

Housing with Support Strategy

Summary for Consultation – people with mental health difficulties chapter

What is it?

This strategy is about accommodation which has some level of support attached to it. The strategy covers various types of housing for people with different kinds of needs. There are 5 main chapters, each one is about the housing needs of a particular group:

- older people
- people with learning difficulties
- people with mental health difficulties
- people with physical or sensory impairments
- young people including those leaving care

Some people have more than one kind of need but broadly speaking housing is arranged around needs in these categories.

The strategy aims to determine what housing with support needs there are in North Somerset now and in future. The council wants to work with health and housing partners to plan what kinds of housing and support are developed in order to ensure they meet the identified needs.

What are we asking you?

We want to know if we are planning the right types of housing for people with mental health difficulties.

We want to know if we are planning the right types of support.

We will describe what we want to do and then ask some questions to find out what you think.

What does the strategy say?

There is a large number of people with mental health difficulties who will require accommodation with support at some point, it is recognised that housing can play a preventative role.

This group is over-represented in homelessness statistics and there is a recognition that there is generally not enough accommodation that can meet their needs.

There are some people who are or become hospital in-patients who require little or no medical treatment but need a safe and nurturing environment.

Some individuals have dual or multiple diagnoses and have very complex needs and or chaotic lifestyles. It can be costly to multiple agencies to meet the needs of these individuals

Existing supported accommodation generally provides for people with lower levels of need and can be oversubscribed as there is a lack of accommodation to move onto.

There is a lack of short term high level support to facilitate people leaving accommodation such as hospital or residential care in becoming less dependent. People needing high levels of support or care may be placed in residential or nursing care outside North Somerset which is neither economic nor ideal.

Recent changes to legislation and funding have an impact on business models for provision. The changes have disincentivised the market leaving significant gaps.

People sometimes need immediate short term support in the event of a crisis, particularly at night. Whilst there is low level floating support there is not a higher level or more intense floating support service that can support people in their own home over 24 hours to enable them to recover at home without losing their tenancy.

In other areas there has been success with ensuring people can access suitable accommodation and also flexible support that can be delivered to them at home at the level that they need.

What we will do?

- To ensure that pooling budgets to invest in preventative solutions is considered across BNSSG partnership in the development of the STP.
- Revisit Crisis house project and consider alternative funding streams to facilitate its development. Develop 1 crisis house for 4-5 people in next 5 years.
- Include consideration of a drop in crisis facility as part of Crisis House project in first instance.
- Review new high level support provision to assess usage with a view to a further development in South if need apparent.
- A multi-agency cost benefit analysis will be undertaken to assess the viability of intensive floating support.
- A working group will be set up to develop new models of funding and development.
- Consider jointly developing a facility for groups where alcohol or drug dependency a factor.
- Engage with wider housing market and establish what models of provision could facilitate an increase in general housing provision for people with mental health difficulties.

Questions

1. Do you think we have identified the right things to focus on?
2. Do you think there are ways we could increase mainstream accommodation for this group?
3. Do you think our proposals to focus on a short term high support provision and a crisis house are appropriate?
4. Do you think that a responsive service to support people at home instead of building based support is the right solution?

5. What provision do you think might meet the needs of people who have a dual diagnosis?
6. Do you have any other comments or suggestions to make about this chapter?