading providers of affordable housing. With a dedicated team of more than 2,200 staff, Circle manages more than 63,000 homes, including supported and sheltered housing, for around 200,000 people across the UK. Its mission is to enhance the life chances of its residents by providing great homes and reliable services, and building sustainable communities.

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Forewords

Some people would say that you can't put a price on being able to live independently in your home. Certainly the vulnerable people who rely on our support services to help them manage their lives and remain at home without having to go to hospital or into a care home, would agree. But we think you can put a price on it. It saves local authorities millions of pounds.

Housing related support often involves simple things like going into someone's home, opening their curtains, helping them to meet their neighbours and ensuring they get three square meals. But it ranges up to helping them to manage their own finances and applying for the correct benefits. Technological advances such as telecare and telehealth also allow people to stay connected and secure with assistance available at the press of a button and the ability to monitor a medical condition from home.

Capgemini's study proved that every pound spent on preventative housing related support services will save more than two pounds to the national taxpayer. But our report shows exactly what direct benefits and savings each council can gain themselves from investing in these services. We hope that it will be a valuable resource for councillors who want to show how effective these services can be in supporting vulnerable people in their homes while saving their councils money at a time of severe financial pressure.

If councils do engage with these services, use them to shape a preventative health agenda and ensure there is a single portfolio holder responsible for delivering them, the rewards are significant. Councils who collected data and did analysis on the impact of their Supporting People services showed an average saving of £13.5m. Those who measured their activities and collected outcomes data were also in a stronger position to argue for these services in future and maintain their funding in relation to other programmes.

There is some inspiring work going on at Circle and other housing association and local authority providers across the country. We have included some examples of good practice to show how these services can be delivered effectively and the positive effects for the families and individuals who benefit from them, as well as the wider financial benefits.

I hope this report will be useful for councillors and anyone else who wants to be a champion for these services and that the recommendations will prompt further discussion in local government about the importance of housing related support. We also want to raise awareness of these services to national decision makers and encourage them to support community budgets across government departments. After all, by supporting vulnerable people to live independently, we not only save money by preventing them having to rely on expensive front-line services, but we also give them the power and autonomy to ensure that they live fuller and happier lives.

Mark Rogers
CEO, Circle Housing Group

Local public services are changing. Major funding reductions, new legislation and societal changes such as the ageing population, mean that councils and their partners must rethink and reform what they do and how they do it.

Our charitable mission at the LGiU is to champion local democracy. We work to make sure that people have power in their own lives, and we support councils to work with and for their communities. We believe that promoting 'independence' should be a fundamental principle underpinning reforms to public services. We also want to see services connecting more effectively, to be more efficient and produce better outcomes.

Preventative approaches are vital to the renewal of public services, so that there is a power shift from reliance and dependency to independence and freedom. That's why we are interested in the lessons that can be learnt from Supporting People, a programme that has been a source of innovation, particularly by supporting independent living. This report looks at the experience of Supporting People, how recent funding changes have affected the programme and suggests positive ways forward.

The evidence from Capgemini's assessment of Supporting People is compelling. They concluded that the net financial benefit from the scheme was £2.77bn per annum. As our report shows, this is replicated at a local level. Despite this, the removal of the ring-fence on the budget and its inclusion in the formula grant has resulted in serious cuts to Supporting People in many local authorities. Understandably, where councils are making difficult decisions about their budgets, support services of this kind have been vulnerable.

In this report we find that better communication about the value of housing related support is needed at a local level to ensure elected members have the information they need to make strategic decisions about local services. We hope our recommendations will help local government leaders to maintain their Supporting People programmes as a policy with a proven track record of success.

But in the long term, the importance of preventative services goes beyond local authorities. Prevention benefits the whole of the local state, whether it is in the form of reduced hospital admissions, more people retaining employment, or lower levels of anti-social behaviour. Until budgets for the most vulnerable are pooled locally, promoting a coherent preventative approach to support will remain a challenge.

Developing community budgets is the key to connecting and improving local services. Councils must press ahead at a local level, but we call for departments across Whitehall to show real commitment in working together to make community budgets a reality.

Andy Sawford
Chief Executive, LGiU

1 Summary

Developing effective preventative services is a mounting problem for public policy makers. At a time when councils' budgets are under increasing pressure, and demand for services is rising, the ability to offer successful preventative support is ever more important. Services which help people to live independently in their own homes, rather than being admitted to residential care have been shown to save millions for local authorities across the country.

Since 2003, the centrally funded Supporting People programme has been at the forefront of preventative support, offering a broad range of services aimed at helping vulnerable people to manage their accommodation and achieve independence. Despite this success, the future of housing related support is now in question in some areas of the country.

The government's reduction of the Supporting People grant in the 2010 comprehensive spending review was set at an average of 12 per cent in real terms over four years; however, the removal by the previous government of the ring-fence on the grant has had an even greater impact.

The current financial environment, which requires cash-strapped councils to make difficult funding decisions, has exposed the vulnerability of the Supporting People programme. In some authorities there have been cuts of over 40 per cent, with serious implications for the providers and recipients of these services.

This report draws together previous studies on the social and financial outcomes of the Supporting People programme with original new LGiU research. Our survey of councillors and housing officers in 139 authorities showed that although 43 per cent of respondents' councils were reducing their level of Supporting People services this year, nearly 90 per cent of those who responded to the survey agreed that this would put vulnerable individuals at risk and create costs elsewhere in the system.

It is clear that making savings through cuts to front-line preventative services could be counterproductive. While they will help to achieve short-term savings targets, the long-term impact of a reduced service may be more costly. Besides the impact on individuals, the savings generated by such services through the prevention of crime, anti-social behaviour, insolvency and hospitalisation need to be weighed against the benefit of addressing immediate budgetary concerns.

On a more encouraging note, the survey demonstrated that despite difficult circumstances, many authorities had developed innovative models for making savings, while retaining services for local residents. Where the benefits of the programme are well understood, there is huge potential to use the lessons of Supporting People to develop successful, outcome-based commissioning across a range of services. The report makes a number of recommendations.

Recommendations

For Whitehall:

Introduce community budgets
Local community budgets are essential if truly preventative services are to be realised. The budget for Supporting People was originally pooled from a range of funding streams at a national level and this must be replicated locally if the value of such services is not to be overlooked. We call upon Whitehall to recognise the cross-cutting nature of these services by prioritising support for community budgets in departments beyond the Department for Communities and Local Government (CLG).

For local authorities:

Recognise the importance of prevention
Although Supporting People services are discretionary, they have the ability to save millions for a local authority. Cutting them will only put more pressure on other services and cost councils considerably more money further down the line. Councils should prioritise independent living in their commissioning strategies, and recognise **the importance of preventative support services** in relation to this agenda.

Share messages about prevention
There is a need for **better education and communication** within local authorities regarding the value of preventative support services.

Nominate one portfolio holder
It may be appropriate for 'prevention/independent living' to be a responsibility of **one portfolio holder** who moves across service areas. At present, housing related support services are often treated as belonging to either housing or adult social care, when in fact they contribute to many agendas including health, public order, community safety children's services and education.

Collect outcomes data
Councils should **continue to collect outcomes data** and contribute to national outcomes data collections on housing related support services.

Work with Health and Wellbeing Boards
Officers and elected members with responsibility for Supporting People/preventative support services should ensure they are involved in shaping **the health agenda** from the very beginning. The need for housing related support should be included in the local **Joint Strategic Needs Assessment** which will be increasingly important in providing a basis for commissioning.

Share examples of local innovation
The delivery of housing related support is becoming increasingly localised, with different models emerging in different localities. More work is needed for local authorities to **share these models** and learn from one another's experience.

Case Study 1: Florence

Florence, aged 85, has very poor hearing and was finding communication with others very frustrating. She is registered blind and her mobility is limited. Florence loves her sheltered flat and wants to remain as independent as possible for as long as she is able to. She receives care three times a day for daily tasks including washing, dressing, meal preparation, shopping and cleaning.

Florence's sheltered scheme manager at Circle Support contacted the local Sensory Team to arrange an assessment to find ways to meet her diverse needs. Following the assessment Florence was provided with a telephone with large numbers and higher volume to enable her to hear who is calling her and has had flashing lights fitted on her wall so she knows when the phone is ringing. Florence has also had a remote door opener fitted so she is able to let her carers in as her mobility is very limited.

As Florence loves reading books her Circle Support scheme manager also arranged for the mobile library to visit her at home every month and source books in very large print. The RNIB conduct home visits to carry out eye tests and the community matron visits Florence fortnightly to check on her oxygen levels and assess her health.

Florence is doing very well with all the support and care she is receiving, she loves company and we are currently looking for a befriending volunteer to add another support dimension to her life.

2 Background

Key dates

- **April 2003 – Supporting People programme introduced, amalgamating 20 separate funding streams.**

- **April 2007 – additional monitoring introduced, tracking outcomes for individuals leaving Supporting People services, as well as collecting them at the beginning of the programme.**

- **April 2009 – government ring-fence on Supporting People budget removed.**

- **April 2011 – Supporting People cut nationally by an average of 12 per cent and rolled into the Formula Grant. Councils are no longer required to collect outcomes information on service users.**

The origins of Supporting People

Supporting People was introduced in April 2003 to provide housing related support to over 1.2 million vulnerable people, enabling them to live more independently and successfully manage their tenancies. The concept of the funding stream originated in 1997, when a judicial review ruled that housing benefit should only fund accommodation costs, rather than care and support.

At the time, the Audit Commission estimated there were 20 separate funding systems to pay for housing related support and the system was clearly ripe for reform. The introduction of Supporting People aimed to simplify the process and enable vulnerable people where possible to maintain their tenancies and remain living independently, avoiding institutional care. The programme brought together nine different funding streams, including Transitional Housing Benefit, DSS Resettlement Grant, Supporting Housing Management Grant and Probation Accommodation Grant.[1]

The new Supporting People programme recognised the impact that inadequate housing and housing services can have on a person's quality of life and responded to the need for high quality, targeted interventions for the most vulnerable.

It slowly established itself as a best practice model for modern commissioning, featuring the careful collection of outcomes information for service users, innovative provider forums and positive shared working across borough boundaries.

The removal of the ring-fence

After six years of Supporting People, it was felt that its delivery mechanism encouraged a silo-approach to housing

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1 http://www.local.odpm.gov.uk/finance/stats/wglfs/wglfs-04-18.pdf

support and precluded opportunities for mainstreaming lessons throughout adult social care and other related services.

The ring-fence for Supporting People funding was removed in April 2009. CLG's report on the pathfinder authorities which tested this approach stated that:

> *"the removal of the ring fence was seen very positively by many service providers and by almost all the respondents working within the Pathfinder authorities. Respondents did not argue in favour of retaining the existing funding arrangements, instead they saw opportunities to enhance services through greater freedom of expenditure."* [2]

Nevertheless, there were serious concerns that the removal of the ring-fence would allow councils to 'cannibalise' the budget to support other service areas. Housing support and care organisation Sitra held a series of 18 roundtables on the issue in partnership with CLG, which were attended by commissioners, providers and other key stakeholders.

Although the meeting report recognised the potential benefits of removing the ring-fence, it also noted:

> *"There is universal concern that incorporation into ABG (Area Based Grant) will lead to funding being diverted away from funding for housing related support (particularly for the most socially excluded and least electorally influential groups) to other local priorities."* [3]

Supporting People goes local

The concern swiftly became a reality for many local authorities. The Supporting People budget was rolled into the formula grant in April 2011, with an average of a 12 per cent cut in real terms over four years from central government and a removal of the requirement to collect outcomes information. In effect, all responsibility for the programme had now been handed from CLG to local government.

This had major implications for local authorities, which were already struggling with unprecedented budget cuts. In 2010 the National Housing Federation published a survey of 138 housing associations, in which 73 per cent of respondents said one or more of the local authorities they work with were planning cuts of over 12 per cent. [4]

For other councils, the cuts made locally were considerably higher. Cornwall, for example, announced that it would be making cuts of 40 per cent, prompting a social media campaign in the South-West aimed at protecting these services. [5]

Central government reacted with dismay. In a letter to *The Daily Telegraph* on the 16 March 2011, Housing Minister Grant Shapps wrote:

> *"Thousands of pensioners, women fleeing domestic violence, homeless people and people with mental health problems could be forced to fend for themselves because of unintended cuts being made to a government-funded programme called Supporting People.*

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2 CLG (2008), *Changing Supporting People funding in England: Results from a pilot exercise*, p.4.

3 Sitra (2009), Removal of Supporting People Ring Fence Report on Regional Round Table Discussions Jan – Mar,p.3.

4 http://www.housing.org.uk/news/sp_cuts_for_vulnerable_people.aspx

5 http://www.communitycare.co.uk/blogs/adult-care-blog/2011/02/supporting-people-row-hots-up -in-cornwall.html

"Although the government has given relative protection to this £6.5bn programme – reducing the grant it gives councils to fund these services by 12 per cent over four years – some local authorities have announced that they will make cuts of up to 50 per cent this year.

"Cuts of this level hurt vulnerable people but make no financial sense. Without early identification, vulnerable individuals will quickly reach crisis point, making greater demands on health and homelessness services and the criminal justice system." [6]

The letter was also signed by David Orr, Chief Executive of the National Housing Federation and Nicola Harwin, Chief Executive of the Women's Aid Foundation.

By rolling Supporting People into the formula grant (which makes it unclear how much of the grant is intended for housing related support), CLG has indicated clearly that they consider decision-making around Supporting People to be devolved to a local level.

At the same time, councils across the country are faced with very difficult financial decisions as they cut an average of 28 per cent of their budgets. As a discretionary service, Supporting People is particularly vulnerable and it is clear that despite lamentations from central government, housing related support is declining at a local level in many councils.

Case Study 2: Francis

"My name is Francis. Two years ago I found myself homeless and getting into trouble. I was scared of losing my lovely mother whom I adore as she was suffering from a terminal illness. I was constantly getting arrested because I had no stable way of life.

"One day I got a phone call to invite me to an interview for a place at the Vineries. During my stay in the Vineries even though I was being supported by staff to settle into my new home and to address my support needs I was still hanging out with the wrong people and ended up getting arrested and remanded for six months.

"My room was kept open for me and I received a lot of support from Circle Support staff while I was in prison, had regular visits to continue addressing my support needs and this really helped me because I was going through a hard time and felt my life was over. The support I received from staff whilst in prison motivated me to start a course in Construction Skill Level 1 and I will be starting a Level 2 in Construction in September at Barking College.

"I am now preparing to move out of Vineries into my council accommodation and am not getting into trouble anymore. If I wasn't living here in the Vineries I wouldn't be in the position I'm in now so thanks to the staff at the Vineries for believing in me."

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6 http://www.telegraph.co.uk/comment/letters/

3 Why maintain Supporting People?

The changing status of Supporting People is a major source of concern for officers, councillors and providers working in the housing related support sector, as well as their clients. As we will see in this chapter, cutting these services could prove a short-sighted decision.

Key Findings

1) Independent living will be an increasingly important priority for local authorities in years to come. The pressure on services is rising, partly as a result of an ageing population, while budgets are shrinking. It is vital that councils tackle the prevention agenda and develop their ability to keep people independent for longer. Supporting People has important lessons for this area of work.

2) It is cost effective. There is significant evidence of the financial value of this programme in preventing problems from escalating and reducing pressure on other local services.

   ● A 2008 Capgemini report concluded that the best overall estimate of net financial benefits from Supporting People is £2.77bn per annum for the client groups considered (against an overall investment of £1.55bn), giving a net financial benefit of £1.22bn a year.

   ● Seven councils who undertook local research regarding the impact of the programme found that it saved them an average of £13.5m a year.

3) It is proven to deliver social outcomes. The data collected on Supporting People demonstrate the success of the programme, and offer plenty of examples of best practice for other areas of commissioning. As the case studies in this report show, these services offer a safety net to the most vulnerable and make independent living a possibility for them.

4) Cutting these services has a detrimental effect on individuals. Where Supporting People services have been cut previously, there has been a serious impact on other services within a short space of time. A report on cuts in the Isle of Wight was launched in 2010 and demonstrated an increase in anti-social behaviour, homelessness and failed tenancies.

1) The importance of independent living

Public services face a number of serious challenges in the near future, and both long-term trends and short-term imperatives demand a renewed emphasis on preventative services. The UK has an ageing population: the proportion of people aged 65 and over is projected to increase from 16 per cent in 2008 to 23 per cent by 2033. As a result, old age support ratios will fall. In 2008, there were 3.2 people of working age for every person of state pensionable age. This ratio is projected to fall to 2.8 by 2033, taking into account the future changes to state pension age.[7]

With an ageing population come a variety of other health problems. According to a 2008 report by the King's Fund, the total cost of mental health care to the economy in England, could go up by as much as 83 per cent by 2026, to £88.4bn. The anticipated increase in the number of cases of dementia by this date is 61 per cent, meaning that the condition will account for 73 per cent of total mental health service costs. The cost of lost employment, currently estimated to be £26.1bn, is projected to increase by 7.7 per cent by 2026.[8]

In the short-term, the economic down-turn has also increased demand for services, as people seek support in finding new employment, in managing their mortgages or tenancies, or in coping with homelessness.

Preventative approaches that maintain independence are vital in addressing this type of seemingly intractable problem. There is now a significant evidence base demonstrating not only their value to individuals' quality of life, but their financial benefits in off-setting costs to public services further down the line. It is clearly both cost effective and beneficial to an individual's wellbeing to offer low level preventative services to support independent living in their own home, rather than responding to the (often more costly) consequences when they occur. In this way, support in housing must be a central aspect of any successful approach to preventative services.

If local authorities are to deal with the social challenges they face while managing their cost-base, they must focus their resources on prevention. An important element of this approach is supporting people to remain in their own homes, thus generating savings, and ensuring a better quality of life for local people. In this regard, Supporting People can offer some valuable lessons.

2) The financial value of the programme

In 2008, Capgemini completed a detailed analysis of the financial benefits of the Supporting People programme on behalf of CLG. The work estimated the impact of withdrawing or replacing the Supporting People intervention, focusing on the cost of the support that would need to be provided to individuals if the outcomes produced by the Supporting People programme were not delivered.

They concluded that the best overall estimate of net financial benefits from Supporting People is £2.77bn per annum for the client groups considered (against an overall investment of £1.55bn), giving a net financial benefit to the public purse of £1.22bn a year.[9] The report stated that:

"For the groups considered, the costs of supporting the individual through Supporting People are lower than the overall costs of either withdrawing or

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7 http://www.statistics.gov.uk/cci/nugget.asp?id=1352
8 King's Fund (2008), *Paying the Price: The cost of mental health care in England to 2026*.
9 CLG (2008), *Research into the financial benefits of the Supporting People programme*, London, p.10

Client Group	Cost per 1000 units of support (£m)	Net financial benefit per 1000 units of support (£m)
People with drug problems	(6.6)	26.1
People with learning disabilities	(12.5)	20.5
Women at risk of domestic violence	(10.1)	14.6
People with mental health problems	(6.7)	13
Homeless families in temporary accommodation	(3.7)	7.5
Older people – very sheltered	(1.2)	5.1
Homeless single people in temporary accommodation	(8.1)	4.9
Offenders and those at risk of offending	(7.3)	3.9
Young people at risk in temporary accommodation	(8.5)	3
Older people – sheltered accommodation and other	(0.3)	1.4
Older people – floating support	(0.7)	0.5
Young people at risk in settled accommodation	(7)	0.5
Homeless single people in settled accommodation	(5.2)	0.3
Homeless families in settled accommodation	(3)	0.1

Figures from Capgemini

reducing support, or of switching to a more intensive form of support offering a lower degree of independent living."[10]

Supporting People offered better value for money with some client groups than with others. When the data was transferred into cost and financial benefit per unit of support offered, it clearly demonstrated that the programme was very cost effective with those groups where alternative modes of support would include costly residential solutions: people with drug problems; people with learning disabilities; women at risk of domestic violence and people with mental health problems. The table above provides a breakdown of the cost and benefits for each identified group.

Although the financial benefits of the support vary, they outweigh the overall costs of 'not supporting' in all of the client groups. Capgemini notes that the withdrawal of support for these groups may therefore create a higher cost elsewhere in the system.[11]

However, as the Capgemini figures offer national costs and benefits to the public purse, rather than to individuals or communities, it is difficult for local authorities to relate them to local circumstances. To help them determine the impact of the programme at a local level, Capgemini developed a tool which could calculate costs savings associated with the programme delivered by each council.

Local benefits
Several local authorities took advantage of the Capgemini tool and undertook their own research to determine the benefits of

10 Ibid. p.11

11 Ibid. p.12

Local authority	Savings p/a
Dorset County Council	£20.1 million
Surrey County Council	£15.5 million
Stoke on Trent City Council	£15.4 million
North Somerset Council	£13.7 million
Tameside Metropolitan Borough Council	£11.8 million
Leicestershire County Council	£10 million
Torbay Council	£8.19 million

Local authority	Savings per £1 spent
Doncaster Council	£2.28
London Borough of Croydon	£3.33
Cheshire West and Chester Council	£2
Bath and North East Somerset Council	£2.89

housing related support to their residents. This report only captures a selection of councils' findings, but the 11 listed authorities demonstrate the potential for local savings.

Together, the national and local research demonstrates that while cuts to Supporting People budgets may address an immediate budgetary gap, this approach may be short-sighted. In the long term they could create additional costs elsewhere for local public services.

3) The social value of the programme

The Supporting People programme is remarkable for its thoroughness in collecting evidence of social outcomes associated with its work. As people enter the services, a client record form is completed, logging details about the service itself and the characteristics and needs of the client.

Since 2007, information has also been collected when clients leave the service, including outcomes information based on an agreed support plan. This includes information about where the client is moving on to, as well as a profile of their support needs and how many of these needs have been met or achieved.[12] Since the beginning of the programme, this data has been managed on behalf of CLG by the Centre for Housing Research (CHR) at St Andrews University.

Over the course of the programme, CLG has collected a large volume of data on the social impact of Supporting People. According to their client records from April 2010 to March 2011, 231,200 record forms were received, 188,900 outcomes for short-term services (more than 28 days but less than two years) were received, and 39,900 for long-term services. This represents the final batch of record forms to be collected by CLG.

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12 https://supportingpeople.st-andrews.ac.uk/publications/TrendsInTypesOfClientsAndTheirNeeds
    _Oct2010.pdf

Three most common support needs identified by clients leaving short-term services	% achieving outcome
1. Maximised income, including receipt of correct welfare benefits	90
2. Secured/obtained settled accommodation	73
3. Developed confidence and the ability to have greater choice and/or control and/or involvement	88

Three most common support needs identified by clients in receipt of long-term services	% achieving outcome
1. Maintained independence with the help of aids and adaptations	99
2. Managed physical health better	94
3. Maximised income, including receipt of correct welfare benefits	97

When the ring-fence was removed, they cancelled their contract with CHR, ending the centralised collection of outcomes data. Nevertheless, CHR is continuing to contract directly with a significant proportion of administering authorities to collect the data.

The contents of this data demonstrate the value of housing related support to individuals. The two tables above identify the most common support needs required by clients leaving both short and long-term services, and the success rate of the services in meeting these needs.

Although there are limits to the picture that can be drawn by these indicators, they reflect the impact of the services on individuals' lives and demonstrate a high rate of success. Short-term Supporting People services are most successful in offering the "help of assistive technology/aids and adaptations to maintain independence" (92 per cent of group achieved the outcome), in "establishing contact with external services/groups/family/friends" (91 per cent) and in "maximising income, including receipt of correct benefits" (90 per cent).

The percentage of those achieving paid work was the lowest of the outcomes at only 27 per cent, reflecting the more challenging nature of the outcome.

As might be expected, long-term services demonstrate a more consistently high rate of performance against the outcomes, with 13 out of 21 outcomes scoring higher than 90 per cent.

Again, the lowest rates of success are to be found in supporting people to maintain employment, or work-like activities and in challenging substance misuse. A very high rate of success was demonstrated in all other areas, particularly those that maintain independence (supporting older people with adaptive aids, or helping people to keep their tenancies).[13]

Although there are undoubtedly limitations to the data, it is a comprehensive sample representing a wide geographical area over a period of six years. With this in mind, it offers compelling evidence of the efficacy of the Supporting People programme and of the impact of housing related support on the lives of individuals.

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13 http://www.communities.gov.uk/publications/housing/supportingpeopledataq3

4) The impact of cutting Supporting People services

The decline of housing related support is a major cause of concern. The Stewardship Group of the Isle of Wight Local Involvement Network commissioned a Risk Impact Assessment Report following the significant reductions to services in 2010, which highlights some of the potential risks of cuts in this area.

The report, which was launched in October 2010, looked at the impact of cuts on vulnerable people on the island and made a number of recommendations. The feedback received indicated:

- more tenancies were at risk

- anti-social behaviour had generally increased

- the lack of support available had deterred some landlords from providing accommodation

- accommodation placements were breaking down sooner

- there was evidence of increased homelessness, offending, self-harm, substance misuse, increased health issues and financial problems

- issues were becoming longer term and more difficult to overcome and therefore more expensive.

The report recommended joint working between providers, service users and other stakeholders at the highest strategic level to ensure that high priority services are protected within funding limits. It suggested a joint forum could set out the immediate way forward for preventative services, which

currently save the Isle four times their cost in terms of prevention of hospital admissions, homelessness and evictions.[14]

This concern has been echoed by a range of charities working in the sector. In an interview with the *Guardian* newspaper, Paul Farmer, Chief Executive of mental health charity Mind, made this comment:

"It is alarming to see local authorities making funding cuts while knowing that this will have an adverse effect on service users as well as [cause] higher costs in the long run."

Domini Gunn, Director of Public Health and Vulnerable Communities at the Chartered Institute of Housing, highlighted the impact of Supporting People cuts on the wider community.

"This is likely to be seen in higher levels of anti-social behaviour, including the risk of harm to vulnerable people, and increased levels of offending behaviour. The future costs to vulnerable people, communities and to the public purse will be high."

Meanwhile, crime reduction charity Nacro warns that funding cuts could fuel increased criminal activity. Kevin Lockyer, Services Director at the charity, said: *"People leaving prison without somewhere to live are more likely to offend again."*[15]

The National Housing Federation has launched a campaign to raise awareness of the cuts to Supporting People and has published a fact sheet for local authorities in partnership with a range of other organisations in the sector, including St Mungo's, ADASS, Mind and SITRA, entitled *Four Facts, Four Questions.*

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14 http://www.sitra.org.uk/index.php?id=421

15 http://www.guardian.co.uk/housing-network/2011/aug/22/supporting-people-cuts-housing-sector-vulnerable

Case Study 3: Bibi

The Packington Families Project is delivered in a partnership between Circle Housing Group and Hyde Housing Group on behalf of Islington Council. It offers local support services for families on the Packington Estate including: help at school; activities for children and young people; employment and training advice and support; money and debt advice; parenting know-how; and child and family health advice.

"My name is Bibi Kushum and today, I feel more confident, positive, and my self-esteem is very high, especially since I have been supported by Islington Families to go back into education. Two years ago, I was a victim of domestic violence. I stopped believing in myself and I was very depressed, and unable to leave my home as a result of this. I started receiving support from Islington Families, and that's when my life changed for the better, because I felt that I had choices. I was able to enrol on a Maths, English and IT course, which has given me the ability to be able to communicate better, not just with my family and friends, but with professionals too.

"When my support coordinator, Jackie, suggested the parenting course on Strengthening Families and Communities to me, at first, I thought it was because she felt that I was not capable as a parent, but it was to further my parenting skills. The course educated me a lot, and showed me new ways to parent, new techniques and positive ways to interact with my three daughters. They now see me not just as their mother, but their role model.

"Going back into education, can be a scary thing, especially if you haven't done anything like that for years but now I am hoping to enrol on an access course. I hope to go on to university, and have a career as a forensic scientist.

"My children are very proud of my achievements, and are much happier because I am. I am confident to help my children with their maths and literacy homework. I am also computer literate and, most of all, my English has greatly improved."

It is clear that there is a strong case, both financial and social, for retaining Supporting People services. To investigate why these services are experiencing such a high level of cuts and to explore options for the future of the programme, we undertook a survey of local authorities. The following chapter describes our findings.

4 The local authority response

In researching this report, the LGiU surveyed local authorities across England about their views on housing related support. We targeted housing officers and managers, lead members for housing and adult social care and chairs of overview and scrutiny panels with relevant briefs. 187 people responded to our survey, representing 139 councils in total. Of the 139 councils that responded, 75 were higher tier authorities and 64 were districts. 52.4 per cent of respondents were officers and 47.6 per cent were elected members.

The survey was followed up by individual interviews with specific authorities. The research aimed to assess:

- how respondents perceived the Supporting People programme, and if this differed between councillors and officers

- how cuts to the service were being delivered

- what evidence of the benefits of Supporting People were available at a local level

- what the future of the programme might hold.

The results demonstrated a number of findings.

1) Despite an awareness of the financial and social benefits of the programme, councils were still cutting their level of service.
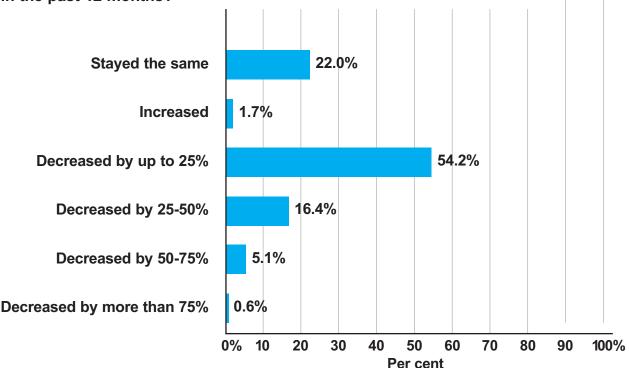
- The majority (54.2 per cent) of housing related support budgets had been cut by between 1 and 25 per cent. 22.1 per cent of respondents had seen their budgets cut by more than 25 per cent.

- Although councils were using a range of methods to reduce their budget, 43.5 per cent of respondents reported that they were reducing the level of service they could offer in order to make the savings.

- However, 90.9 per cent agreed that reducing the availability of housing related support "will create more costs elsewhere in the system" and 87.7 per cent agreed that reducing the availability of housing related support "will put vulnerable people at risk". This suggests cost-benefit analyses have not been a major feature of service reviews where budgets have been cut most.

- 92.7 per cent agreed or strongly agreed that "Supporting People services have been successful in my local area".

Some authorities had experienced a high level of cuts to their budget and their responses reflected serious concerns about the future of the programme:

"The removal of ring-fenced Supporting People money has been a disaster in our area. Decisions are taken without the input of housing authorities or any regard for some of the most vulnerable clients. Supporting People funding for homelessness support has been slashed and the numbers of street homeless in our city have already more than quadrupled. The County Council

How has your Supporting People/housing related support budget been affected in the past 12 months?

Stayed the same	22.0%
Increased	1.7%
Decreased by up to 25%	54.2%
Decreased by 25-50%	16.4%
Decreased by 50-75%	5.1%
Decreased by more than 75%	0.6%

Per cent (0% 10 20 30 40 50 60 70 80 90 100%)

is using the former Supporting People money to fund mainstream social care services rather than to provide housing related support."

2) It was clear that elected councillors did not have the same understanding of the benefits of the Supporting People programme as did housing officers.
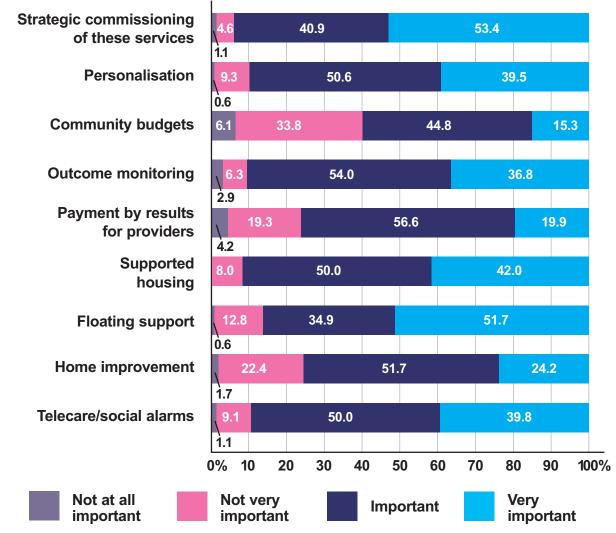
Although there were instances of elected members who had an excellent understanding of the programme, overall they consistently rated the social outcomes lower than officers. Nearly 80 per cent of those who did not know about the financial benefits of Supporting People were members, raising questions about how these benefits are communicated.

3) Some authorities were losing key aspects of the programme, including best practice around outcome monitoring.

● As the Supporting People funding has now been rolled into the formula grant there is no longer a requirement to submit outcomes information on clients of the service. CLG has cancelled their contract with St Andrews University, which is now contracting directly with a number of authorities. Around two-thirds of councils have chosen to do this.

● Nevertheless, only 55.5 per cent of respondents to our survey reported that they would definitely continue to collect outcomes information from housing related support. Without this information it will be increasingly difficult both to defend the value of this type of work, and to engage in effective, outcome-based commissioning.

● Of those who identified outcome measures as 'very important', over 30 per cent had experienced no cuts to their budget, as opposed to 22 per cent overall. This suggests

In your view, how important will the following be in delivering housing related support over the next five years?

	Not at all important	Not very important	Important	Very important
Strategic commissioning of these services	1.1	4.6	40.9	53.4
Personalisation	0.6	9.3	50.6	39.5
Community budgets	6.1	33.8	44.8	15.3
Outcome monitoring	2.9	6.3	54.0	36.8
Payment by results for providers	4.2	19.3	56.6	19.9
Supported housing		8.0	50.0	42.0
Floating support	0.6	12.8	34.9	51.7
Home improvement	1.7	22.4	51.7	24.2
Telecare/social alarms	1.1	9.1	50.0	39.8

Scale: 0% 10 20 30 40 50 60 70 80 90 100%

Legend: **Not at all important** / **Not very important** / **Important** / **Very important**

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that those who have really grasped the issue of outcome based commissioning were most successful in retaining their budget.

● The same applied to those who had used the Capgemini tool. 38 councils reported that they had calculated the level of savings delivered by the programme using the Capgemini tool, and 21 responded in detail. None of these 21 authorities had experienced a cut in budget of more than 25 per cent.

4) The survey reflected a worrying lack of knowledge among respondents regarding the health agenda.

● Nearly 20 per cent of respondents did not know if their authority had a health and wellbeing board. Around 40 per cent did not know if a cabinet member had been given responsibility for this agenda and 30.5 per cent did not know if housing related support was represented on the board. This partly reflects the early stage of development in some authorities, but it is essential that housing

officers and members with responsibility for this agenda are involved in health and wellbeing boards from the start.

5) Some councils were rising to the challenge and developing innovative ways of saving money and increasing efficiency while protecting front-line services.

- 89.8 per cent identified telecare as being important in the next five years, while 71.6 per cent were looking into telehealth as a way of meeting their public health responsibilities.

- 73 per cent thought that personalisation would support better outcomes for recipients of housing related support, although others commented that Supporting People was already a very personalised service. Bexley has been able to increase its capacity by 30-35 per cent, by adopting an individual budget model for service delivery.

- Payment by results has allowed some councils to get more from their contracts. Derbyshire County Council has moved all its providers on to contracts with an element of performance related pay, using a strong local outcomes framework. 76.5 per cent of respondents to our survey thought that payment by results for providers would be "important" or "very important" in future.

6) Community budgets are crucial in connecting and delivering preventative services at a local level.

- The Capgemini work demonstrated that while Supporting People services delivered major financial savings for local councils, a significant proportion of them would be realised by local public bodies other than the council; for example, the NHS and Police. In the absence of effective community budgeting, the value of these savings is easily over-looked by councils experiencing unprecedented budgetary pressure.

- Nevertheless, nearly 40 per cent of councils thought that community budgets would be "not very important" or "not at all important" in delivering housing related support over the next five years.

- CLG has been pursuing the community budget agenda, with the establishment of 16 pilots, and the promise of a further 110 in the next two years. However, this agenda does not just affect local government. Like Supporting People services, community budgets are a cross-cutting agenda and require further support from other relevant departments. Our survey demonstrated a lack of communication between housing and health at a local level, but this is replicated in Whitehall. Without better cross-departmental commitment to community budgets, local preventative services will continue to struggle.

Case Study 3: Graham

Graham is in his 50s and has highly complex needs. When he moved in he was refusing to leave his bed, therefore his quality of life was severely restricted. Graham would spend 24 hours a day in bed and refused support from staff to complete any day-to-day tasks such as eating, going to the bathroom and any daytime activity. Circle Support worked with Graham and his social workers, psychologist, occupational therapist, speech and language therapist to help meet his specific support needs in a personal centred way. A support plan was drawn up to motivate Graham to become actively involved in his day-to-day support.

The step-by--step approach Circle Support took included:

● arranging meetings with everyone involved in Graham's care and support

● a designated key worker who oversaw and co-ordinated the people around him to facilitate his support

● discussing guidelines with Graham around his developing relationship with staff, personal care, and developing his self-confidence to achieve the tasks he has chosen.

If one approach didn't work Circle Support tried a different one and slowly, over time Graham gained confidence in daily living skills and now feels confident that he is able to take more control over the things that he does.

Using this approach and involving everyone in Graham's Circle of Support has enabled him to slowly find the confidence to get out of bed and become more actively involved in the community and his home.

Graham's mum recently said that she has not seen him this happy in years.

5 Future challenges and opportunities

Community budgets

Some of the savings to the public purse delivered by Supporting People are of benefit to agencies other than the council. As we noted earlier, the programme is particularly valuable to the NHS and the Police, in the form of lower rates of admission to hospitals, or fewer incidences of anti-social behaviour.

Norfolk County Council and NHS Norfolk have addressed this by restructuring Supporting People under a joint council-NHS commissioning board, which allows them to manage the programme's outcomes in a more holistic manner. Supporting People was originally the result of the pooling of various cross-departmental budget streams including those from housing, DSS and probation, and this aspect of the programme should be replicated locally. Community budgets can take many forms, but until budgets for preventative services are pooled across local public bodies they will remain vulnerable to cuts as councils are forced to calculate where they can best achieve their own corporate savings.

At present, the community budgets programme appears to be making slow progress. Eric Pickles was appointed to lead on the scheme in September, following an admission that it had been lacking direction and leadership. The Communities Secretary told MPs he was "playing catch up", and when asked who had been leading the programme before him, replied "I think it was the secretary of state for good intentions".[16] Although the appointment of a senior minister to lead on community budgets is encouraging, it is important to recognise that this is a cross-cutting agenda. If CLG is the only department progressing the programme, it will fail before it reaches the starting line. The Department of Health, the Home Office and the Department of Work and Pensions are all important players in the local state: for GP commissioning units, the Police and Job Centres to be incorporated into community budgets, it is essential that the relevant departments are engaged in the process from the very beginning.

Two-tier authorities

In two-tier authority areas, there is a danger that housing related support may fall into the gap between authorities. Our survey suggested that in many cases, joint commissioning between districts and the county has been a casualty of tightening budgets. There were reported instances of county councils cutting Supporting People services, or radically altering their direction without meaningful consultation with their districts. This has led to problems in their locality, particularly around homelessness, responsibility for which lies with the district.

In other areas, the relationship between county and district has been managed effectively. Surrey County Council and Guildford Borough Council are operating together closely despite challenging financial circumstances and high levels of homelessness in the town centre. Surrey now has a joint management board and a commissioning board covering the whole county, on which the districts are represented. The county budget is managed

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16 'Pickles admits community budget drift', *Local Government Chronicle*, 13/09/11

by the joint commissioning board and is responsive to the views of the districts.

Personalisation

Supporting People is already a highly personalised service in the broader sense of the term. As each client enters the service a personal needs based support plan is developed with the service user. However, the Public Services White Paper takes this approach a step further in promoting personal and individual budgets.

The White Paper states that "the Department for Communities and Local Government will work with councils and other partners to explore a personalised budget approach in the Supporting People scheme".[17] The use of personal budgets marks a major shift in the delivery of housing related support, as councils move from large contracts with providers to small ones with individuals.

There can be huge benefits to this approach: it can give service users more control over the services they receive and can bring housing related support into line with adult social care arrangements. As we noted earlier, the London Borough of Bexley increased its capacity by 30-35 per cent by moving away from contracts to an individual budget model. This model avoids service users being assessed more than once and allows the services they need to be offered by brokers, whether they are housing related support or social care. Bexley is developing systems that will enable an integrated assessment framework to do just this.

However, there are also risks associated with personal budgets. It can offer a much less attractive proposition to providers, and there is a danger they may drop out of the market if they are not kept on board. In some areas this could leave serious gaps. It is also more

difficult to maintain outcome monitoring systems when dealing with individuals, unless the council is prepared to resource this function. Outcomes were always the basis of the Supporting People programme and represent good practice in service delivery, as well as demonstrating the benefits of the intervention to stakeholders. Equally, personal budgets may not be appropriate for all vulnerable individuals. Others may argue that Supporting People is already highly personalised. It involves developing individual support plans for service users in which they jointly identify outcomes from the programme.

"There is something of a rear-guard action to continue to defend the benefits of the programme and to ensure that the strengths of the wider agenda continue to be recognised, particularly against the backdrop of budget cuts and the loss of the ring-fence. We are actively looking at personalisation of services but are making the point that services have been at the vanguard in terms of a personalised, outcome focused approach."

(Survey respondent)

Payment by results

The Public Services White Paper makes provision for 10 local authorities to test out a range of payment by results models with their providers in relation to Supporting People services. These models will be tested during the latter part of 2011 until 2013. DCLG will undertake an evaluation of the various approaches and report in late 2013.[18]

There are of course risks to this model of commissioning: providers may not be prepared to move immediately to a new contract of this type; there is a question as to

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17 Cabinet Office (2011) Open Public Services White Paper, p.16
      http://www.cabinetoffice.gov.uk/sites/default/files/resources/open-public-services-white-paper.pdf

18 Open Public Services White Paper, June 2011, HM Government, p.33
      http://www.cabinetoffice.gov.uk/sites/default/files/resources/open-public-services-white-paper.pdf

how much of a contract should remain as the core payment; and there is the danger of cherry-picking on the part of providers if the contract is poorly incentivised and monitored. Nevertheless, there are also important opportunities associated with payment by results.

Derbyshire County Council has instigated payment by results for housing related support contracts in its locality. Working closely with providers, it has introduced a model where 80 per cent of costs are paid in advance on a quarterly basis. The remaining 20 per cent is paid in arrears, and is dependent on the providers' service users meeting a number of pre-agreed outcomes.

The council wants to ensure providers can adapt slowly while building capacity, and will be increasing the proportion of contracts to be paid on results on an annual basis. In year two, 30 per cent will be based on the achievement of outcomes. So far the work has been very successful and has had a high level of political support.

Health and Wellbeing Boards

"It is crucial not to see housing and neighbourhoods in isolation from other services. There is, as research has shown over and over, a close relationship between housing and health. Good quality housing leads to good health. That is absolutely nailed down and proven. Conversely, exactly the opposite is true: poor housing leads to poor health. About every five hours, an older person dies as the result of a fall. This is a serious consequence of poor housing, poor neighbourhoods, defective pavements – which either causes accidents and in some cases death, or keeps people trapped in their own homes."[19]   Professor Alan Walker

The new statutory Health and Wellbeing Boards have the potential to play an important role in joining up existing work on public health with housing related support.

Councils will take on new commissioning roles, and a coordinated approach to early intervention targeted at social housing clients could contribute significantly to some of the goals of these boards.

Many councils have already established shadow Health and Wellbeing Boards and appointed their directors of public health. 56.6 per cent of respondents to our survey had appointed the members of their boards. The post of cabinet member for health and wellbeing will also be important in promoting public health, and ultimately holding responsibility for this portfolio.

As our survey demonstrated, councils have begun to develop local health and wellbeing boards, but they are by no means fully established in many areas. There is still scope for these boards to be shaped by the preventative support agenda and it is important that members of housing related support teams have representation.

Equally important is that housing related support needs are included in the Joint Strategic Needs Assessment (JSNA). The JSNA will play a central role in determining Health and Wellbeing Board commissioning strategies in future, so it is essential that housing related support needs are incorporated into this document.

Telecare and telehealth

Telecare is becoming an increasingly important tool for local authorities in providing cheaper and more effective services that allow people to remain in their own homes.

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19 Professor Alan Walker, cited in LGiU (2008), *Never Too Late for Living: inquiry into services for older people*, p.28.

Case Study 5: Invicta Telecare

An alarm unit which automatically calls for help proved to be a real lifeline when Mrs J stumbled and fell outside her home, gashing her forehead and breaking her nose and arm.

Thankfully, a year ago her daughter had arranged for the local housing trust to fit an alarm unit which automatically dials through to a monitoring centre managed by Invicta Telecare. The alarm is activated by the press of a button worn on a wrist strap or pendant.

For Mrs J, recently prescribed blood pressure tablets were making her unsteady on her feet and on the way to visit a neighbour she fell and landed awkwardly on the kerbside outside her home. Fortunately she had her pendant on and remembered the alarm unit worked within 100 – 200 feet of her home and pressed her button to summon help. Invicta Telecare's trained operator instantly received the call.

As they had no response from Mrs J, they contacted her nearest keyholder. The neighbour discovered Mrs J on the pavement badly injured and covered in blood. Following Invicta's instructions she went into the house and pressed the button on the alarm unit to speak directly to the operator. An ambulance was immediately called and she was rushed to Maidstone Hospital and admitted for two weeks.

The operator said: "Unfortunately we knew from our records that Mrs J had no family nearby who we could inform about the accident but we were able to ensure her property was securely locked and made safe while she was in hospital." Returning home with her arm still in plaster Mrs J said: "I was so frightened, and dread to think how long I would have been outside lying injured in the cold if I had not had my wrist strap on.It is a really quiet cul-de-sac and we rarely have passers-by so my alarm proved to be a real life saver."

Invicta Telecare is the largest independent provider of Telecare services in the UK and is part of Circle Housing Group, one of the UK's leading providers of affordable housing. As part of the group Invicta provides vital Telecare support to over 96,000 vulnerable people across the UK and its local support service helps over 2,000 people to live independently throughout Kent.

Our survey demonstrated that 35.4 per cent of respondents were delivering more services remotely as a way of meeting their savings targets and the majority saw this area as a priority in future. 71.6 per cent were also looking into telehealth (the remote exchange of information between a patient and medical staff; for example blood pressure results monitored in the home and submitted online) as a way of meeting their public health responsibilities. This is an important growth area and will continue to shape the delivery of Supporting People, particularly in relation to health.

The Supporting People brand

Rolling the Supporting People programme into the formula grant raises questions regarding the use of its branding. On the one hand, the term "Supporting People" has a historic context: people in the sector understand what is meant by it and it represents a high quality of outcome based commissioning. On the other hand, many people outside of housing services still do not fully understand what the programme delivers, and we have shown that poor communication is linked to the level of cuts being made at a local level. The concept of "Supporting People" also tends to be associated specifically with housing, when in fact the outcomes it delivers are cross-cutting. In some cases, the use of language around "independent living" and "prevention" may be more helpful, particularly when dealing with health. This is a decision that can only be made at a local level and must reflect the local context, but it is something that all those involved in housing related support should consider.

Case Study 6: HARTS for families

Haringey Tenancy Support (HARTS) for Families was launched by Circle Support (previously EPIC) in 2003 and provides free, housing related support to families living in the London Borough of Haringey. It is funded by the Supporting People programme.

The team provides support to families in numerous areas including housing, income maximisation, accessing education and training, improving physical and mental wellbeing, and accessing other appropriate community services. The service works closely with and compliments statutory services, taking a person-centred, user-led approach that builds confidence and independence. In 2005, HARTS won the National Housing Federation Local Government Partnership Award for its work with Haringey Council.

Client B had endured domestic violence from her husband, and her new born baby had been placed on the Child Protection Register for neglect and abuse. The family's benefits had been stopped and the client had a severe disability. Her property was not adapted properly.

Following short term support from the HARTS team:

- **the client's benefits were restored, ensuring she did not slip into deeper poverty**

- **Disability Living Allowance was re-applied for with support from her GP, potentially saving on future health and support costs**

- **the HARTS support worker reported a gas/fume leak, called out TRANSCO and the central heating boiler was repaired, ensuring they remained healthy and well**

- **a visit from the occupational therapist was arranged to develop more adaptation to help avoid any accidents and acute hospital care**

- **the support worker helped the client to open a Child Trust Fund and to apply for a housing transfer, potentially freeing up a property for another tenant**

- **the client was awarded a £300 Community Care Grant**

- **repairs were made to a broken front door and lock and assurance given that the windows and door would be replaced under the Decent Homes scheme**

- **the client was supported with child protection issues, saving on potential later intervention by social services.**

6 Recommendations

This report makes a series of policy recommendations for both central and local government. For central government we have a long-term, strategic recommendation which will be important in setting the context for housing related support in future. For local government we have focused on practical recommendations which aim to support councils in providing effective joined-up, outcome-based commissioning, with a view to delivering better outcomes for service users and long term savings for the authority.

For Whitehall:

Introduce community budgets

Local community budgets are essential if truly preventative services are to be realised. Without them, preventative support services will continue to generate savings for other local partners such as the NHS and the Police, while the cost of delivery is born by local authorities. With this in mind, it is unsurprising that many councils are responding to financial pressure by cutting their Supporting People budgets. We call upon Whitehall to commit to localism by prioritising support for community budgets. The delivery of preventative services is a cross-cutting issue, and goes beyond local government. Although it is encouraging to see the Department of Communities and Local Government taking a lead on this programme, we would like to see all departments with a role in the local state taking an active role in promoting community budgets, including the Department of Health, the Home Office and the Department of Work and Pensions.

For local authorities:

Recognise the importance of prevention

Councils should prioritise independent living in their commissioning strategies, and recognise the importance of **preventative support services** in relation to this agenda. The benefits of maintaining a specific budget line for this type of work should be recognised by councils. Although these services are discretionary, they have the ability to save millions for the local authority. Cutting them will only put more pressure on other services and cost councils considerably more money further down the line. As our report demonstrates, there are examples of local authorities which have generated savings by introducing innovative delivery models, minimising cuts to front-line services.

Share messages about prevention

There is a need for **better education and communication** within local authorities regarding the value of preventative support services. This is particularly important among elected members, but would also hold value for adult social care commissioners, who may not immediately recognise the benefits of a preventative approach, as they deal primarily with acute services. Where relevant, teams dealing in housing related support should invest time in offering training in their field of work. Cabinet members with responsibility for this service should advocate for its value at a corporate level.

Nominate one portfolio holder

The fact that preventative support services often sit under either the cabinet member for housing or for social care can mean that the service remains in a silo. In reality, it contributes to a wide range of agendas besides these two, including health, public order, community safety and education. It would be sensible for "prevention/independent living" as a concept to be a responsibility of **one portfolio holder** who moves across service areas. Some councils have already developed this model of portfolio and it can contribute to a more outcome based approach to service delivery.

Collect outcomes data

Councils should continue to **collect outcomes data** on housing related support services, although some authorities may want to develop their own local outcome measures. Sitra will be publishing the findings of its consultation on the future of outcome monitoring in October, which may help councils with their own frameworks. It is essential that outcome monitoring of service users is not lost. It was one of the most valuable aspects of Supporting People commissioning and would represent good practice for other commissioned services where appropriate. If the social benefits of the service can no longer be demonstrated, it is left very vulnerable.

"A good outcomes framework is absolutely essential in delivering effective commissioning for housing related support, particularly if you're moving towards a payment by results model. Once people stop collecting outcomes then they will have serious problems showing the value of the programme."

Supporting People Manager

Work with Health and Wellbeing Boards

Officers and elected members with responsibility for Supporting People/preventative support services should ensure they are involved in **shaping the health agenda** from the very beginning. Our survey demonstrated that deliberations around health and wellbeing boards are still at an early stage, with only 16.3 per cent of respondents reporting that they were "meeting regularly and operating well". There is an opportunity for these boards to be shaped by the preventative support agenda and where possible these services should be represented on the board, or on relevant sub-groups. Decision making processes will differ from authority to authority so this will need to be navigated at a local level. The needs of clients accessing support services should be represented on the Joint Strategic Needs Assessment.

Share examples of local innovation

The delivery of housing related support is becoming increasingly localised, with different models emerging in different localities. More work is needed for local authorities to **share these models** and learn from one another's experience.

Conclusion

As this report has demonstrated, the need for effective preventative support services is ever more pressing. With increased pressure on council finances and rising demand for services, supporting vulnerable individuals to live independently in their homes must be a vital aspect of any commissioning strategy. Nevertheless, despite some very innovative instances of service reform, it appears that the Supporting People programme has been an early casualty of savings targets in many authorities. This is easily understood in the context of the pace and scale of budget cuts in local government, but reveals a lack of communication about the value of prevention among key decision-makers.

As councils seek to transform their services while making major savings, there are many lessons that Supporting People can provide and it is important that these are recognised and applied to the delivery of local services.

Ultimately, the value of these preventative support services cannot be fully understood until a more holistic approach to commissioning is undertaken, allowing savings generated in one public service to be realised in another. Community budgets may hold the key to resolving this dilemma, but it will take a collaborative approach on the part of both local services and central government departments to successfully foster such partnerships.

Further reading

Capgemini for the Department for Communities and Local Government (2008), *Research into the financial benefits of the Supporting People programme*.

Group of 14 organisations (see link) 2010, *Four Facts, Four Questions about the future of Supporting People*.
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NHF (2010), *Health and housing: worlds apart? Housing care and support solutions to health challenges*.

Sitra (2010), *Navigating the maze. Housing related support: A guide on engaging with and influencing local governance and commissioning structures*.

Sitra and the Yorkshire and Humber housing related support Group (2010), *Prevention and Personalisation, the case for housing related support*.