

# Housing Related Support Consultation Report - October 2014

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## **1. Introduction**

This report outlines the methods and findings of the Housing Related Support consultation.

### **1.1 Purpose of the consultation**

Oxfordshire County Council consulted on proposals for implementing the reduction of funding for Housing Related Support services for homeless people, those misusing substances and women at risk of domestic abuse in Oxfordshire.

### **1.2 Timescale**

The consultation was open from 26 June - 17 September 2014.

## **2. Methods**

A range of methods were used to engage people in this consultation:

- Meetings with service users, providers, partners and stakeholders. Meetings were held in each Housing Related Support service and all providers attended Provider Forums. (Appendix 1 and 2).
- An Oxfordshire County Council online survey was open to the public.
- An email (with reminders) was sent to interested stakeholders, (e.g. providers, voluntary and community organisations, health and other partners, elected members and district and city colleagues) inviting participation and requesting dissemination of the survey link.
- Information sheets for service users and key workers were distributed to Housing Related Support services with the consultation documents, questionnaires and freepost envelopes. Posters were provided to services for publicising local meetings.

## **3. Participation in / response to consultation**

### **3.1 Service user meetings**

Pre consultation meetings were held with the Supporting People User Group.

17 meetings were held in total - 11 in existing services/hostels, 4 general consultation meetings which were open to people from any Housing Related Support service and 2 Supporting People User Group meetings.

Most people participated in group meetings apart from some domestic abuse service users who requested individual meetings. Overall, 67 service users attended these meetings.

The Supporting People User Group members attended the meetings to assist with facilitating the discussion.

Supporting People User Group members were invited to 2 separate meetings to give their views.

Participants included men and women, people from black and minority ethnic groups and those with disabilities. With the exception of those from domestic abuse services, the majority of participants were white male.

### **3.2 Provider participation**

Pre-consultation meetings were held with providers and stakeholders (Consultation Timetable, Appendix 2).

20 Connection Floating Support staff held a consultation meeting.

The Offenders Housing Group convened a meeting.

Two provider forums were held during the consultation period:

- 20 participants from all 5 local providers, Oxfordshire County Council senior managers, frontline managers and support staff attended a county provider event.
- 26 participants from 17 providers attended a national provider event in Oxfordshire.
- County, City and District representatives were at both events.

4 out of 5 providers submitted a detailed response.

Domestic abuse and Floating Support case studies were submitted.

The consultation was discussed at the Oxfordshire Domestic Abuse Services Open Day.

### **3.3 Partner participation**

The Districts, City, Oxfordshire Clinical Commissioning Group, Public Health and Community Safety, Police and Probation colleagues were involved in developing the proposal. Most of these also, attended the provider events and submitted formal responses.

The offender housing group includes districts, providers, police and probation representation.

All City and District councils and Oxfordshire Clinical Commissioning Group submitted a detailed response.

### **3.4 Other stakeholder responses**

The Offenders Housing Group submitted a response.

### **3.5 Survey responses**

78 responses have been made to the questionnaire (online/postal). This number includes most responses from providers and partners.

958 people viewed the consultation webpage.

The highest number of responses was to the question on Domestic Abuse services (Appendix 3).

45% (n=32) of respondents were members of the public. Other respondents were provider representatives or staff, representatives from voluntary and community organisations, service users, city or district representatives or employees, carers, partners elected members, User-led organisations. (Appendix 3).

## **4. Findings**

These findings combine responses from all methods of data collection - online and postal surveys, meetings, interviews and written submissions.

The online survey as well the consultation meetings collected qualitative data. The prevailing themes have been drawn out through thematic analysis. Three team members participated in the analysis and reached an agreement on findings.

### **4.1 Key themes**

Overall the responses were not supportive of the proposals. The key cross-cutting themes are outlined below. Many suggestions for improvements were made which are also included.

#### **4.1.1 Prevention**

- The proposals may mean that more people have a housing, safeguarding or health crisis. For example, there may be increased risks to individuals (e.g. death, ill health, substance misuse, violence, homelessness) and longer term costs to society (e.g. to health, police, adult social care etc.).

#### **4.1.2 Independence**

- It was perceived that reduced support will mean that more people will be made homeless and less people will be able to move on.
- Practical support is needed to achieve independence, for example, in terms of help obtaining employment and managing a tenancy, particularly in the light of the introduction of universal credit.

- The need for people to make a contribution was emphasised (e.g. through employment, voluntary work, education and doing cleaning or gardening around the project).

#### 4.1.3 **Impact on women, children and those from BME groups**

- There were many comments about the high percentage of the Domestic Abuse services reduction in funding and the impact on women, pregnant women, children, those from black and minority ethnic groups and those with a disability.
- There was concern that reduction in Floating Support also impacts on the above groups as Floating Support has a more diverse client group than the hostels.

#### 4.1.4 **Staff/providers**

It was considered that:

- There is the need for skilled, experienced, high quality staff to deliver outcomes.
- Lower wages may be an option but staff quality, motivation and retention are likely to be affected, particularly given Oxfordshire's high cost of living.
- Staff should be paid a living wage.
- *"Enable provider to have flexibility in recruiting role to enable specific outcomes to be met."* (National Provider event).
- Commissioning on an hourly support rate: *"Outcomes need to be considered as opposed to specifying hours otherwise there is less flexibility for providers to look at innovative models/alternative ways of delivering services"* (Local Provider event).

#### 4.1.5 **A person-centred, flexible approach**

The views expressed in the consultation indicate that:

- A person centred approach will deliver the best outcomes with flexibility around support provided.
- Definitions are needed of complex needs and low, medium and high level needs.
- Support packages need to be reviewed regularly to ensure people are not receiving too much/little support.
- There were concerns about reduction in 1-1 work and increased group work while recognition of potential cost savings. Group work raises childcare issues, accessibility and high staff skill/cost. 1: 1 is best for people who live in rural areas, are disabled, are traumatised, have complex needs, early on in recovery.
- *"Client needs will vary. Flexibility around lengths of stay for clients - recognition that two years is okay as some will need this and others won't. Clients need to be dealt with on an individual basis."* (Local Provider event)
- Key worker approach to coordinating support and getting the right support in at the right time.

#### 4.1.6 **Level of need**

- It was perceived that there is too great a focus (now and in the proposals) on services for people with high end needs and not enough on services for those who are further into their recovery journey. *(Service user comments)*.

- *If you close Osney, it will have a bad effect on those people who are more likely to get their lives together (and these are) the people who support others trying to recover.* (Osney Court service user meeting).
- Too many people lower down the system go in and out of services which is a waste of money and the bed spaces could be used for others: *"A lot of people using the system are in a cycle of addiction and do not have the drive or motivation to recover."* (Supporting People User Group meeting).

#### 4.1.7 **Pace/timescale of reductions**

- It was felt that an implementation date of April 2015 is a very short timetable.
- Evidence from the impact arising from the first year reductions should inform the second year reductions.
- Reductions should be made slowly so that people can adjust to the changes with less detrimental impact.

#### 4.1.8 **Partnership working**

- A suggestion was made that an opportunity for integrated commissioning across the health, social care and supported housing systems has been missed
- There is a need for greater partnership, communication and multi-disciplinary team working with other agencies and partners such as health (especially mental health expertise), voluntary sector, City and Districts, benefit and social services, substance misuse, family and friends.
- Better liaison between Housing Related Support services e.g. Floating Support services and hostels in order that people are supported as they move on.
- Collaboration between housing providers can be successful.

#### 4.1.9 **Suggestions for savings**

- Lower paid admin staff could be employed to free up key worker time, resulting in fewer key workers but more focused direct client support.
- Reduction in bureaucracy and paperwork.
- Improve targeting: *"I think targeting can still be improved so less time is wasted on inappropriate referrals"* (Online survey).
- Financial input should be made from Adult Social Care, the police and probation.
- As the Domestic Abuse services reduction in funding will potentially impact on children, the council should explore the possibility of funding coming, in part, from Childrens Services.
- Clients help with cleaning and gardening.
- Integrated commissioning across the health, social care and supported housing systems may lead to opportunities for savings across these systems.

## 4.2 **Detailed responses to proposal questions**

With the exception of the questions on principles and outcomes, most responses were not in favour of the proposals.

#### 4.2.1 **Principles and outcomes**

- Overall, there was a good level of support for the principles and outcomes with suggestions for additions. (Appendix 4)
- Some concerns were raised about how achievable or realistic the outcomes are - it is important that every step in the right direction is recognised and built upon and to consider incentives to keep people moving through the system.
- Debate about whether outcomes should be a tool, and whether they are measurable.

#### 4.2.2 **Hostels**

- Overall, participants did not support this aspect of the proposal. However, there was support for maintaining the bed spaces at O'Hanlon and the creation of a new Assessment Centre.
- Clarity around assessment centre - what it involves, how is it paid for, opening hours?
- There were concerns that lower staff costs will result in reduced quality, retention and motivation - staff should be given a living wage, taking in account Oxfordshire living costs.

It was considered that:

- Reduction in support should be spread over all the hostels not just two.
- Support needs to focus on move on and preparation for living independently – reduction in support could put this in jeopardy.
- There needs to be greater flexibility of support - for example, short term support and reduced support when ready to move on.
- Buildings are needed for ensuring people are safe and for achieving the desired outcomes - the need is increasing rather than decreasing.
- Direct access to hostel beds is important so that people can access the Homeless Pathway.
- There is a low level of confidence in the No Second Night Out scheme.

#### 4.2.3 **Move on accommodation**

- Overall, participants did not support this aspect of the proposal.
- There was support for retaining the emergency beds, but concern over the small number of these beds.
- Beds with no support while awaiting a tenancy - some service users voiced support for this principle. *"I feel I had more support than I needed for about 4 months when I was ready to move on"* (Julian Housing meeting).
- Less support would result in less people being able to move on.
- There are external factors that are obstacles to independence especially the cost of rented accommodation in Oxford and benefit reductions when working.
- Concerns about the risk of reducing support, not just to individuals but to the communities they live in and the impact on other services.

- The importance of the City and Districts councils engaging with services was mentioned.
- Suggestion that Move on should be further cut in order to reduce reduction in Domestic Abuse services because "*Move on Accommodation is the second or third stage of the Homelessness Pathway, whereas the proposal aims to cut First Stage response to Domestic Abuse Services*". (Online consultation - Provider).
- *Commission pathway services that look to providers for innovation around move on*" (National Provider Forum)

#### 4.2.4 **Community Floating Support**

- Overall, participants did not support this aspect of the proposal.
- It was felt that floating support prevents people from needing additional support and impacting on other services.
- Suggestion that Floating Support could be used instead of support attached to accommodation.
- Outreach / access value of Floating Support, particularly in rural areas and for people with mobility issues. "*A lot of these people don't engage. The people I work with (21 people) would become homeless without my support...these people can't manage their finances. I see people who are housebound, who aren't engaged and need care and visits to stop things going wrong.*" (Floating Support Connection staff meeting)
- "*If a worker didn't come and see me, I wouldn't be here now*". (Floating support service user).
- Lack of clarity about "innovative new models of support" for Floating Support.
- Concern about reduction of 1:1 support both in Floating Support and Domestic Abuse services. "*Key workers provide 1:1 support - really sorted me out on a personal basis*".

#### 4.2.5 **Substance Misuse services**

- Overall, participants did not support this aspect of the proposal.
- There was concern about the impact on individuals - increased substance misuse and on others (increased crime, domestic violence, anti-social behaviour and increased impact on other services).
- Concern about closure of Osney court from service users who had used it and helped them "*get their lives back together*".

#### 4.2.6 **Domestic Abuse**

- Overall, participants did not support this aspect of the proposal.
- Concern about the proposal for a 40% reduction prior to a review.
- There were many comments about the high percentage of the Domestic Abuse service reduction in funding and the impact on women and children.
- The local helpline is highly valued and the national helpline does not provide the same level of service. "*Think twice about cutting the helpline because people will die*" (Banbury Refuge Meeting).
- Concerns about children including their long term outcomes. "*The children are very settled - moving from here is scary... they have gone from somewhere*"

*unpleasant to here where they are sleeping, eating. They are happy and settled.*  
(Oxford Refuge Meeting).

#### 4.4.7 **The balance**

- The funding reduction for move on accommodation and unsupported beds should be increased, and the reduction in funding for domestic abuse services and Floating Support should be less.
- Floating Support could pick up the reduced funding for support.
- Keep the capacity at West Oxfordshire and increase Cherwell funding by 61K instead of 100K, allowing Cherwell to use capacity at West Oxfordshire when available or by priority.
- It was felt that services are disproportionately focused in Oxford.

#### 4.4.8 **Social and Community Impact Assessment**

- Comments on the Social and Community Impact Assessment as part of the consultation identified potential impacts for women, children, those from black and minority ethnic groups and those with a disability.

## **Appendix 1: Service user meetings**

<b>Date</b>	<b>Venue</b>	<b>Meeting</b>	<b>Number of Attendees</b>
04.7.14	County Hall	Supporting People User Group Consultation meeting	8 Supporting People User Group members
22.7.14	Oxford Refuge	Oxford Refuge Consultation Meeting	4 x Individuals
22.7.14	Oxford Refuge	Oxford Refuge Consultation Meeting	1 x Individual Meeting
23.7.14	County Hall	Oxford General Consultation Meeting	0
23.7.14	Didcot Refuge	Didcot Refuge Consultation Meeting	4 women (3 white, 1 Asian)
24.7.14	Banbury Refuge	Banbury Refuge Consultation Meeting	Group meeting -3 4 x individual meetings
29.7.14	Osney Court	Osney Court Consultation Meeting	2 White Males
30.7.14	St Mary's Centre Banbury	Banbury General Consultation Meeting	1 Female, 2 Male
31.7.14	Simon House	Simon House Consultation Meeting with Service Users	0
31.7.31	Lucy Faithful	Lucy Faithful Consultation Meeting with Service Users	3 males
1.8.14	Bicester Salvation Army?	Bicester General Consultation Meeting	9 Service Users + 3 Volunteers
5.8.14	Project 195	Project 195 Consultation Meeting	1 Group session with 4 Males
6.8.14	County Hall	Oxford General Consultation Meeting	2 Males
7.8.14	Connection Floating Support	Connection - Meeting with Staff followed by Service User Meeting	9 Service Users
14.8.14	Julian Housing	Julian Housing Consultation Meeting with Service Users	1 Male
21.8.14	O'Hanlon House	O'Hanlon Consultation Meeting with Service Users	8 Service Users
9.9.14	Speedwell House	Supporting People User Group Consultation meeting	10 Supporting People User Group members

## **Appendix 2: Consultation timetable - Housing Related Support Services**

<b>Activity</b>	<b>Deadline</b>
<b>Pre-consultation</b>	
Pre-consultation meetings with providers	9 - 19 June
Service user meeting - Supporting People User Group	16 June
Meeting with the Housing and Homelessness Group (Oxfordshire stakeholders)	18 June
Provider forum for Housing Related Support services	19 June
<b>12 week public consultation from 26 June to 17 September 2014</b>	
Online questionnaire live	26 June 2014
Email to stakeholders with web link	25 June
Distribution of Key worker and Service User Information Sheets to services via providers	From 30 June
Supporting People User Group consultation meeting	July
Service user consultation meetings - in Oxford, Banbury and Bicester	July- August
Service user consultation meetings based in services - at least 3 in Oxford and others by invitation	July- August
Stakeholder consultation event - Oxfordshire providers and local stakeholders	Early July
Market Engagement Event - All providers	Late July
Reminder email about consultation	July
Consultation closes	17 September
Decision making at Oxfordshire Health Improvement Board and Oxfordshire Health and Well Being Board	25 September  Autumn 2014

## **Appendix 3: Online responses and demographics**

### **Online responses**

<b>Question</b>	<b>Number of responses</b>
Principles for commissioning	58
Proposed outcomes for service users	55
Hostels	53
Move on accommodation	47
Community Floating Support	50
Substance misuse	43
Domestic abuse	69
The balance	56
Further comments	29
Social and Community Impact Assessment	35

### **Demographics of online responses**

**Number of responses: 78**

#### **Type of respondent:**

45% (n=32) of respondents were members of the public.

30% (n=21) were providers or staff working for providers.

14% (n=10) were representatives from voluntary and community organisations.

14% (n=10) were service users.

11% (n=8) were city or district representatives or employees.

Other respondents were carers, partners (e.g. health service), elected members, User-led organisations.

#### **Area:**

Respondents were from all areas of Oxfordshire, with the largest response from Oxford City.

**Gender:** 71% (n=50) are female and 24% (n=17) are male.

**Age:** The age range of respondents was from 19-84 years, the largest category of respondent is between 35-44 years.

**Ethnicity:** 84% (n=59) were "White British". Two respondents were "Asian or Asian British", one was "Mixed".

**Disability:** 10 respondents report that they have a disability.

NB. The numbers above do not add up to total number of responses as not everyone completed demographic information.

## **Appendix 4 - Suggested additions/changes to outcomes**

- Debate about whether outcomes are a tool or a measure. *"Outcomes star probably does the job well. It recognises varying needs and abilities and covers the right areas"* (National Provider event).
- Importance of independence /reduced dependency - training, employment support, physical activities, doing chores, lead in addressing their health needs (but how realistic with very vulnerable people).
- Importance of high quality staff to deliver outcomes.
- Need to identify best providers who are delivering outcomes successfully.
- Suggested outcomes to be included:
  - Ability to be a good tenant and maintain a tenancy
  - Budgeting, debt and arrears management
  - Lack of anti-social behaviour
  - Engaging with support when needing it.
  - Good neighbour agreements
  - Less deaths
  - Damage to health and overdose incidents
  - People staying with service.
  - Preventing homelessness
  - Personalised support
  - Make positive relationships (not necessarily with family and friends)
  - Good outcomes for children need to be emphasised.

## **Appendix 5 - Media coverage**

Two radio interviews, broadcast on the consultation launch day, both of which were positive: BBC Radio Oxford & Jack FM both concentrated on the proposal meaning that the Oxford hostels would stay open.

There have been two Oxford Mail stories so far, which are both negative: [this story was published](#) on the day of the consultation launch and [this one](#) from 2 July is specifically to do with funding for services for people who experience domestic abuse.

There was a follow-up story on 22 July with the Oxford Mail following a meeting of the Oxfordshire Safer Communities Partnership. One of the items was to do with domestic abuse and Romy Briant, chairman of the Independent Domestic Violence Advice Service, spoke at the meeting and the Housing Related Support consultation came up.

On 24<sup>th</sup> September, there was an [Oxford Mail story](#) about domestic abuse cuts. Article on 2.7.14 in Adjacent Digital Politics Ltd on the consultation relating to domestic abuse "Council may cut funding for abuse helpline."