

Divisions Affected – All

Cabinet - 23 February 2021

Recommissioning Services to Support Homeless Adults and Adults at Risk of Homelessness in Oxfordshire

Report by Corporate Director of Adult and Housing Services

RECOMMENDATION

1. The Cabinet is RECOMMENDED to agree the proposed approach to commissioning services to support homeless adults and adults at risk of homelessness in Oxfordshire.

Executive Summary

2. The Crisis housing led feasibility study completed in November 2020 and Oxfordshire Safeguarding Adults Board's review into the deaths of homeless people in Oxfordshire conclude that if we want to put an end to rough sleeping in Oxfordshire we need to change how we commission services, what we commission, and how we work together as a housing, social care and health system that prevents and resolves homelessness.
3. This report sets out how the partnership of six Oxfordshire councils and the Clinical Commissioning Group intends to recommission services to support people who are homeless or at risk of homelessness including rough sleepers. Services will start 1st April 2022 and will look radically different to the current Adult Homeless Pathway and Floating Support services.

Evidence-based Approach

4. The approach to commissioning has been informed by: engagement with people who experience services; providers of support and accommodation services for people across Oxfordshire; and the Crisis housing led feasibility study, jointly commissioned by Crisis, and City and District Council partners. It will build on the existing partnership arrangements with Health and District/City Partners.
5. The Crisis study proposes how the homelessness and housing system in Oxfordshire can become housing led and puts forward recommendations as to

how Oxfordshire can deliver services which can ultimately end homelessness for single adults in Oxfordshire.

6. We have applied learning from the evaluation of the Trailblazer project and from the Oxfordshire Safeguarding Adult Board's (OSAB) thematic review of the deaths of homeless people.

Housing-led

7. It is proposed that we adopt a Housing Led approach to ending homelessness which aims to move people into their own homes as quickly as possible and provides them with the support they need to make it work.
8. The key elements to this are: people have a right to a home; flexible support is provided for as long as it is needed; housing and support are separated ideally; individuals have choice and control; the service is based on people's strengths, goals and aspirations; an active engagement and a harm reduction approach is used.
9. In summary, the overarching areas that we propose to commission include: intensive case management for Housing First; a proportion of shared / dispersed housing with a clear identity and function; fluctuating support – flexible and responsive; specific provision e.g. gender, substance misuse; floating support – flexible and responsive, and that may require a specialist approach; outreach services to rough sleepers; stepdown houses and embedded housing workers to support discharge from hospitals; multi-disciplinary roles to deliver services from a countywide assessment hub.

Accommodation

10. The provision of accommodation will be prioritised. For people who are rough sleeping a rapid rehousing approach will be followed. Where supported accommodation is required, this should be time limited with a focus on moving people into settled accommodation as quickly as possible, rather than making moves into different supported accommodation through a 'pathway' approach.
11. A move into settled accommodation should be made with the necessary support in place, rather than waiting for someone to become 'tenancy ready'.

Alliance approach to commissioning

12. We are exploring an Alliance approach to commission and contracting.

13. In summary, an Alliance model is a form of partnership. There is a higher level of collaborative decision making and shared responsibility for all activities than is usually seen in most partnerships which leads to improved outcomes. Instead of being a group of organisations who each separately undertake their part, coming together occasionally to review progress and report to each other, an Alliance is a more intensive collaboration where everything from planning, implementation, overall financial responsibility, risk and day-to-day management is shared by a group of providers.

Targeted benefits of the proposed commissioning approach

14. Our commissioning approach is a necessary factor in achieving what is set out in our county-wide homelessness and rough sleeping strategy which will lead to:
15. Improved outcomes for people through commissioning the right services for homeless adults, with more adults living independently outcomes and not returning to homelessness.
16. Prevention of care and health needs escalating to higher levels.
17. Systematic collaboration and partnership working with people using services, districts, health, social care and the voluntary sector to match the right accommodation and support solution.
18. Creating the environment to support the delivery of high-quality flexible and responsive services by developing a workforce development programme.
19. The development of high-quality services for people who are homeless in Oxfordshire.
20. Maximising of capacity and improved capability within the supported housing market.
21. Avoidance of hospital admissions.
22. Facilitation of swift and safe hospital discharges and improved flow across the system.
23. A high-quality workforce that is adequately trained and supported.

Corporate Policies and Priorities

24. We are committed to working under the (draft) Oxfordshire's Homelessness and Rough Sleeping Strategy 2021-26 to improve outcomes for people.

25. All local authority and health partners are committed to county wide working and to developing a system for responding to homelessness that is integrated and operates as a county wide system.
26. There is also a commitment to integrating the 'homelessness system' with the health and social care system, particularly mental health services, public health commissioning and accommodation-based (floating) support.
27. The proposal directly contributes to Oxfordshire County Council's aims set out in our Corporate Plan to: create thriving communities for everyone in Oxfordshire where people live safe, healthy lives and play an active part in their community and provide services that enhance the quality of life in our communities, and protect the local environment.
28. The commissioning of services proposed directly contributes to Oxfordshire's Health and Wellbeing Board's priority to improve the resident's journey through the health and social care system (as set out in the Care Quality Commission action plan).

Financial Implications

29. **Provisional budget envelope**
30. Based on our current county funding level and what, in principle, the City and Districts are proposing is in scope of this commissioning exercise, the total funding available is £3.14m. A summary of this is set out in the table below.

Organisation	Current Housing Related Support pool contribution per year	Provisional annual funding from 1/4/22 per year
Oxfordshire County Council	£250,000 (plus £590,000 for floating support and £100,000 for support to adult survivors of childhood exploitation)	£940,000
Oxford City Council	£219,030	£1,230,437
Oxfordshire Clinical Commissioning Group	£150,000	£423,117 (includes consolidation of funding for step down house and embedded housing worker which are currently funded year to year)
Cherwell District Council	£84,930	£353,930
South Oxfordshire District Council	£48,970	£69,370

Vale of White Horse District Council	£48,970	£69,370
West Oxfordshire District Council	£44,700	£53,700
Total	£846,600	£3.14M

31. The Alliance approach will need to include governance arrangements that underpin the contracting and operational framework for the Alliance. These arrangements, that will be set out in a partnership agreement, will include an Alliance Leadership Team that will be accountable for directing and leading the Alliance and will include the Commissioner. Any additional costs to the council associated with managing and maintaining those arrangements will need to be shared by the Alliance.
32. The Alliance approach will need to be underpinned by robust financial risk sharing and open and transparent monitoring arrangements between the parties to the Alliance. The overall funding envelope will be agreed by the council and its commissioning partners. The alliance will need to work within that funding envelope and take collective action to ensure that agreed outcomes are achieved within the available funding.

Kathy Wilcox, Finance Business Partner, kathy.wilcox@oxfordshire.gov.uk
25.01.2021

Legal Implications

33. To achieve the objectives under the model described above, it is proposed that the Council will enter into a Service Contract with each of the participating Alliance Providers as the Alliance itself will not be a separate legal entity. The Service Contract will describe the purpose, functions and governance arrangements and require each Provider to comply with the “alliance principles” to ensure Service delivery and to set out each Provider’s collective responsibility to secure the best outcome for the Service User. It is confirmed that the “alliance principles” will include an express obligation to ensure that nothing in the “alliance principles” shall restrict the Council’s compliance with its statutory obligations under procurement law and will also require that each Provider shall take appropriate responsibility to ensure compliance with competition law. This approach will de risk any sharing of information through the Alliance which could, potentially, give rise to unfair advantage (e.g. pricing information / risk appetite).
34. It is noted that whilst each participating provider, together with the Council, shall be a member of the Alliance leadership team, through which collective governance responsibility of delivery of the Services through the Alliance will be determined within the financial envelope, responsibility to determine the financial envelope itself will be retained by Council (together with its partners (i.e. Oxfordshire City and District Councils and CCG)).

Bede Murtagh – Legal Services, Contracts solicitor
bede.murtagh@oxfordshire.gov.uk - 25.01.2021

Staff Implications

35. None identified.

Equality & Inclusion Implications

36. We will undertake an Equality Impact Assessment as part of the commissioning process. Commissioning services in the way we propose will reduce inequalities and disadvantage, in terms of access to services across the county. People will receive more consistent services wherever they are in Oxfordshire.

Sustainability Implications

37. None at this stage.

Risk Management

38. We will have a risk management plan which will sit alongside the commissioning activities.
39. Initial risks identified are around the commissioning and contract management resource that will be in place in the short term and the risks associated with moving from a dependence on supported accommodation to other housing options such as Housing First, if not managed effectively and within a realistic timetable for transition.
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Contact Officer: Gillian Douglas, Assistant Director Housing and Social Care Commissioning
gillian.douglas@oxfordshire.gov.uk
07503259834