

Vulnerable People Housing Assessment

People with Mental Health Problems

(Full reference should also be made to Derbyshire Supporting People Strategy 2005/10– pages 41 - 44 and Appendix C – pages 47 - 54)

Summary

Currently, it is difficult to determine the number of people with mental health problems throughout Derbyshire with housing or low-level support needs. Derbyshire Supporting People are working with other agencies to clearly assess this. The Erewash Housing Needs study 2006 indicates that there are 1,859 households in the borough with a member with mental health problems. A snapshot on one day in 2005 showed there were 1,075 people with mental ill health already involved with social services and health services under Care Programme Assessments in Erewash. However there will be many more with less severe mental health problems or not linked with services.

Mental ill health can be linked with, caused by, or be the cause of many other issues such as homelessness, drug/alcohol problems, domestic violence.

The Housing and Support needs of people with mental health problems vary from assessment and referral to appropriate services, emergency and supported accommodation and move-on, to permanent tenancies

Currently in Erewash, we feel that the housing and housing-related support services generally meet needs. There is an expanded provision of supported accommodation and a successful floating support service, as well as good links with the Community Mental Health Teams.

The continuation of the existing provision is of importance in Erewash.

Therefore the current priorities for the future are to ensure the continuation of the current services, and the continued monitoring of changing needs or demand for services.

Number of people with mental health problems in Erewash homeless, in housing need or requiring housing support

Information	Number	Breakdown	
Number in Erewash on a Standard Care Programme Approach Assessment (CPA), or Enhanced CPA. (snapshot – 1 day in February 2005) (Derbyshire Supporting People info)	1,074 in Erewash	Breakdown of Derbyshire figures (8,785 in Derbyshire) 58% female; 42% male Age range:- 16 – 25 7% 26 – 49 40 % 50 – 74 32% 75+ 19%	
Number of people with early onset dementia in Derbyshire (Derbyshire Supporting People info)	30 approx		
Number of households accepted as statutorily homeless – priority need = Mental illness or handicap (1.4.05 – 31.3.06)	9		
Number of households contained a member with a mental health problem (Erewash Housing needs study 2006)	1,859 (3.9% of all households)	Household size	
		One	783
		Two	547
		Three	279
		Four	139
		Five	82
		Six or more	32
		Age of household members	
		No older people	1,259
		Both older & non older people	258
		Older people only	342
		Tenure	
		Owner-occupied (no mortgage)	573
Owner-occupied (with mortgage)	519		
RSL	675		
Private rented	95		
NOTE: Currently, it is difficult to determine the number of people throughout Derbyshire with low-level support needs. Derbyshire Supporting People are working with other agencies to clearly assess the population.			

Housing and Support needs of people with mental health problems, and how these are met in Erewash:

<u>Housing and support needs</u>	<u>How met in Erewash (see below for more detail)</u>
Assessing, signposting, making referrals and allocations to appropriate services	Community Mental Health Teams
Assessment and treatment of those with severe and/or enduring mental ill health.	Community Mental Health Team
Accommodation for those with high to medium support needs	Residential and nursing care. NHS rehabilitation units (Derby and Derbyshire)
Provision for those with low-level support needs:	
Advice, information, mediation to keep at home with relatives, to keep tenancy or other accommodation	Homelessness Prevention Officer and Mediation service
Emergency same night/same week accommodation with support until can return home or move to supported accommodation	P3 Single homeless hostel
Support Workers to help sort out practical issues, and to help access other services – in home, in temporary accommodation, or when moved to permanent accommodation	P3 mental health supported accommodation, Single homeless hostel, P3 mental health floating support
Supported accommodation	P3 Supported Accommodation
Permanent tenancy	Via Move-on protocol

Supported Accommodation and Other Services for People with Mental Health problems in Erewash

P3 Supported Accommodation	36 places – Supported Accommodation in Long Eaton and Ilkeston	Advice and Information. Support workers. Supported accommodation.
P3 Floating support scheme	8 places approx	Support Workers
Fullwood House	5 places supported accommodation	Supported accommodation
P3 Single Homeless hostel	12 places – emergency/short-	Support workers Supported temporary

	term supported accommodation – normally a few days/up to 3 months	accommodation Advice, information and help to move to suitable supported or permanent accommodation
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Protocols/Forums etc

- Move-on Protocol
- Collaborative Working Arrangements between Housing & Mental Health Services (Social Services and NHS trusts). November 1996

Relevant Strategies

Erewash Fit for Purpose Housing Strategy 2005 – 2008:

We consider that there is a need for floating support for all client groups, in particular:further provision for those with mental health problems.

Erewash Community Strategy 2006 – 2009:

Our key priorities:

Priority will be given to the following health related issues: Mental Health

Our improvement targets:

Improve the quality of life of people with mental health problems by 2008 through year on year improvements in access to Crisis adult mental health services

Commitment made by Erewash Council Members & staff to Mental Health projects

None made recently to specific mental health projects

Available Funding

- For support – Supporting People funding, Social Services funding
- Housing Benefit
- EBC Bed & Breakfast budget

Future Housing Needs and Housing-related support needs

The housing and housing related support needs of people with mental health problems appear to be well met in Erewash.

The priority therefore is to ensure ongoing revenue funding for the existing provision.