



Headlines from Policy Think Tank

Supported Housing

Held at Trafford Hall on 20th-21st February 2017

1. Many housing associations provide a **large stock of supported housing**, covering many different needs through very varied organisations, some specialist, some more general, some large, some small. Home Group alone supports nearly 30,000 vulnerable people through its care and support service; Anchor provides specialist housing for over 60,000 elderly people; East Thames & L&Q have around 7,000 supported housing properties; Hanover and Housing and Care 21 have 19,000. The biggest need is for elderly care, but young people from difficult backgrounds, people with learning difficulties and mental health issues, former street homeless people and people with drug and alcohol problems also need special support.
2. **Supported housing saves society from the much greater costs of not helping and supporting people with acute needs** e.g. higher hospital costs, more homeless young people getting into trouble etc. Housing associations do not publicise enough the added value or payback of their care and support services. Supported housing makes a lower margin than standard social housing due to its higher running costs.
3. Supported housing practitioners are very worried **by funding cuts, policy changes and unstable financial environment**. Housing associations wanting to invest in new supported housing cannot do so until funding for the longer-term is clearer. Some providers have pulled out of supported housing as the margins have become too tight. There is a strong consensus on the need for more clarity on future directions and a more stable, more predictable funding regime. NHS funding for mental health care has fallen by 8%, yet there are rising mental health problems among tenants. This leads to more referrals to supported housing without the resources to provide them. It may be better to separate the core housing costs and extra support costs so it becomes clearer where the support costs lie.
4. Some organisations are **radically reshaping the way they work** under budget pressures from benefit changes and stricter caps on housing benefit, particularly for young tenants. Some organisations can make a successful transition to the new regime, for example the YMCA is "tighter" in its organisation, and has been able to stay viable, although some YMCA hostels that couldn't adapt have been forced to close.
5. **Sheltered housing is sometimes hard to let** and in low demand. Housing the vast majority of elderly people in mainstream housing works better. Some adaptation is often necessary. There is **too sharp a cut-off between general housing and specialist housing** for older people. There needs to be more flexibility and a more adaptable housing stock. Where sheltered housing is in very low demand, finding alternative uses and tenures is better than demolition.
6. **Some special needs are changing** for example teenage pregnancy is far less common and some special provision for teenage mums is being cut. On the other hand cuts to housing

benefit for 18-25 year olds, except where children are directly involved may give an incentive to young women to get pregnant to secure full housing benefit help, according to practitioners. Benefit cuts can give the wrong signals and create the wrong incentives.

7. **Downsizing for under-occupying older people requires more choice, some higher quality, on-site security and back-up to make it more attractive.** This would free up larger properties for families. It would help older people manage independently for longer, if they are offered the right kind of setting and the right size unit. Location for downsizers is very important. Smaller homes need to be near transport links, shops and other services. This is a very big issue as one in four over-60s aspire to “retirement living” i.e. housing more suited to their age. Nine million households are headed by an older person.
8. **Reducing some costs in supported housing is possible.** Supported housing sometimes offers more intensive care than needed when some residents need special help but other residents are more self-sufficient – all on a single site. One result can be that intensive levels of support are provided for everyone, rather than only for those who really need it. This makes it more expensive for everyone.
9. **Personal contact and trusting relationships are key to making supported housing work.** It is possible to involve residents in helping provide some of the services. Residents prefer to be active, work when they can and have social contact. They want to use their skills and experiences. But resident involvement needs organising and support.
10. The government is worried about the intense pressure on local authority social care budgets. An extra two billion pounds was set aside in the March budget to help local authorities meet their social care obligations. **Local authorities meet their obligations by commissioning housing associations to provide specialist care. This work carries the risks of contracts not being renewed** as inevitably local authorities often accept the lowest costs. It’s crucial to get the message through to government that this way of funding and providing long-term care may not be long-term the most efficient. It may also damage services.
11. **Devolution offers the potential for reducing costs and offering efficiency gains** through collaboration between local authorities and housing associations covering a whole metropolitan areas. Greater Manchester is experimenting with combining health, housing, and social care provision in ways that may save costs.
12. **Regional differences are very significant and particularly affects funding.** The Local Housing Allowance Cap is much less of a problem in London and the South East where it is set according to high market values than in many parts of the North where rents are low. In some parts of the North, the cap is so low that some supported housing schemes are now unviable.