Care Services Improvement Partnership **CSIP**

AT HOME?

A study of mental health issues arising in social housing

Interim report for consultation

Summary

6th major re-draft v6.civ

"Mental health problems require more than a medical solution; they require a positive response on the part of society to accommodate people's individual needs and to promote mental well-being."

…Action will be needed across government to improve the current experiences of people with mental health problems. The problem… cannot be solved by any one department acting in isolation.

EXECUTIVE SUMMARY

THE PURPOSE OF THE STUDY

This is the preliminary report of an on-going study of the views and experiences of frontline housing staff, in working with tenants with mental health problems. This study sought to explore what housing staff themselves thought actually works, or what would work, to improve communication and co-working between agencies, in order to help maintain vulnerable individuals in ordinary, mainstream or "general needs" housing. It explores in particular their experiences of trying to communicate and work with specialist mental health services, to meet the needs and challenges presented by these tenants. The study was carried out in six Local Authority areas in South Yorkshire and Northern Lincolnshire.

KEY FOCUSSES OF THE RESEARCH

The study covered a range of issues relating to the allocation of properties to individuals with mental health problems. These issues included:
- The scope for discretion and sensitivity in allocations
- The information needs of those allocating housing.
- The impact of new allocations approaches, including "choice-based" lettings.
- The operation of anti-social behaviour policies and procedures
- The perceived phenomenon of "drift" to inner city areas, the role of homelessness, and the importance of efforts to prevent homelessness
- The potential for informal social networks in housing
- The need to include the most vulnerable and at risk in any vision of sustainable community.

KEY FINDINGS

One key finding from this study is that the majority of mainstream or "general needs" social housing staff interviewed saw themselves as providing a significant and valuable, but often un-sung role in social inclusion practice with the most vulnerable. They were very willing to continue in this role, but argued that there needs to be better inter-agency underpinning, and more co-ordinated support from mental health services.

Interviewees generally had a positive attitude towards accepting those with mental health problems as full and legitimate members of the local community. Yet there was frequent frustration that their contribution in assisting and supporting individuals seemed unrecognised - and is often misconstrued - by mental health services.

There are certainly significant differences in the professional cultures and formal responsibilities of housing and mental health services, which can lead to communication difficulties– particularly over information-sharing and confidentiality - which will need to be overcome. But housing workers also had many positive suggestions for confidence- and competence-building measures to improve communications and joint working. (These are reflected in the concluding draft recommendations section.)

The study therefore identifies a significant and as yet largely untapped opportunity for partnership in community mental health. It suggests that there is a strong case for greater involvement of housing and housing management services in sustaining individuals with mental health problems in their own homes. The role of social capital, neighbourhoods and informal social networks through housing needs to be explored more fully, by housing and community care agencies acting in conjunction.

New support services, including floating support, primarily provided through Supporting People ("SP") funding, had been developed throughout the six localities covered by the study. The view was expressed in many areas that there are still simply too few support services. But in general, both frontline staff and managers suggested that the underlying problem is a lack of suitable medium- or high-support accommodation. This, it is felt, leads to individuals still being placed in ordinary housing without the level of support they need.

Equally the statutory regulation and monitoring of both housing and health services needs to recognise the key role that social housing now plays in accommodating the most vulnerable. Existing approaches to monitoring and regulation, it was argued, can actually discourage imaginative good practice.

The study clearly identifies a development vacuum both in local practice and in policy. There is certainly a need for closer joint-working, communication and co-operation between housing and mental health services, in addressing the needs of individuals. But there is the same need for closer inter-agency co-ordination at more strategic and corporate levels over allocations/lettings, and over future development needs. Some proposals over ways forward are included amongst the draft recommendations.

4: RECOMMENDATIONS

A number of broad recommendations for action are then derived from these findings. Many – not all – of these recommendations will involve local agencies meeting and agreeing together what is the best way forward, in their particular local context. This reflects in part the need – most acutely in multi-agency work - to identify the "best fit" practice for the circumstances, reflecting local pressures and the local configuration of services. There is, in short, no one quick good practice "right" solution to complex long-standing and systemic communication deficits.

But equally, it reflects the key message, that, at all levels, staff of housing and mental health agencies, and their tenants/service users, need first and foremost to talk to each other, across agency and professional boundaries, as equal partners in the task of maintaining the most vulnerable citizens in independent living.

We are most keen to invite comment at this stage on these ideas.

Based on the issues raised in this study,

housing services could:

- Incorporate basic mental health awareness training into the training of all frontline staff. (NB: it is seen as good practice for mental health service users to be involved in such training programmes wherever possible.)

- Provide additional training for relevant staff on accessing mental health services.

- Review eligibility criteria and lettings policies to ensure sensitive allocations to those more vulnerable through adverse mental health.

- Review administrative and IT systems to ensure that the organisation can recognise and respond effectively to the needs of those tenants who may be vulnerable because of their mental health problems.

- Ensure that existing tenants are aware of available housing support services, and encourage an atmosphere in which no shame or blame is attached to the need for support.

- Consider developing selected staff as "linkworkers", with a more in-depth knowledge of mental health issues, and the ability to develop contacts with local mental health services. Such staff can then act as a resource and adviser to others within the organisation.

mental health services could:

- Ensure that directories that identify local mental health services, and how to access them, are regularly disseminated to local housing providers.

- Establish clear and workable channels for advice and referral that housing providers can use.

- Encourage a more pro-active inter-agency response from mental health staff to resolve issues that can lead to tenancy breakdown, including a more pro-active approach to obtaining consent to share information with housing staff.

- Establish early referral agreements between in-patient wards and homeless persons' services

- Through assessment and CPA review processes, gather more systematic information on un-met housing needs, including unsatisfactory or unhelpful housing, so that use can be made of this in joint planning of services with housing providers.

mental health and housing services, working together, could:

- Review information-sharing protocols to ensure that the particular information needs of housing services are appreciated and specifically addressed.

- Ensure that agreed protocols are in place to ascertain whether a tenant may have an underlying mental health problem, and to elicit care and support services' assistance to resolve difficulties before steps are taken that would lead to termination of a tenancy.

- Encourage and facilitate shadowing between staff of different agencies, joint training, inter-agency forums, and other local measures to enhance co-operation and joint working at both casework and strategic levels.

- Consult with mental health service users and carers over best use of available housing stock, and in identifying shortfalls in suitable housing, to assist with future development planning.

Supporting People can also contribute to the social inclusion agenda in housing by:

- SP services and commissioners need to ensure that mainstream ("general needs") housing services are involved in identifying needs, shortfalls, and priorities for support services

- SP Commissioning Bodies could consider social inclusion in mental health as a key strategic aim, when assessing the value and relevance of generic and/or in-house support services.

Central government and national regulatory bodies can contribute to the social inclusion agenda in housing by:

- Audit Commission inspections assessing the success of housing services in delivering excellence in housing management could consider the extent to which local authorities reconcile their strategic responsibilities in housing with those in community care. Inspections of the RSL sector could similarly assess RSLs' contribution to local housing and community care strategies.

- The Dept of Health could consider developing a measure of successful and/or co-operative inter-agency working, as one of the "scorecard" of criteria for star rating/annual healthcare check of mental health services.

- ODPM and the Dept of Health (via NIMHE) could explore ways to strengthen the co-ordination of policy guidance that impacts on inter-agency co-operation, encourage good practice and commissioning of further "bridge-building" services and research.

THE WAY FORWARD

Next steps

Within the six localities covered by this study, NIMHE plans to hold a number of workshop events with the following aims:

- To further test out and develop the findings and recommendations of the study
- To engage local mental health service stakeholders in this process
- To explore the potential for implementing some of the recommendations with a view to developing positive practice sites in some of the localities concerned

In the meantime what has already emerged is a wide-ranging agenda for positive change in relations between mental health and housing services. This new agenda should operate in the interests of both sectors, and of their tenants/service users. We hope that the recommendations set out here will, through local follow up and implementation underpinned by national policy and strategic guidance, contribute to the better integration of health and housing practice.

An inter-departmental and inter-agency partnership over housing and mental health is rapidly evolving. The year 2005 sees the creation of the NIMHE Housing Reference Group, and a practice exchange network, facilitated by NIMHE, to bring together all aspects of positive practice and innovation in the mental health and housing field. NIMHE's new website, the "Knowledge Community", is also being developed as a resource for information and practice exchange.

NIMHE will continue to analyse the data and overall findings from this study to date, as part of a growing dialogue, locally and nationally, on positive practice in social inclusion; and will later produce a more extensive report, exploring in greater depth these and other issues arising from this on-going dialogue.

About the project

This study forms part of the mental health, housing and social inclusion partnership programme developed by NIMHE North East, Yorks and Humber Regional Development Centre.

The original fieldwork research, commissioned by NIMHE, was conducted by Robin Johnson, Chris Griffiths, and Tony Nottingham of RJA consultancy. The study was conducted via semi-structured interviews, lasting on average one hour, with 140 frontline staff and managers of housing services in the north of England between March and July 2004. Staff of both housing associations and local authority housing services took part. The study benefited from the support and advice of a number of partner organisations working in both the mental health and the housing sectors.

The draft recommendations were developed by RJA consultancy, in discussion with NIMHE. Final editorial responsibility for the report rests with RJA Consultancy, but the key findings and recommendations have been endorsed by the NIMHE Development Centre (subject to further discussion at the planned workshops).