



# Vulnerable Adults Housing Strategy for Ashford

2011 - 2015

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## Introduction

The Department of Health defines vulnerable adults as 'people with disabilities or mental conditions who are unable to take care of themselves, or protect themselves against harm or exploitation from others'. This Vulnerable Adults Housing Strategy considers how good quality accommodation and support can help vulnerable adults live with a good quality of life, as independently as they choose, and contribute to improving health and wellbeing.

Vulnerable adults do not necessarily fall into neat categories as they may have more than one disability or condition, however many housing and housing related issues are common for all vulnerable adults. Addressing these throughout the development of new housing and the refurbishment of existing housing will give vulnerable adults a greater choice of where and how to live in a safe and secure environment. It follows that good quality housing and housing related support can help in the prevention of illness and improved well being for all vulnerable groups. The physical built environment is only one part of the equation, the right location and support services are vital to achieving good outcomes for vulnerable adults.

The client groups considered in more detail this strategy are:

• Older people	• People with mental health problems
• People with learning disabilities	• People with physical and sensory disabilities
• People with complex (multiple) needs	• Ex offenders and those at risk of offending
• People who misuse substances (including drugs and alcohol)	• Domestic violence victims and those at risk of domestic violence
• People with HIV/AIDS	• Refugees

Not everyone in the above client groups will be vulnerable in terms of their accommodation or housing related support needs; additionally there maybe others who are potentially vulnerable. It is intended that the majority of the outcomes of this strategy's action plan will assist all vulnerable adults in achieving accommodation and support that meets their needs.

The Borough Council recognises that while some client groups are well represented and work is ongoing to enable access to good quality accommodation and support, other groups (substance misusers, ex offenders, people with HIV/AIDS and refugees) need increased efforts to assist them to secure suitable accommodation and support. This Vulnerable Adults Strategy 2011 - 2015 presents a more detailed focus to complement the aims and objectives that are set out in Ashford's Housing and Homelessness Strategies<sup>1</sup>, in particular priorities 3 and 4 respectively.

The accommodation and housing advice needs of vulnerable young people who are homeless or threatened with homelessness are addressed in the Homelessness Strategy. A young persons housing pathway has been developed to offer a planned path through supported housing to settled independent living. The young persons housing pathway is kept under review through the Young Persons Accommodation Forum.

This strategy has been developed by researching local and national information and wherever possible working with organisations, groups, professionals and service users to develop the context against which the action plan is set. National and regional priorities are reflected in this strategy, but local factors will drive the actions in order to achieve the best outcomes for vulnerable adults living in or moving into the borough.

There are several concurrent themes running through National, Regional and Sub Regional strategy and policy for all groups of vulnerable adults:

- Quality of life
- Increasing choice
- Promoting independence
- Prevention of accidents, hospitalisation or residential care
- Reducing isolation, improving social inclusion
- Improved health and well-being
- Equal access to services
- Dignity and respect

These themes are reflected in the aims of the action plan, which wherever possible will be delivered locally, improving community involvement and linking to and enhancing resources, social and economic, within those communities.

The Housing Health and Social Care Group (formally the Housing Care and Support Group) is multi agency group who will monitor and contribute to the implementation of the action plan. This group has a strong track record of delivery as previously developed and implemented the Older Persons Strategy 2004, which this strategy has evolved from.

### **The Action Plan**

The action plan of the Vulnerable Adults Housing Strategy seeks to support priorities identified in both the Housing and Homelessness Strategies; supporting independence and developing partnerships to improve the delivery of housing related services to vulnerable people. Its overall vision is to ensure vulnerable adults have access to a range of good quality accommodation and support services that help improve health and wellbeing and promote social inclusion

The action plan has been shaped following a workshop held at the Housing Strategy and Housing Plus Forum in April 2010. Achieving the aims of the action plan will require strong multi agency working and the inclusion of service users. The Housing Health and Social Care Group has agreed to be responsible for over-seeing the delivery of the action plan. This will ensure close cooperation between different agencies which will be a critical factor in achieving positive outcomes for vulnerable adults during a time of economic restraint, organisational change and embracing a shift to focus on locally agreed priorities.

The aims of the action plan are:

- Increase the range and numbers of supported accommodation available to vulnerable adults
- Develop a greater understanding of the housing and housing related needs of vulnerable adults and improve social inclusion
- Improve access to housing information and advice
- Improve opportunities for independent living in existing housing stock

## The Action Plan

<b>Aim: Increase the range and numbers of supported accommodation available to vulnerable adults.</b>				
<b>Reference</b>	<b>Objectives</b>	<b>When By</b>	<b>Client Groups</b>	<b>Lead delivery partners</b>
1a	Deliver 6 units of supported self contained move - on accommodation	2011	Mental Health	ABC, KCC, KMPT, RPSH, supporting people, Richmond Fellowship
1b	Deliver 6 units of supported self contained accommodation	2012	Learning Disabilities	ABC, KASS, RPSH
1c	Assess outcomes of the learning disability shared housing project and consider feasibility of delivering further shared housing	2011	Learning Disabilities	ABC, KASS, RPSH
1d	Deliver extra care housing schemes in Ashford Growth Area as part of affordable housing requirement, through Section 106 agreements and in accordance with Ashford Extra Care Design Guide	ongoing	Older People	ABC, KASS, RPSH Developers
1e	Ensure early dialogue with planning services and Kent Adult Social Services (KASS) to consider the need for supported housing options, in new developments	ongoing	All	ABC housing and planning services, KASS
1f	Ensure all new social housing stock is built to lifetime homes	ongoing	All	ABC RPSH
1g	Assess council owned land holdings for supported accommodation in both urban and rural areas.	2012	All	ABC
1h	Investigate need and develop extra care housing in rural areas under planning policy TRS5 exception sites for specialist housing	Ongoing	All	ABC, KASS, RPSH, Parish Councils
1i	Engage with and monitor the delivery of the extra care housing scheme as part of the Excellent Homes for All PFI	2013	Older People	ABC, KCC, KASS
<b>Aim: Develop a greater understanding of the housing and housing related needs of vulnerable adults and improve social inclusion.</b>				
2a	The Housing, Health and Social Care Group to assess where there are gaps in information by using partner needs assessments and exchange data to increase shared understanding, identify barriers to accessing accommodation and to inform future priorities.	2011	All	ABC, KASS, lead partner for each client group, Supporting People
2b	Undertake housing needs survey inline with Kent Housing Action Plan toolkit and feed results to Kent Partnership	2010	Learning Disabilities	Ashford Accommodation

	Board to inform future provision.			Forum for People with Learning Disabilities
2c	Ensure the strategic housing market assessment includes vulnerable client groups	Next SHMA	All	ABC, housing and planning services
2d	Include vulnerable adults in housing strategy consultation	Inline with review of HS (2011/12)	All	ABC
2e	Investigate and implement system to reduce harassment and anti social behaviour towards vulnerable adults	2012	All	ABC
2f	Provide 'safeguarding' training to housing officers	Ongoing	All	ABC, KASS
2g	Improve links with Crime and Disorder Reduction Partnership and the Community Safety Unit to highlight areas of concern for vulnerable groups	Ongoing	All	ABC, CRDP, CSU, Accommodation fora
2h	Link into KCC work on housing needs of offenders to improve local understanding.	Ongoing	Ex-offenders and those at risk of offending	ABC, KCC, Probation,
<b>Aim: Improve access to housing information and advice</b>				
3a	Promote and seek feedback from vulnerable adults on the kiosk and online housing plus information portal	ongoing	All	ABC, Accommodation Forums
3b	Increase engagement with 3 <sup>rd</sup> sector organisations, supporting vulnerable adults, to improve understanding of housing options and advice	ongoing	All	ABC
3c	Ensure advice is available in other formats for those who do not have access to a computer	Ongoing	All	ABC, KCC
3d	Engage with GP surgeries and other local information points (e.g. post offices) to provide information about accessing housing advice	2012	All	ABC, PCT, Ashford Gateway
3e	Continue to develop easy read information	Ongoing	Learning disability but available for all	ABC, LD Forum
<b>Aim: Improve opportunities for independent living in existing housing stock</b>				
4a	Improve joint working with other agencies to increase uptake of energy efficiency grants by vulnerable households, including increasing access to grants by benefit maximisation	Ongoing	All	ABC, ESTAC, Pensions Service, HIA, Supporting People
4b	Identify and use all available channels for promoting energy efficiency grants to vulnerable groups	2012	All	ABC, ESTAC
4c	Utilise the Housing Health and Safety Rating System (HHSRS) tool to evidence savings from adaptations to	2012	All	ABC, JPPB,

	support 4d			
4d	Investigate joint funding of minor repairs adaptations to enable discharge from hospital and reduce readmission	2013	All	ABC, PCT, SP, HIA
4e	Increase awareness of private sector landlords of housing related support available to potential tenants through floating support. Enabling move on from supported housing.	Ongoing	All	ABC, SP
4f	Promote HIA handy person scheme via local media	Ongoing	All	ABC, HIA
4g	Develop and implement method for 'matching' applicants with need for adaptations with suitable properties within ABC stock	2014	Physical disabilities	ABC
4h	Continue to support the provision of the Sanctuary Scheme and consider joint working with HIA to assist in delivery of low level security	Ongoing	Domestic violence	ABC, HIA
4i	Review ABC owned sheltered schemes with a view to implementing improvements to physical and social aspects of the schemes	2011	Older people	ABC
4j	Ensure all agencies are aware of the referral mechanism for floating support to enable early referral for vulnerable people in need of time limited support to sustain their tenancy or settle in independent accommodation.	Ongoing	All	SP, ABC

## Local Strategic Background

As a designated growth area, Ashford not only has to continue to provide a range of accommodation and support to meet the needs of vulnerable adults who already live in both the urban and rural parts of the borough but to also plan ahead to meet the needs of a growing population.

The Ashford Sustainable Community Strategy 2008 – 18<sup>ii</sup> has an aim of achieving high quality homes and together with the provision of affordable housing seeks to ensure appropriate provision will be made to meet the housing needs of the elderly and other disadvantaged groups.

A comprehensive statement on how Ashford Borough Council will work with its partners to address the housing and related support needs of people living in the borough can be found in the Ashford Housing Strategy 2008-11. An action within the Housing Strategy was to review the Housing Care and Support Strategy for Older People 2004-2014 and expand to cover all vulnerable adults. The Older Person Housing Strategy resulted in some notable achievements, such as the Homebridge recuperative care project, supporting the PFI project in the delivery of the extra care scheme – Joseph Hadlum Court and changes to provide 24 hour cover for Ashford BC sheltered schemes

In addition The Homelessness Strategy 2008-12 identified a need for move-on accommodation from supported housing and that homeless people with mental health problems, people who misuse substances and ex-offenders have particular needs.

Joint working with other agencies will deliver more effective and targeted services for vulnerable people and it is recognised in the Joint Strategic Needs Assessment (JSNA) for Kent (March 2008), presented by the Primary Care Trust (PCT) and Social Services, that it is important to liaise with the Kent Housing Group and the Joint Policy and Planning Board (Housing) to ensure housing issues are fully integrated into future JSNA work. Subsequently the 2009 JSNA<sup>iii</sup> recommends that housing needs be a priority for the 2010-11 JSNA.

The implementation of this strategy will also contribute both directly and indirectly to several of the Kent Agreement indicators (NI32, 39, 40, 141 and 187). See Appendix 1. The Kent and Medway Housing Strategy is due to be published in the January 2011 and this Vulnerable Adults Housing Strategy will assist in the delivery of the ambition to 'To support vulnerable people in housing need to fulfil their potential and live a high quality life through the provision of excellent housing and support services'.

Central government is consulting on changes to the National Health Service (NHS) through its white paper, 'Equity and Excellence: Liberating the NHS'<sup>iv</sup>, where it sets out the long-term vision for the future of the NHS. The action plan set out in this strategy may need to change and evolve over its lifetime in response to any changes within the NHS.

## Supporting People

Supporting People is a central government programme, administered by Kent County Council. It provides a framework for local planning, commissioning, regulation and funding of housing related support services to help vulnerable people to improve the quality of their lives through the stability and greater independence made possible when housing-related support needs are met.

Housing-related support is defined as:

*“Support services which are provided to any person for the purpose of developing that person’s capacity to live independently in the community or sustaining his/her capacity to do so.”*

Housing-related support can be provided to potentially anyone who is vulnerable, and activities include:

- Understanding and abiding by a tenancy agreement
- Maintenance of safety & security in the home
- Management of finances including debt and budgeting
- Maximisation of income including accessing welfare benefits
- Assistance in setting up home e.g. when leaving prison, or other institutional care
- Accessing training, employment or education (including voluntary work)

Supporting People commissions and funds housing-related support that is delivered as:

- accommodation-based services such as homeless hostels, foyers, specialist supported housing for groups of people such as people with learning disabilities or mental health problems, refuges and sheltered accommodation
- flexible floating support that is tenure neutral and can be delivered wherever people live
- community alarms
- Home Improvement Agencies

As at July 2010, Ashford receives 3.21% of the total supporting people spend which equates to £1,136,046. Ashford also benefits from East Kent and county wide allocations of floating support services and county wide supported accommodation such as women's refuges. Vulnerable people from Ashford can also access specialist supported accommodation for certain client groups such as people with drug problems only available in other districts/boroughs.

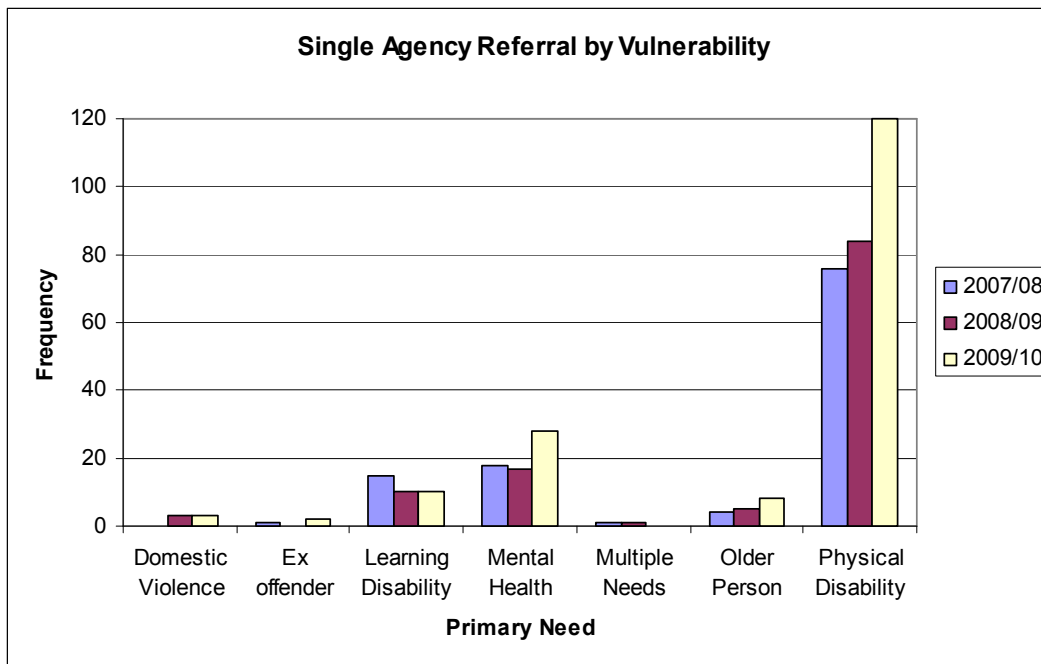
A breakdown of support provided in Ashford and East Kent (which includes Ashford) is detailed in Appendix 2.

### **Single Agency Assessment**

The single agency assessment (SAA) process allows statutory partners, (such as Social Services, The Assessment & Enablement Team of Kent Adult Social Services, Community Mental Health Team) to make a direct referral to the Council of anyone they believe needs to move because they have a health or support need that cannot be met where they are currently living.

The Councils' Lettings Policy allows for additional priority to be awarded to people with a single agency assessment who have a housing need.

The number of referrals has been steadily increasing, in 2007, 102 SAA referrals were received; this increased to 127 in 2008 and to 169 referrals in 2009 and 117 in the first nine months of 2010. Included in the total are a small number of referrals, less than 10%, from the Children and Families Service at Social Services. Referrals from occupational therapy also include those for adaptations for children.



The Joint Policy and Planning Board (Housing) (JPPB) is currently looking at developing a standard referral form for use across the County which will be more efficient for organisations that work cross boundary and enable better comparison of statistics across districts and multi district areas.

### Health and Affordable Warmth

For many vulnerable people improving the thermal efficiency of their home and thereby the ability to heat their home within their budget is vital to their health and well being. Identifying those in fuel poverty and enabling them to apply for grants to improve the thermal comfort of their home and to maximise their income will be critical to meeting the governments target to eradicate fuel poverty by 2016.

Access to energy efficiency grants, for insulation and heating, through the Warm Front programme is via qualifying benefits. Therefore working with agencies to maximise benefit take up will assist eligible households to qualify for energy efficiency grants.

In 2007 16.6% of disabled households, nationally, were living in fuel poverty compared to 11.7% of non-disabled households<sup>v</sup>. It will be important to continue to work with other agencies to increase the uptake of energy efficiency measures to improve the warmth and comfort of the homes of vulnerable adults and reduce excess winter deaths.

### Home Improvement Agency

The Home Improvement Agency offers a service to older, vulnerable and disabled clients to help them remain in their own home. Services include adaptations, repairs and security measures to make the home more accessible and safe. The Home Improvement Agency also works closely with the Borough Council and the Assessment & Enablement Team of Kent Adult Social Services to enable the provision and take-up of the Disabled Facilities Grants.

## Information for each vulnerable adult group

Although each vulnerable adult group is split in to sub sections it is important to recognise that many vulnerable adults may fall into more than one category of vulnerability. It is vital that in these instances the person does not 'fall through the net' when one agency believes another should be responsible for their well being.

### Older People

It is well documented that the population as a whole is ageing. Ashford has seen a 20.3% increase in the population over 50 years old in the 10 years between 1997 and 2007. Ashford is also expected to have the greatest increase, of all the Kent Districts, in over 50s over the 10 years from 2006, an increase of 10,200 people<sup>vi</sup>.

In terms of tenure, owner occupiers account for 79% of the older population with 12% renting from the council. 20% of older people in the borough are living alone. As age increases the percentage of married couples decreases and those living alone increases. The key long-term conditions that affect older people over 65 are dementia, arthritis, stroke and coronary heart disease. These are also the main causes of disability and need for social care. The risk of dementia increases substantially with age. The National Dementia Strategy<sup>vii</sup> identifies that over the next 30 years the number of people with dementia will double. Objective 10 of the National Strategy seeks to ensure housing options, assistive technology and telecare are considered to prolong independent living.

An older person spends between 70-90% of their time in the home so its standard and design are particularly important<sup>viii</sup>. As future generations move towards older age aspirations and expectations for future accommodation will demand high quality accommodation, access to services and facilities in a safe environment, both in the existing housing stock and new build homes.

For many older people remaining to live at home and with appropriate adaptations and support will be the preferred and best option. However there may be those who wish to move or are unable to remain in their own home and it is necessary to have a range of good quality accommodation to meet the older population's needs.

The Council has 450 units of sheltered accommodation. This accommodation is part of an improvement plan, subject to sufficient resources. A review of council owned sheltered stock has been commissioned to consider how best use can be made in light of the HAPPI<sup>ix</sup> report. The Homebridge recuperative care facility at Farrow Court has seven units to help older people make the transition back to independent living after a stay in hospital.

In 2009 the first extra care sheltered development, Joseph Hadlum Court, was completed providing 36 units in Ashford town. This has come forward as part of the Private Finance Initiative in partnership with KCC and Housing 21. The redevelopment of Little Hill (Tenterden) sheltered scheme to an extra care scheme is ongoing as part of the current PFI round, Excellent Homes for All.

To guide the development of future extra care accommodation a design brief<sup>x</sup> has been developed. Three extra care schemes are to be delivered as part of the growth area agenda at Repton Park, Park Farm and Chilmington Green.

The accommodation needs of older people in rural areas are being investigated. The aim is for a number of parishes to work collectively to develop an older persons housing scheme serving a cluster of nearby parishes so that older people can access accommodation in a familiar location.

It is important that older people fully understand all the options available to them, whether it is how to access support to remain at home or what other types of accommodation are available and how to apply for them.

## **Mental Health**

Approximately 1 in 6 of the population has a mental health problem at any given time and 1 in one hundred has a severe mental illness. It is anticipated that there will be an increase in the number of people requiring mental health services because of increase in population not because mental illness is becoming more common<sup>xi</sup>. This is of particular relevance in Ashford as the population increases in line with its growth area status, between 2006/07 and 2007/08 the reported prevalence for mental health in Ashford indicated a 1.8% increase. The projected number of cases of neurotic disorders in 2013 is estimated at 11,092 for Ashford an increase of 13% from 2005.

Safe accommodation in which people feel secure plays a critical role in alleviating mental health problems as having a good home that provides security, warmth and a place within a community is central to a person's well being. Conversely, poor housing or the inability to access housing can impact negatively on mental health. It is important that a range of good quality accommodation is available to assist people with mental health problems to live fulfilling lives within a supportive environment free from discrimination.

People with mental health problems are particularly likely to have unstable and unsettled housing circumstances. Compared with the general population, they are:

- one and a half times more likely to live in rented housing, with higher uncertainty about how long they can remain in their current home
- twice as likely to say that they are very dissatisfied with their accommodation or that the state of repair is poor
- four times more likely to say that their health has been made worse by their housing and
- face eviction because of problems such as rent arrears or problems repairing or coping with maintaining a home

Around nine per cent of applicants accepted by local housing authorities in England as being owed a main homelessness duty are considered to have a priority need for accommodation because they are vulnerable as a result of mental health problems. The use of bed and breakfast or other temporary accommodation can be detrimental to a person with mental health problems. In addition a lack of move on accommodation means some people remain in hostels or in psychiatric wards unnecessarily.

A scheme providing 8 self contained flats with support for people with enduring mental health problems opened in Ashford during 2009. This accommodation will enable people, who because of a lack of a supported accommodation have been living in hospital or residential care, to gain skills and confidence to move towards greater independence. Also during 2009, 2 social rented flats in the town centre were made available as move-on accommodation for people supported by the Community Mental Health Team. A project to provide 6 units from within the existing social housing stock, where the occupant will receive support to enable them to live more independently, is underway.

## **Learning Disabilities**

Expanding the range and choice of housing, care and support services is key to giving people with learning disabilities and their families more choice and control over their lives and how and where they live. This supports the 'valuing people' vision<sup>xii</sup>, that people with learning disabilities have the right to

be full members of the society in which they live, to choose where they live and what they do, and to be as independent as they wish to be.

The number of people with learning disabilities is increasing as, in common with the general population, people are living longer. This means there will be a need for a greater range of housing options as older parents and carers are no longer able to support a family member living at home.

The 2010 needs assessment<sup>xiii</sup> indicates that in Ashford about 300 people have a learning disability, a prevalence rate of 0.3% of the population. Kent Adult Social Services estimate that taking into account the housing growth in Ashford an additional 78 new people with learning disability will require supported housing by 2026 in addition to the current client numbers of 198.

In November 2008 the Kent Partnership Board Housing Implementation Group set the following aims for each district in its Housing Action Plan:

- Each District will hold a regular meeting to talk about housing
- Find out the housing needs of people with a learning disability in each district
- Information that is given by the Council and Housing Agencies is easy to read
- Training on housing options for people with a learning disability to everyone involved with the action plan
- Set up a tool kit for each district that will help them put this plan into action - a tool kit means things that will help people understand
- Make sure each District is working on this Housing Action Plan

The Ashford Accommodation Forum for People with Learning Disabilities was formed in 2007. A multi agency group that includes statutory and voluntary organisations, parents, carers and people with learning disabilities working together to improve the availability and access to a range of housing options and housing related support for people with learning disabilities living in the Borough.

The Ashford District Partnership Group for Learning Disabilities works closely with the Accommodation Forum and feeds into this work through consultation and ongoing liaison around housing and housing related issues.

During 2009 a property has been purchased by a Housing Association and this offers shared accommodation for three people with learning disabilities.

The Borough Council is working with Social Services Community Learning Disabilities Team to develop a small supported accommodation scheme to provide self contained flats with support services tailored to each residents needs.

## **Physical and Sensory Disabilities**

The Independent Living Strategy 2008<sup>xiv</sup> has an aim that disabled people will have greater access to housing, transport, health, employment, education and leisure opportunities and to participation in family and community life.

More specifically for housing the aim is to maximise disabled peoples housing opportunities by:

- Increasing the provision of housing advice and information
- Updating the lifetime homes standard making it an essential element in the Code for Sustainable Homes and making adherence to it mandatory for all public sector funded housing by 2011
- Setting a clear target for the construction of all new housing to lifetime homes standard by 2013, with a commitment to review progress against this target by 2010

- Encourage the adoption of accessible housing register and supporting the dissemination of good practice
- Investing in rapid response repairs and adaptations services
- Developing a method to enable early identification of individuals who are at risk of health and care crises
- Increasing funding for, and improving the disabled facilities grants system
- Continuing to invest in the Supporting People programme which promotes independent living by providing housing related support for those who need such support

The Ashford Housing Needs Survey 2005 detailed the particular disability that individuals identified and showed that 18.5% of households in the Borough contained somebody affected by a disability or long term illness. When asked the nature of the disability by far the largest identified disability was difficulty with walking; affecting 51.9% of respondents with 9.8% of households containing a wheelchair user, although only 28.1% of people identified as wheelchair users lived in a property which had been suitably adapted. In Kent the greatest proportion of people registered blind or partially sighted are over 75, similarly this age groups shows the highest number of new registrations.

The need for life time homes is strengthen when including families that have a disabled child. In July 2010, six families wit a disabled child were registered on the Ashford Housing Register waiting for an adapted property.

In existing homes, adaptations can assist a disabled person to live a more comfortable and fulfilling life. During 2009/10, 60 Disabled Facilities Grants adaptations were completed at a total spend of over £450,000. Of these 4 cases were adaptations for a child living in the household. Within its own stock the Borough Council funded adaptations in 2009/10 to a cost of £170,000.

The Home Improvement Agency can assist disabled people by identifying where adaptations could improve safe accessibility in and around the home, advise on grant funding available and undertake minor works to improve safety and security.

### **Complex (Multiple) Needs**

Due to the range of people affected and the multiplicity and complexity of their needs it is only possible to consider in broad terms how their housing needs can be addressed. People with complex and multiple needs can often be at a high risk of homelessness and rough sleeping.

Wherever possible the person's accommodation needs and aspirations should form part of a holistic approach to addressing their needs. Maximising the quality of life for people with complex and multiple needs will require a range of accommodation from residential to self contained units as will ensuring the person themselves is, as far as is possible, involved in the deciding how and where they wish to live.

### **Ex-offenders and those at risk of offending**

It is recognised that settled and suitable housing can be the foundation of every other part of rehabilitation, resettlement, and managing risk of offenders<sup>xv</sup>. If an offender has a stable address the critical steps of getting and keeping a job, registering with a doctor and getting into drug treatment are made much easier. Poor housing is one of a number of factors that can lead to a person offending, therefore the development of good quality accommodation and access to services can assist in reducing offending rates.

Prisoners may have a number of other problems that can affect their ability to sustain stable accommodation, the Joint Strategic Needs Assessment for Mental Health notes that 90% of prisoners have substance misuse and /or mental health problems, personality disorder is common and 9% of the prisoner population suffer from a severe and enduring mental illness. Specialist services to support offenders to access and maintain stable accommodation will reduce the risk of re-offending.

Recognising the importance of settled accommodation for both the offender and the wider community Ashford BC is signed up to the Kent Multi-Agency Protocol for the Housing and Resettlement of Offenders. The protocol's main focus is on a preventative agenda in order to maintain tenancies, prevent loss of accommodation and to reduce the risk of homelessness to offenders. The protocol establishes a framework to ensure the timely engagement with offenders and housing providers to, wherever possible, secure accommodation for offenders in a planned way.

Often ex-offenders become part of the street or hidden homeless due to their chaotic lifestyles. To be able to access accommodation is a challenge to this group as not only will they be lacking in life-skills which others may take for granted, but also they may have other needs affecting their behaviour. These other needs may be drug/alcohol misuse, mental and physical health issues, as well as educational needs. Offenders who are of no fixed abode may benefit from living within supported accommodation based service which would allow them to begin the process of building their skills to re-integrate into the community appropriately.

The recent study *The Impact of Offenders and Prisons on Kent Public Services*<sup>xvi</sup> supports the importance of settled accommodation and that it is the major issue upon which effective and sustainable resettlement of offenders into society succeeds or fails.

Not all offenders need accommodation, but many will need support to maintain the accommodation in which they live, as they often walk away from difficulties in their lives. In some instances it is the relationship between their partners, children and other immediate family which may need to be resolved. Good intervention by floating support will assist in preventing homelessness, especially those that could be classified as intentional.

Settled accommodation for offenders and those at risk of offending has benefits for the wider community as well as the individual and their immediate family.

### **People who misuse substances**

People engaged in substance misuse, or in treatment to reduce substance misuse are very vulnerable. Access to accommodation can be problematic due to factors influenced by their substance misuse such as anti social behaviour, rent arrears and illegal activity.

However, settled housing is essential if people are to address their substance misuse and their other physical, mental and emotional health needs, whether adopting a harm minimisation or an abstinence approach. Likewise, housing-related support is just as important, helping people to remain in their existing housing, or preparing them for independence in anticipation of moving on from supported housing. Floating support is more effective when delivered by providers with specific knowledge around substance misuse.

A range of housing options can be advantageous for this vulnerable group. Some people may not be able to access accommodation if they are not engaged in a treatment programme. A project in North America 'Housing First'<sup>xvii</sup> considers housing as a basic human right and provides permanent housing for people directly from the streets then addresses their needs.

All supported housing in the South East is for people who have already accessed treatment and are committed to continued engagement and abstinence. With less than 100 units across the South East spaces are severely limited<sup>xviii</sup>.

Recent figures published by the National Treatment Agency (NTA) indicate that 114 adult Ashford residents started a new treatment journey in structured treatment during 2009/10, of whom 11% indicated that they had a housing problem (includes those with urgent housing problems, NFA).

Data collected from alcohol treatment providers in Kent show that there were 149 Ashford resident adults in structured alcohol treatment in 2009/10. 6.7% of these reported having a housing problem at the point they entered treatment.

Access to mainstream housing, social and private, can be difficult for this group. A shortage of social housing and potential exclusions if anti social behaviour issues arise can reduce the opportunity to access this tenure. Private landlords may not accept people with a history of substance misuse.

With limited accommodation in the Borough and only 2 supported accommodation schemes that will accept people with a drug and/or alcohol problem it is likely that many people have to leave the borough to seek assistance in other areas.

### **Domestic violence victims and those at risk of domestic violence**

Domestic violence and abuse can affect people from all social and economic backgrounds, regardless of age, ethnicity, religion or sexual orientation. The majority of victims are women but men can also be victims of domestic violence.

Domestic violence accounts for 16% of all reported violent incidents. It has more repeat victims than any other crime, with repeat victimisation accounting for 73% of all incidents of domestic violence with over one in four (27%) victims having been victimised three or more times<sup>xix</sup>.

Accommodation, and related support services, can play an important role in the resolution of interpersonal violence and conflict, ensuring adult and child victims are afforded safety and security. The Homelessness legislation was strengthened in 2002 by extending priority need for accommodation to people vulnerable because they fled their home due to violence.

The women's refuge in Ashford provides 16 units of self contained accommodation and support services. The Sanctuary Scheme provides additional security measures for those remaining in their own home. During 2009 the scheme has enabled 55 families to remain in their homes, preventing possible homelessness

A joint domestic violence strategy is being developed in partnership with Maidstone Borough Council with whom ABC also jointly funds a domestic violence officer.

### **People with HIV/AIDS**

HIV is the fastest growing serious health condition in the UK. By 2010 it is estimated that more than 100,000 people in the UK will have an HIV positive diagnosis<sup>xx</sup>. The numbers of HIV infected individuals accessing care in Kent is continuing to rise. In 2006 there were 40-60 people per 100,000 population in the East Kent Coastal Primary Care Trust area living with HIV. Kent County Council

currently provides support to 193 service users living with HIV/Aids, 70 of these services users are supported across Ashford, Maidstone and Shepway<sup>xxi</sup>.

Effective treatment has meant that HIV need no longer be a terminal illness but, for most people, a long-term manageable condition. It is, however, a complex condition that can impact on many areas of an individual's life and it is widely recognised that good quality, secure housing is crucial to maintaining a person's physical and mental well being. Lack of good quality housing can exacerbate existing conditions and make people vulnerable to contracting other illnesses, lead to depression and social isolation, make adhering to a treatment regime difficult, and undermine privacy which can make people vulnerable to discrimination and harassment

As an ageing population 1 in 13 adults who are HIV positive are over 55. The needs of HIV positive adults seeking sheltered accommodation should be considered especially in terms of the knowledge of staff in the illness and confidentiality.

## **Refugees**

For the purpose of this strategy refugees are those people who have been granted leave to remain in the UK. Refugees have the same rights to housing, housing benefit and other forms of support as British citizens. In most cases they also have the right of family reunion, which means making arrangements to bring other family members to join them. If they had previously had accommodation under NASS (National Asylum Support Service), once accepted as a refugee any support from NASS is withdrawn after only 28 days. People then become responsible for finding their own accommodation and, whilst some will make arrangements with family and friends or may have the ability to fund accommodation themselves, most will seek accommodation through local authorities or in the private rented sector and will be reliant on support services. Many of the people concerned will not initially speak English and may be badly affected by what has happened to them in their home country.

Appropriate housing is crucial if refugees are to be able to integrate and settle successfully in the UK. Refugees should have access to safe and decent housing and be able to participate fully in housing decisions which affect them and their communities. Accessing secure accommodation is essential for:

- Providing a sense of security following their experience of having to leave their home country
- Starting to build a new life
- Allowing other family members to join them
- Providing a permanent address for job applications and benefit claims
- Allowing wider access to services and healthcare

The supporting people report of the housing related support needs of minority ethnic groups identifies that young refugees are placed mainly in private rented accommodation and need support with applying for welfare benefits, managing finances and other life skills. With language difficulties these problems can often be exacerbated but the known needs of such individuals can often be met through existing mainstream provision.

## **Resources**

With a change of Government and the emphasis of the coalition on the requirement to reduce government spending it is currently uncertain what levels of funding may be available for the next 3 years until the outcome of the Comprehensive Spending Review in October 2010 is known.

The PFI with KCC will bring forward the redevelopment of the Little Hill Sheltered scheme to an Extra Care scheme.

The Council has commissioned Pollard Thomas Edwards architects (PTEa) to undertake a review of its older sheltered schemes, funded out of the Housing Revenue Account.

Supported housing for vulnerable adults will be considered as part of the affordable housing quota on section 106 sites, however this will be dependent on securing grant funding from the Homes and Communities Agency for the build programme and funding for housing related support, usually through the Supporting People programme.

The multi-agency Housing Health and Social Care Group will be instrumental in seeking ways to resource the action plan, potentially through pooling of budgets, redirecting resources to achieve savings elsewhere (an invest-to-save approach) and identifying alternative delivery mechanisms and partners.

### **Monitoring**

The progress in achieving the objectives set out in this strategy will be monitored by Ashford Borough Council and reported to the Housing, Health and Social Care Group.

## **Appendices**

### **Appendix 1 – Kent Agreement Indicators**

NI 32: Repeat incidents of domestic violence

NI 39: Rate of Hospital Admissions per 100,000 for Alcohol Related Harm

NI 40: Number of drug users recorded as being in effective treatment

NI 141: Percentage of vulnerable people achieving independent living

NI 187: Tackling fuel poverty – % of people receiving income based benefits living in homes with a low energy efficiency rating

Appendix 2 - Supporting people services Ashford and East Kent 09/10

Ashford

Primary Client Group	Accommodation Based Service		Community or Social Alarm Service	Floating Support Service	Home Improvement Agency	Grand Total
	Long Term	Short Term				
Older people with support needs	452		1172		200	1824
People with a Physical or Sensory Disability	8					8
People with Learning Disabilities	18			11		29
People with Mental Health Problems	10			33		43
Single Homeless with Support needs		11				11
Young People at Risk		21				21
<b>Grand Total</b>	<b>488</b>	<b>32</b>	<b>1172</b>	<b>44</b>	<b>200</b>	<b>1936</b>

East Kent

Primary Client Group	Accommodation Based Service		Community or Social Alarm Service	Floating Support Service	Home Improvement Agency	Grand Total
	Long Term	Short Term				
Generic				291		291
Offenders or People at risk of Offending				22		22
Older people with support needs	17		17			34
People at risk of Domestic Violence				78		78
People with Drug problems				58		58
People with Mental Health Problems				116		116
Single Homeless with Support needs				134		134
Teenage Parents				88		88
Young People at Risk				120		120
<b>Grand Total</b>	<b>17</b>	<b>0</b>	<b>17</b>	<b>907</b>	<b>0</b>	<b>941</b>

### Appendix 3 – Glossary of terms

ABC	Ashford Borough Council
CDRP	Crime & Disorder Reduction Partnership
CSU	Community Safety Unit
DFG	Disabled Facilities Grant
ESTAC	Energy Saving Trust Advice Centre (formerly Kent Energy Centre)
HIA	Home Improvement Agency
JPPB	Joint Policy and Planning Board (Housing)
JSNA	Joint Strategic Needs Assessment
KASS	Kent Adult Social Services
KCC	Kent County Council
KDAAT	Kent Drug and Alcohol Advice Team
KMPT	Kent and Medway NHS and Social Care Partnership Trust
LD	Learning Disability
MH	Mental Health
NASS	National Asylum Support Service
PCT	Primary Care Trust
PFI	Private Finance Initiative
RSPH	Registered Provider of Social Housing
SP	Supporting People
Fuel poverty	A household in fuel poverty is one where more than 10% of income is needed to heat the home to an adequate standard of warmth. Fuel poverty can come about as the result of a combination of poor energy efficiency in homes, energy prices and low incomes.
Housing Plus	Housing Plus is a service developed by Ashford Borough Council and a range of partners to offer advice and assistance on housing options, employment, training, volunteering opportunities, benefits and debt advice. Available from both the Ashford and Tenterden Gateways.
Learning Disability Accommodation Forum	A multi-agency group including service users that develops ways of improving access to housing and housing advice for people with a learning disability in Ashford Borough.
Mental Health Accommodation Forum	A multi-agency group developing ways of improving access to housing and housing advice for people with mental health problems in Ashford Borough
Move on	A term for accommodation that is for a short period (usually up to 2 years) to enable a person to receive support with the aim of being able to move to and sustain independent living
Section 106 Agreement	Section 106 (S106) of the Town and Country Planning Act 1990 allows a local planning authority to enter into a legally-binding agreement or planning obligation with a landowner in association with the granting of planning permission. These agreements are a way of delivering or addressing matters that are necessary to make a development acceptable in planning terms. They are increasingly used to support the provision of services and infrastructure, such as highways, recreational facilities, education, health and affordable housing.

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