

Strategic needs assessments: health, housing, care and support

A research paper making the case for
housing-related support in JSNAs and
SHMAs in the East of England

May 2010

Table of Contents

Executive Summary.....	1
Recommendations.....	5
1. Introduction.....	6
2. The case for housing-related support.....	8
3. Background and guidance for JSNAs and SHMAs.....	20
4. Current assessment of need for housing-related support in the East of England.....	30
5. Setting an agenda for action in JSNAs.....	38
6. Setting an agenda for action in SHMAs.....	41
7. Strategy for action	45
Appendix 1: Sources of Information.....	49
Appendix 2: Abbreviations used in this report	56

Acknowledgements

This research paper has been produced by a multi-agency steering group:

Helen Heaps	Project Manager, Supporting People East Region Group
Sue Beecroft	Cambridge housing sub-region
Clare Smith	Chair of the Steering Group, Supporting People, Suffolk County Council
Luke Ward	Department of Health
Laurina Compton	East of England Local Government Association
Sarah Rowe	Bedfordshire housing sub-region
Mick Sanders	Supporting People, Norfolk County Council
Becky Ashley	Homes & Communities Agency

It is based on research undertaken by Strategic Solutions and Associates.

Executive Summary

The purpose of this paper is to help ensure that future Joint Strategic Needs Assessments (JSNAs) and Strategic Housing Market Assessments (SHMAs) in the East of England provide full and appropriate evidence of housing-related support needs to inform decision-making and the commissioning of services. The project was managed by Supporting People East Region and based on research commissioned by the former East of England Regional Assembly and the Department of Health, undertaken by Strategic Solutions & Associates.

The objectives were to:

- Identify which needs for housing-related support services should appear in JSNAs and SHMAs, on the basis of existing policy.
- Examine the extent to which these needs have been covered in the region's JSNAs and SHMAs, or through information from other sources.
- Identify the implications for service planning and delivery, highlighting any gaps in coverage particularly where these relate to the needs of vulnerable people.
- Identify examples of good practice in the assessment of need.
- Make recommendations aimed at addressing the specific issues identified.

The success of the approach proposed in this paper will depend on achieving widespread recognition of the vital role housing-related support can play in achieving partners' strategic aims around:

- Sustainable communities.
- The health and well-being of vulnerable people.
- Combating health inequalities and social exclusion of many vulnerable people.

It will be particularly important for those involved in strategic decision-making, in commissioning services and investing resources for the future to understand and recognise the value of housing-related support in improving outcomes for residents and reducing long-term demand for services.

Implementing the recommendations in this report will help decision-makers to develop this understanding; to make the case for housing-related support when local priorities and targets are being set; and in the distribution of resources for vulnerable people.

What is housing-related support and why is it important?

“The primary purpose of housing-related support is to develop and sustain an individual’s capacity to live independently in their accommodation ... a range of services and activities can be tailored to an individual’s specific needs”.¹

Housing-related support enables a wide range of vulnerable people to remain in their own homes and live independent lives in their communities in a way which would be more difficult without the support. The support can make the difference between success and failure for people who seek this independence, and can be essential for people receiving care at home. It also plays a key role in prevention² where, for example, a person who struggles to settle and repeatedly becomes homeless is able “break the cycle” and remain in their home, with the appropriate support.

Perhaps the strongest case for providing housing-related support is the cost to vulnerable individuals and local communities of failing to do so, in terms of worse outcomes for those who should receive services and also financial costs to the system. This is evident in the scale of public funding that would be needed to compensate for all the negative consequences of vulnerable people being left without adequate, joined-up support.

What assessments of need are required?

The production of a JSNA is a statutory requirement for every upper tier local authority area, and is the joint responsibility of directors of public health, directors of adult social services and directors of children’s services. They are intended to provide a comprehensive base of evidence for current and future needs for health and well-being and, this paper argues, should include an assessment of the future needs for housing-related support.

The Sustainable Community Strategy should set out the vision and priorities for a local area, delivered through the Local Area Agreement and informed by needs identified in the JSNA. If the need for housing-related support has not been included in the JSNA, key needs for the local population may be missed, potentially leading to deteriorating outcomes and reduced efficiency.

Similarly, the provision of supported housing may fall short of need if this is not assessed in the area’s SHMA, particularly if information on housing-related support is not available from the JSNA.

¹ CLG, *Creating Sustainable Communities: Supporting Independence. Consultation on a strategy for the Supporting People Programme* (2005)

² DH, *Commissioning Framework for Health and Well-being*, 2007; and Capgemini, *Research into the Financial Benefits of the Supporting People Programme*, (2008)

What should be done?

This paper sets out expectations of JSNAs and SHMAs to help those responsible to orientate future work:

- JSNAs need to include an assessment of future need for housing-related support, including specific outputs which can be evaluated against evidence of other needs for health and well-being.
- SHMAs need to include information on predicted future need for supported housing and housing-related support. They should draw on the JSNA process and specifically, the assessment of the future need for housing-related support, which can be used as an input to the SHMA. The task for the SHMA is to then translate that need into its own currency, namely the need for housing and the effect of housing-related support on housing markets.
- JSNAs should offer the most recent information and analysis, preferably on-line, so they provide up-to-date assessments for use by others. The same should be considered for SHMAs, however this depends on the methodology used, capacity of those involved and frequency of updating.
- To support good communication partners should work towards common terminology, definitions and units, to make separate assessments more explicit and understandable.
- All stakeholders should have an opportunity to inform these assessments and key stakeholders are actively involved in the process.

The owners of the strategic approach proposed in this paper might be:

- Directors of adult social services, public health, children's services and community services.
- The regional JSNA group.
- Heads of Supporting People.
- The Supporting People East Region Group.
- District and borough council housing services.
- Sub regional housing groups, working separately or through the Regional Housing Advisory Group (or its successor body).

Beyond these bodies, key stakeholders are likely to include the East of England Local

Government Association and the Department of Health who should be able to influence policy and support improved alignment.

Most of all, success in this endeavour is likely to require these organisations to develop a degree of shared vision in wanting the proposals to succeed, and providing leadership in pursuing this.

May 2010

Recommendations

1. Supporting People commissioning bodies, or their equivalents, should produce their own robust assessments of need for housing-related support to inform service planning and delivery, and ensure that the outputs are available for inclusion in JSNAs and SHMAs.
2. National Guidance on producing SHMAs should be revised to make explicit reference to how they relate to JSNAs, and in particular how data concerning future needs for housing-related support should inform assessments of housing need and housing markets.
3. All JSNAs in the region should include an assessment of future needs for housing-related support of different types, for all vulnerable client groups, designed to inform strategic decision-making processes.
4. When work is undertaken to revise or update the region's current SHMAs, this should include an assessment of the need for housing for the appropriate client groups in each area and to take account of the local JSNA.
5. Although there is an active regional JSNA network and SPERG coordinates Supporting People at a regional level, SHMAs do not have a similar network. It is recommended that an East of England SHMA project leads group is established to allow best practice (including comparing methods, costs, approaches and outcomes from each assessment, as they are created and updated) to be shared across the region. The group will help form links between the East of England JSNA Leads Group and SPERG, to ensure SHMAs and JSNAs are appropriately aligned and that the recommendations within this research paper are implemented.
6. It is recommended that the East of England Local Government Association, together with key partners and stakeholders, play an active role in facilitating the dissemination of the study's findings to begin the process of translating the strategic approach proposed in this paper into an action plan.

1. Introduction

Background and objectives

- 1.1 The project was managed by Supporting People East Region Group (SPERG), supported by a small steering group. Its purpose is to help ensure that future JSNAs and SHMAs in the East of England provide full and appropriate evidence of housing-related support needs, so that these, in turn, can be properly taken into account when the commissioning of services for vulnerable people and service users takes place.
- 1.2 The paper is based on research commissioned by the former East of England Regional Assembly and Department of Health Eastern Region Team and conducted by Strategic Solutions & Associates.
- 1.3 The objectives were to:
 - Identify which needs for housing-related support services should appear in JSNAs and SHMAs, on the basis of existing policy.
 - Examine the extent to which these needs have been covered in the region's JSNAs and SHMAs, or through information from other sources.
 - Identify the implications for service planning and delivery, highlighting any gaps in coverage.
 - Identify examples of good practice in the assessment of need.
 - Make recommendations aimed at addressing the specific issues that are identified, including plans for implementation and dissemination.
- 1.4 The paper includes all client groups able to benefit from Supporting People services and also the target groups identified in the regional Vulnerable Adults programme (see paragraph 2.7).
- 1.5 It seeks to address a series of connected questions:
 - Are housing-related support services essential for the health and well-being of particular groups within the region's population?
 - If so, is the need for these services being properly assessed? If not, how can this be rectified?
 - Are arrangements in place to ensure that decisions concerning the commissioning of services are properly informed about the respective needs for housing-related support? If not, how can this be addressed?

- 1.6 The last of these three issues places JSNA at centre-stage. SHMAs have a significant and complementary role as they seek to identify gaps and overlaps in the housing market, and to quantify housing needs. This can be affected by housing-related support and supported housing, in that a lack or surfeit can affect the working of the housing market, and residents' ability to secure the housing and support they need or want.

Methodology

- 1.7 The research was conducted in two phases. Firstly a document review was undertaken of:
- Government policy on housing-related support.
 - The regional policy framework.
 - Existing JSNAs and SHMAs in the region.
 - Potential examples of good practice.
- 1.8 Following the first phase, a case was constructed for local areas making a robust assessment of housing-related support which could be used to:
- Inform decision-making across the region.
 - Examine how strategic assessment and alignment of various needs might be best pursued in the region.
 - Suggest how JSNAs and SHMAs could fit into this.
 - Recommend what actions could be taken to bring about the required change.

2. The case for housing-related support

- 2.1 This chapter provides a brief overview of why housing-related support is important as a way of improving outcomes in the population and why all commissioners should be aware of it.

Supporting vulnerable people

“The primary purpose of housing-related support is to develop and sustain an individual’s capacity to live independently in their accommodation.... A range of services and activities can be tailored to an individual’s specific needs”.³

- 2.2 This quote encapsulates the spirit of housing-related support services. Some people live with various forms of vulnerability and, as a result, may need support to overcome the challenges of managing and running their homes, and dealing with the everyday tasks falling to them as tenant, home-owner, and tax- and bill-payer. They may also need support in gaining access to accommodation in the first place.
- 2.3 This paper is therefore concerned with vulnerable individuals’ need for this practical support to help them access and/or maintain the occupancy of their home and so achieve a satisfactory quality of life in it. Vulnerable individuals can be identified with respect to different client categories, and these, in turn, can be grouped in relation to broad characteristics. The grouping below was suggested in the initial consultation version of the national Supporting People Strategy³. The three broad categories are:
- **People in receipt of care with support.** Members of this group need care from health and/or social services to maintain their quality of life. Many may also require housing-related support to prevent further erosion of their independence. Indeed, people in this group may already be living in some form of supported or adapted housing in the community. The group includes:
 - people with learning disabilities
 - frail elderly people
 - people with long-term illness
 - people with a severe physical or sensory disability.
 - **People receiving support to live independently.** People in this group do not need care services on an on-going basis, but will require assistance and support to maintain their independent living. Their needs can often be

³ CLG, *Creating Sustainable Communities: Supporting Independence. Consultation on a strategy for the Supporting People Programme* (2005)

addressed with the assistance of housing-related support and in some cases will be required for the long term.

- People receiving support to live independently include:
 - older people with support needs
 - people with moderate physical or sensory disabilities
 - older people with mental health problems
 - people with an illness that is more easily “manageable”.

- **People at risk of social exclusion.** This third group covers a broad range of vulnerable adults. Some may have health-related issues that require short-term hospital care, but residential care or long-term hospitalisation is generally inappropriate. Housing-related support services often act as a “safety net”, providing an anchor in what is sometimes viewed as a rootless or chaotic lifestyle, supporting people through a short-term crisis, providing resettlement support and enabling people to manage their own lives once again. This group includes:
 - single homeless people with support needs
 - people with mental health problems and learning disabilities
 - homeless families with support needs
 - people misusing alcohol or drugs
 - rough sleepers
 - teenage parents
 - refugees
 - young people leaving care
 - asylum seekers
 - young people at risk
 - Gypsies and Travellers
 - people with HIV/AIDS
 - women fleeing domestic violence
 - ex-offenders and people at risk of offending.

2.4 The needs of people in the last group in particular may be multiple and/or complex. For example, someone presenting as homeless may also have mental health problems or problems with alcohol. Some individuals may demonstrate challenging behaviour and not welcome support. For these reasons, meeting their needs will often involve a wide range of agencies and specific skills, preferably acting in

coordination, to engage with these vulnerable groups successfully. Housing-related support services are well placed to meet this challenge by supporting people to access and maintain a settled home that allows people to put in place other elements for achieving a more stable lifestyle, such as the ability to access training or obtain and retain a job.

- 2.5 This categorisation into three groups was offered to provide a simplified model for considering service design and provision. It is valuable in the current context in looking at needs assessment. However, it is also important to understand that, whilst responses to the consultation⁴ broadly welcomed this approach, it was noted that clients often exhibit vulnerabilities which place them into two groups at the same time, as illustrated in Figure 1. The strategy emphasised further that clients can move between groups, and that access to services is not limited only to the client groups specifically identified.

Figure 1: The “super groups” of client categories



Source: Supporting People East of England Regional Strategy 2008-11

- 2.6 Overall, the three groups may be viewed as representing a spectrum of “independence”. While the first two groups are concerned with sustaining existing independence, or preventing its decline, the third is concerned with preventing or

⁴ CLG, *Creating Sustainable Communities: Supporting Independence. A Summary of Your Responses* (2006)

dealing with a crisis, or providing support for a return to stability and ultimately independent living.

- 2.7 In addition to the client groups specified in the national Supporting People programme, the four client groups included in the regional Vulnerable Adults Programme are also highly relevant to this report. This is because the issues these groups face tend to be particularly complex and transitional in nature, requiring a close degree of partnership working and co-operation across agencies.

These Vulnerable Adults groups include:

- care leavers (at 19 years old)
- adult offenders under probation supervision
- adults in contact with secondary mental health services
- adults with moderate to severe learning disabilities.

What is housing-related support?

- 2.8 Since April 2003 the services provided through the Supporting People programme and administered by upper tier authorities (see Map 1, page 21) have been providing different forms of housing-related support. There is no exhaustive list of tasks that can be funded under Supporting People – but the provision of housing-related support services are designed to either maintain or promote independent living to enable vulnerable people to live in their community. Examples of how this is achieved through housing-related support include:

- Enabling vulnerable people to access accommodation.
- Enabling vulnerable people to establish and maintain their home.
- Enabling vulnerable people to maximise their income by applying for benefits, developing their skills for future employment.
- Enabling vulnerable people to manage their personal finances, understanding budgeting and paying bills.
- Enabling vulnerable people to manage the home, such as reporting repairs, exploring options to improve the home, making it more secure.
- Enabling vulnerable people to develop life skills that assist with independence such as cooking, shopping, cleaning.
- Facilitating contact with other agencies such as care services, GPs, housing advisors, job centres etc.

- Facilitating discussions and negotiations with landlords, understanding how to behave in the community.

Case study 1: a floating support service for older people

Mr. P, a 76 year old home owner, had a problem with his bank.

When visited he was unable to explain clearly what the problem was because he has dysphasia (unable to speak what he is thinking) which, coupled with a severe short term memory problem, meant his support worker had to undertake extensive investigations to understand who they should be dealing with.

Mr. P could not be spoken to on the phone and was often not there when the support worker called for a pre-arranged appointment as he had forgotten. His support worker took him to the bank and discovered that he had a named person at the bank aware of his communication/memory problem. The banking problem was resolved; he had simply forgotten what to do.

Mr. P was living without central heating so a Warm Front grant application was made and the support worker liaised with them regarding the visit. Continued input by the support worker each time they visited, followed up by calls to adult services has resulted in the gentleman being allocated a social worker.

The social worker now has regular contact with Mr. P and has arranged for him to go to Age Concern daycare twice a week. The intention is for Mr. P to remain at home as long as possible.

Source: Suffolk Annual Plan, 2009

Case study 2: a floating support service targeting offenders leaving prison

Mr. A was released on licence to The Approved Premises. When assessed as ready to move-on and live independently in the community he was referred by his offender manager to the Suffolk Offender Accommodation Project (SOAP).

Mr. A wanted to rent a private sector property. Viewings were arranged and the SOAP worker accompanied him and explained her role to the estate agent and also to the landlord who was present. Due to the nature of Mr. A's offence he was required to make a disclosure to the landlord. The landlord was very supportive and helped assisted Mr. A to move into the property.

An application to the Credit Union for a Welfare Loan for the rent deposit was successful. A Community Care Grant was awarded and payment plans set up for utility bills. The landlord stated that he was very impressed with the service and would be in contact if any other properties become available.

Source: Suffolk Annual Plan, 2009

There are different service models for the delivery of housing-related support, which mainly fall into two categories:

Firstly, supported housing

- 2.9 Supported housing schemes are designed to offer accommodation for vulnerable people. The provision of support services on-site is an integral element. The physical form and/or management arrangements of the accommodation are designed and organised accordingly. 'Supported housing' as a term covers a diverse range of housing such as a large hostel for single homeless people, or supported living schemes with shared communal areas and highly adapted homes to cater for specific vulnerabilities such as high levels of physical disability or head injury. However, it may also consist of self-contained accommodation with support, such as extra care housing within a housing scheme.
- 2.10 In supported housing schemes, housing-related support is tied to the properties in the scheme. The support is only available to scheme residents. Access to the scheme depends on the service being located in the right place for the applicant, and on availability (i.e. a vacancy) at the right time, which both affect the flexibility of supported housing as an option (contrasted with floating support as described below).
- 2.11 For commissioners of housing-related support services, there can be significant costs involved in support provided on this basis. The capital costs associated with the provision of accommodation in a supported housing scheme dominate; although on-going labour costs can also be high, particularly if 24-hour supervision is required.
- 2.12 Nonetheless, for the vulnerable individual concerned, supported housing may offer the best option at a particular time due to the more organised and secure environment that it offers, together with companionship within a relatively stable residential community.
- 2.13 For some vulnerable adults a stay in supported housing may be temporary, but can still be a daunting prospect. Therefore it is often appropriate for vulnerable residents to be offered a period of greater independence in a "half-way-house" prior to a move into their own home. The generic term for this is "move-on accommodation". Housing-related support services will normally continue to be necessary for some individuals in their move-on accommodation, but at a much lower level. Some may require support once they have moved into mainstream housing, if only for a transitional period.

Secondly, floating support

- 2.14 There is a long tradition of housing-related support being provided to residents of supported housing schemes that are primarily owned by social landlords and therefore rented. The introduction of the Supporting People programme saw a significant increase in the provision of support to people wherever they live,

generally referred to as floating support.

- 2.15 The crucial difference between the two options is that floating support is a service committed to the individual, rather than to a property and can follow and adapt to the individual as required.
- 2.16 For service commissioners, floating support can be significantly less expensive than services provided through supported housing, since there are no capital costs. The more significant advantages, however, are likely to be seen in the greater flexibility of the service and in the benefits to vulnerable individuals who are enabled to remain within their homes and communities.

In addition to supported housing and floating support, many vulnerable adults will be living in their own homes or wish to access other forms of accommodation.

Housing adaptations

- 2.17 For people receiving housing-related support services in their own homes, there may be physical changes required to the property which will enable them to remain in comfort. This can range from improving the home by making it warmer, more secure, to adapting it to meet a changing requirement of increasing frailty or disability. A wide range of physical aids and adaptations can be provided to meet a multitude of particular needs, normally identified through the intervention of an occupational therapist. In addition, the use of assistive technology will become increasingly relevant as this sector continues to develop.
- 2.18 The costs of one-off physical changes to a home can be quite small when compared with the on-going costs of support and care services. They can, however, be essential in enabling someone to remain in their home, and particularly for people with physical or sensory disabilities. They should therefore never be overlooked, and the possible need for adaptations to the home should be implicit in every personal need assessment for housing-related support services to which reference is made in this paper.

Affordable housing

- 2.19 Many people, including people who are vulnerable, have limited financial resources. This, along with the price of homes to rent or buy through the market, makes housing difficult to afford. "Affordable housing" is subsidised to reduce the cost to rent or purchase, to help people access suitable accommodation. The significance of affordable housing for this paper is the extent to which vulnerable people depend on securing suitable affordable housing, in order to live independently and secure the housing-related support they need.
- 2.20 The volume of public subsidy for housing is limited, and the ability to provide new homes and new affordable homes is barely enough to meet needs. Vulnerable people have to 'compete' for this scarce resource with other low-income households. Access and demand for affordable housing for vulnerable people is the

subject of strategic decision-making in the same way as that needed for housing-related support services.

Why provide housing-related support?

2.21 There are well established policies which promote social inclusion and the ability of individuals to exercise choice over their own lives. Housing-related support makes it easier for people to live with a degree of independence in whichever home they have chosen, and therefore widens their choices of where to live. Housing-related support can therefore make the difference between success and failure in vulnerable individuals' ability to benefit from these policies of choice and inclusion.

Health and well-being

2.22 Enabling people to live independently in a home of their choice can be of immeasurable benefit in terms of self-esteem, confidence, hope for the future and better health. It brings many practical benefits such as providing more reliable and direct access to other public services, to employment or training, and to a stable community.

2.23 In addition, housing-related support can play a key role in prevention⁵, which is increasingly seen as a fundamental objective for public services. For example, poor housing conditions are recognised as a major contributor to ill-health⁶; physical ill-health due to poor property condition (for example damp conditions) and mental ill-health due to, for example, overcrowding - hence focused housing-related support services can be used to ensure that these can be avoided.

2.24 Communities and Local Government (CLG) states that “the policy emphasis on prevention and a stronger focus on commissioning more strategically in the NHS and Adult Services is matched by a similar emphasis in the commissioning of services for socially excluded groups such as homeless people, offenders and teen parents. This means that housing-related support can have a central place in the joint commissioning of future services”.⁷

2.25 A Housing Learning and Improvement Network (LIN) report⁸ stresses that housing-related support is critical to success in achieving health and well-being outcomes.

⁵ DH, *Commissioning Framework for Health and Well-being*, 2007; and Capgemini, *Research into the Financial Benefits of the Supporting People Programme* (2008)

⁶ Scottish Office, *Poor Housing and Ill Health: A Summary of Research Evidence*, (1999)

⁷ CLG's *Needs Analysis, Commissioning and Procurement for Housing-Related Support* (2008) p.8

⁸ Housing LIN *Commissioning Housing Support for Health and Well-being* (2008)

The report highlights the relevance of housing-related support to a number of national programmes including those aiming to:

- Reduce re-offending.
- Increase employment.
- Promote physical and mental health and reduce health inequalities.
- Increase individual choice in care and support options.
- Promote independent living.
- Encourage a single, community-based integrated social and health care support system.

The cost of not providing housing-related support

2.26 The case for provision of housing-related support has been presented above, essentially in terms of the positive benefits. In some respects, the case is even more persuasive when considering of the negative effects of failing to provide support.

Impact on vulnerable individuals, their families, and society

2.27 The impact of failing to provide housing-related support in a joined up way across the public sector is perhaps most obvious when considering the personal effect on vulnerable individuals who need it. Without support services, vulnerable people may experience a wide range of problems (depending on the nature of their vulnerability):

- Practical problems with their home.
- Loss of routine and stability.
- Difficulties in budgeting, leading to financial problems, and possibly loss of home.
- Relationship breakdown, even domestic violence.
- Uncertainty about the future, lack of confidence, isolation, stigmatisation, and reduced community involvement.
- Poorer physical health and greater frequency of hospital admissions and re-admissions.
- For people with mental health problems, more episodes of illness, and

possibly suicide attempts.

- Fear of crime, and possibly actual “victimisation”.
- Misuse of alcohol or drugs.
- Unemployment.
- Poorer access to services, jobs and training, and hence enhanced social exclusion.

Financial costs to the public purse

2.28 A recent national study by Capgemini⁹ assessed the financial benefits of the Supporting People programme.

2.29 The study suggested that the overall net benefit was £2.77 billion each year at a cost of £1.6 billion in Supporting People services across the country, based on the total cost to the public purse if housing-related support services were not provided. Capgemini reasoned that the removal of housing-related support services would lead to increased costs in the services dealing with health, homelessness, crime and residential care packages.

2.30 Table 1 shows the estimated net savings to public expenditure if housing-related support services are available to vulnerable adults through the Supporting People programme. It calculates the cost of existing services being funded by the SP programme, and based upon a series of assumptions, the amount of savings that are made by avoiding public expenditure in more intensive crisis intervention services, which tend to be more expensive. These are calculated for a range of client groups as the assumptions vary according to the vulnerability. For example, the crisis intervention avoided for older people will be residential care or a stay in hospital, for offenders it is more likely to be a prison term.

2.31 To illustrate how the net financial benefit of housing-related support was calculated it is useful to focus on one group of vulnerable people, for example people with mental health problems (highlighted in Table 1).

2.32 The model estimates the net financial benefit of providing housing-related support through Supporting People for people with mental health problems is £487 million per year, for the country as a whole. Some £252 million was being spent annually through Supporting People for this group with a net benefit of £487 million per year. This is the additional amount needed each year to meet costs likely to be incurred should housing related support not be available.

⁹ Capgemini, *Research into the Financial Benefits of the Supporting People Programme* (2008)

2.33 The additional costs assessed as arising in the absence of housing-related support included:

- One third of people requiring in-patient hospital care.
- 8% being provided with residential care.
- Higher costs for the non-Supporting People elements of the care package provided for those remaining where they live.
- Greater use of GP and community health services.
- Expenditure to deal with homelessness.
- An increase in the incidence of admissions to acute mental health wards.

Table 1	Supporting People Costs per year		Net Savings to the Public Purse	
	Cost per 1,000 units of support (£m)	Total (£m)	Total (£m)	Gearing ¹⁰
Older people – very sheltered	1.2	31.4	138.7	4.42
Older people – sheltered accommodation and other	0.3	258.7	1,090.9	4.22
People with drug problems	6.6	24.3	96.3	3.96
Homeless families in temporary accommodation	3.7	25.0	50.2	2.01
People with mental health problems	6.7	252.5	487.0	1.93
People with learning disabilities	12.5	405.6	664.2	1.64
Women at risk of domestic violence	10.1	59.5	85.7	1.44
Older people – floating support	0.7	37.8	25.9	0.69
Homeless single people in temporary accommodation	8.1	127.2	77.2	0.61
Offenders and those at risk of offending	7.3	46.7	24.9	0.53
Young people at risk in temporary accommodation	8.5	29.1	10.4	0.36
Young people at risk in settled accommodation	7.0	72.6	5.6	0.08
Homeless single people in settled accommodation	5.2	147.8	9.1	0.06
Homeless families in settled accommodation	3.0	28.7	1.2	0.04
ALL		1,546.8	2,767.3	1.79

Source: Data from Capgemini, *Research into the Financial Benefits of the Supporting People Programme, 2008*

¹⁰ Column 4, “gearing” represents savings to the public purse per year (Column 3) divided by Supporting People costs per year (Column 2) - in other words the savings as a proportion of the costs. This is added to, not quoted directly from, the original report.

3. Background and guidance for JSNAs and SHMAs

- 3.1 This chapter looks at the background and guidance for these two types of assessment, providing a framework to examine the region's JSNAs and SHMAs in Chapter 4.
- 3.2 Although the different methods used for JSNAs and SHMAs means they may require separate treatment in this paper, one of the key issues to address is the relationship between the two assessments. Among a wider list of objectives, CLG guidance¹¹ aims to:
- Understand lessons learned from differing approaches in drawing up Regional Housing Strategies, with a view to developing best practice guidance and improving the strategic interaction between the housing functions of regional bodies, Supporting People and other social care agencies.
 - Produce recommendations on how to ensure the housing, care and support needs of vulnerable people are included in the new strategic framework.
 - Produce recommendations on how local housing and social care authorities can be encouraged and enabled to develop partnership approaches to local investment and delivery within the strategic framework.
 - Establish a process for identifying where and for whom there is a need for regionally (or sub-regionally) commissioned services, and what those services should be.
 - Identify where the process for ensuring the housing needs of people in receipt of or eligible for social care and housing support services are taken account of at a regional level within the current framework and in the future.
- 3.3 CLG's report considered existing regional approaches to housing-related support, finding that the current strategic vehicle of Regional Housing Strategies has had a minimum impact in promoting joined-up delivery of housing-related support services at a regional level by housing, health and social care. It recommended five themes to improve the delivery of housing-related support for vulnerable groups, the first of these being the creation of a common regional evidence base to provide a comprehensive assessment of need within a region:

¹¹ CLG, *Housing, Care, Support: a Guide to Integrating Housing-Related Support at a Regional Level*, (2008)

*“The Joint Strategic Needs Assessment and Strategic Housing Market Assessment should be aligned to provide a local assessment of housing-related support needs, with common metrics in order to enable the aggregation of data at a regional level”.*¹²

Map 1: JSNA areas based on upper tier (i.e. County and Unitary) boundaries (shows individual districts within each)



Source: www.eelga.gov.uk

¹² Ibid, see recommendation 1, p.40

Map 2: SHMA areas based on variable boundaries including housing sub-regions ¹³



3.4 This paper has come to a similar conclusion as the CLG report, independently. As a first step in explaining this, policy guidance on the two types of strategic assessment is reviewed separately below.

¹³ The Peterborough Sub-Regional Housing Market Area covers Peterborough, South Holland, South Kesteven and Rutland. There was some involvement from Huntingdonshire, Fenland and East Northants in the first SHMA completed for this area.

The role of JSNAs and SHMAs in decision-making

- 3.5 The future priorities of every local area in the region should be guided by a Sustainable Community Strategy. This takes a long-term view of the direction and local priorities which will lead to improvements in the health and well-being of the area's inhabitants, in the physical environment, its economy and infrastructure, and so on. This Strategy is delivered by Local Area Agreement partners who develop work plans to achieve the local priorities.
- 3.6 JSNAs and SHMAs share similar roles, both acting as strategic needs assessments which feed evidence, intelligence and analysis into this framework of commissioning and decision-making. For example the purpose of a JSNA is stated as being to:

*‘identify the current and future health and well-being needs of a local population, informing the priorities and targets set by Local Area Agreements and leading to agreed commissioning priorities that will improve outcomes and reduce health inequalities’.*¹⁴

Providing information and analysis on needs does not automatically determine that they will inform strategic decisions; but, on the other hand, not providing a robust needs assessment for the population will ensure that they will not be taken into consideration at all.

Guidance on JSNAs

- 3.7 JSNAs were introduced by the Local Government and Involvement in Public Health Act 2007, following the earlier Department of Health (DH) White Paper *Our Health, Our Care, Our Say* (2006). The statutory duty to produce a JSNA was imposed jointly on primary care trusts and the relevant “upper-tier” local authorities – i.e. the county and unitary councils (see Map 1, page 21).
- 3.8 Following consultation on *The Commissioning Framework for Health and Well-being* (2007) guidance on JSNA was issued in the same year. The guidance avoids being prescriptive about how JSNAs are to be handled in detail and supports considerable local discretion. The findings of an IDeA report revealed some ambivalence in the reaction to this approach to local discretion by stating “it was revealing that the lack of more detailed direction about the form of the JSNA was the cause of both celebration and unease”.¹⁵
- 3.9 JSNA is described as a “process” to identify current and future health and well-being needs within a big picture. This is critical, because it underlines the

¹⁴ DH, *Guidance on Joint Strategic Needs Assessment* (2007) p.3

¹⁵ IDeA, *JSNA: Progress so Far* (2009) p.9

importance of approaching assessment as something continuous, and not as a snapshot at a particular point in time.

*“Stripped to its kernel, this process involves building up a rich picture of need through triangulation between statistical data, the views and aspirations of local people and the current patterns of provision made by local partners”.*¹⁶

- 3.10 The JSNA Guidance expects that JSNAs will assess current and future needs over the next three to five years but will include a longer-term assessment (five to ten years) to take account of anticipated changes in demography and infrastructure. As an absolute minimum, the JSNA should align with the Local Area Agreement three-yearly planning cycle.

Guidance on housing-related support in a JSNA

- 3.11 The value of JSNAs is to provide outputs designed to inform decision-making processes. An insight into this can be gained from a comment in the guidance on JSNAs:

“Historically, most commissioning activity has been expressed through the contractual requirement to provide outputs, such as the number of hours or type of service to be provided. However, measuring the real benefits of services commissioned in this way has proved difficult. In order to translate priorities into commissioning requirements it will therefore be necessary to consider the outcomes that commissioning bodies want to achieve on behalf of communities.”

- 3.12 In Chapter 2 the case was made for housing-related support to be viewed as an intrinsic element in any set of policies and actions aimed at securing the health and well-being of vulnerable people. By implication, whenever decisions on strategy, policy or commissioning are aimed at health and well-being, due attention should be given to the role of housing-related support. Consequently, evidence of future needs designed to inform such decisions would have to assess needs for housing-related support.
- 3.13 A CLG report reinforces this interpretation with the following comment that *“while the JSNA is not the only reason to carry out an analysis of the need for housing-related support, involvement in the JSNA process is a good opportunity for housing-related support teams to ensure that Adult Social Care and PCT colleagues recognise the contribution that housing-related support can make to the prevention agenda”.*¹⁷

¹⁶ Ibid, p.12

¹⁷ CLG, *Needs Analysis Commissioning and Procurement for Housing- Related Support* (2008) p.14

- 3.14 The JSNA guidance contains no direct reference to housing-related support among the needs to be addressed, even though it could be viewed as implicit in any package of needs to address health and well-being. Certainly housing itself is mentioned as an important factor. The lack of specific mention of housing-related support needs in JSNA guidance could lead to it being overlooked when JSNAs are undertaken, and a review of JSNAs in the South East established that this was the case there. Looking to the future, this review states that *“the role of housing in health and well-being is increasingly being recognised in national policy and this will hopefully influence the approach to refreshing JSNAs”*.¹⁸
- 3.15 The report also acknowledges the wealth of data available on current needs for housing-related support: *“Several of the JSNA documents included reference to the Supporting People programme. ... However, in many areas the wealth of data held in Supporting People programmes has not been fed into the JSNA”*.¹⁹

Inputs to a JSNA

- 3.16 It is important to recognise that the core dataset for JSNAs does not include any data on the need for housing-related support services. Potentially, this has had two critical effects:
- Combined with the lack of mention of housing-related support in the text of the guidance, this may have led to housing-related support needs being overlooked in JSNA processes.
 - Where a JSNA has addressed housing-related support needs, there has been no framework set in the core database to inform work on this area.
- 3.17 Despite the concerns there may be about there being no mention of housing-related support, Government guidance draws attention to several key aspects of JSNAs which are of fundamental importance in how they should handle data and analysis.
- A JSNA must complement the core dataset with selected relevant local data to inform a proper assessment of need. *“The JSNA relies on good quality data ... the core dataset is a resource that signposts users to a range of existing data sources that can assist the JSNA process ... Local areas will be expected to supplement the core dataset with additional, locally relevant information to add depth and insight into the needs of their populations, having locally agreed standards on data quality for inclusion.”*²⁰

¹⁸ Edwards, Margaret, for the Housing LIN and, DH, *Joint Strategic Needs Assessment and Housing: Report of a Study Based on the South East Region* (2009) p.15

¹⁹ Ibid p.2

²⁰ DH, *Guidance on Joint Strategic Needs Assessment* (2007) p.13

- The JSNA process must add value to raw data – i.e. through analysis, interpretation, evaluation, etc. - in order to produce meaningful assessments of how much actual need will arise.
- Since JSNA should be viewed as a process, JSNA reports should be effectively “live” documents, subject to review and revision as and when fresh data indicate that the assessment of future needs may require updating.

- 3.18 Guidance on world class commissioning reinforces this general view, indicating that *“commissioning decisions should be based on sound evidence, high-quality and timely information from a range of sources”*.²¹ This has often been interpreted to mean that, to reach the highest level of performance, commissioning processes require *“more and richer data, knowledge and intelligence than the minimum laid out within guidance on JSNA”*.²²
- 3.19 An IDeA report highlights that the challenge of data mapping for the JSNA has led many local partnerships to re-examine their capacity and to strengthen the information management functions across partnership organisations. It finds that there has been overall a *“quiet revolution in the development of capacity to manage and use information to produce better outcomes”*²³ but that for some, the lack of routine analytical capacity remains a significant issue. The JSNA guidance does not recommend a particular methodology to be used for assessing needs. This is consistent with the general approach in the guidance of leaving such issues to local discretion.

Guidance on SHMAs

- 3.20 SHMAs are required to understand the housing market and its processes, the scale and effect of market demand, including the effect of demand and supply on housing need. The emphasis is on the number of households to be accommodated, and the costs which they can afford. The CLG guidance states that *“strategic housing market assessments will not provide definitive estimates of housing need, demand and market conditions. However, they can provide valuable insights into how housing markets operate both now and in the future. They should provide a fit for purpose basis upon which to develop planning and housing policies by considering the characteristics of the housing market, how key factors work together and the probable scale of change in future housing need and demand”*.²⁴

²¹ DH, *World Class Commissioning: Vision* (2007) p.3

²² Edwards, Margaret, for the Housing LIN and, DH, *Joint Strategic Needs Assessment and Housing: Report of a Study Based on the South East Region* (2009) p.6

²³ IDeA, *Joint Strategic Needs Assessment - Progress so Far* (2009) p.14

²⁴ CLG, *SHMA Practice Guidance* (2007) p.9

- 3.21 SHMAs develop a shared evidence base to inform the development of spatial housing policies and to help inform decisions about local housing policies, set out in housing strategies and planning documents. Housing delivery and strategy needs to be responsive to changes in the levels of housing need and demand while having regard to the resources available for housing and other competing areas for investment (including funding, land supply, mortgage finance and an active development industry).

Vulnerable people and SHMAs

- 3.22 The operation of the market occupies a central role in SHMAs that finds no real equivalent in a JSNA. The need for housing is essentially *“the quantity of housing required for households who are unable to access suitable housing without financial assistance”*.²⁵ Housing need translates, therefore into a simple need for affordable housing. A difference of greater significance is that the focus of SHMAs is on the need for physical units of accommodation – “bricks and mortar”, a product of permanence and relative inflexibility – rather different from the services on which JSNAs concentrate. Consequently, need for a personal service like housing-related support does not sit comfortably within the general process of assessment in a SHMA framework.
- 3.23 The guidance requires SHMAs to address the issue of assessing future need or demand for special categories of housing for households with special needs. The practice guidance contains among the “core outputs” required an “estimate of household groups who have particular housing requirements e.g. families, older people, key workers, black and minority ethnic groups, disabled people, young people, etc.”²⁶ This would automatically include the assessment of future needs or supported housing; however, the guidance contains no explicit requirement for an assessment of future need for housing-related support services among households containing vulnerable people in the SHMA process. The guidance does suggest that *“if there are concerns about the housing requirements of specific groups or good reason to believe that their needs significantly differ [from those of] the general population, partnerships should ensure that they have appropriate evidence.”*²⁷ This is taken as a strong pointer for any available assessment of future needs for housing-related support to be taken into account as part of the evidence base for the SHMA.

Aligning JSNAs and SHMAs

- 3.24 Earlier reference was made to Government guidance²⁸ requiring JSNAs and SHMAs to be aligned to ensure common local assessment of needs across local

²⁵ Ibid, p.8

²⁶ Ibid, p.10

²⁷ Ibid. p.54

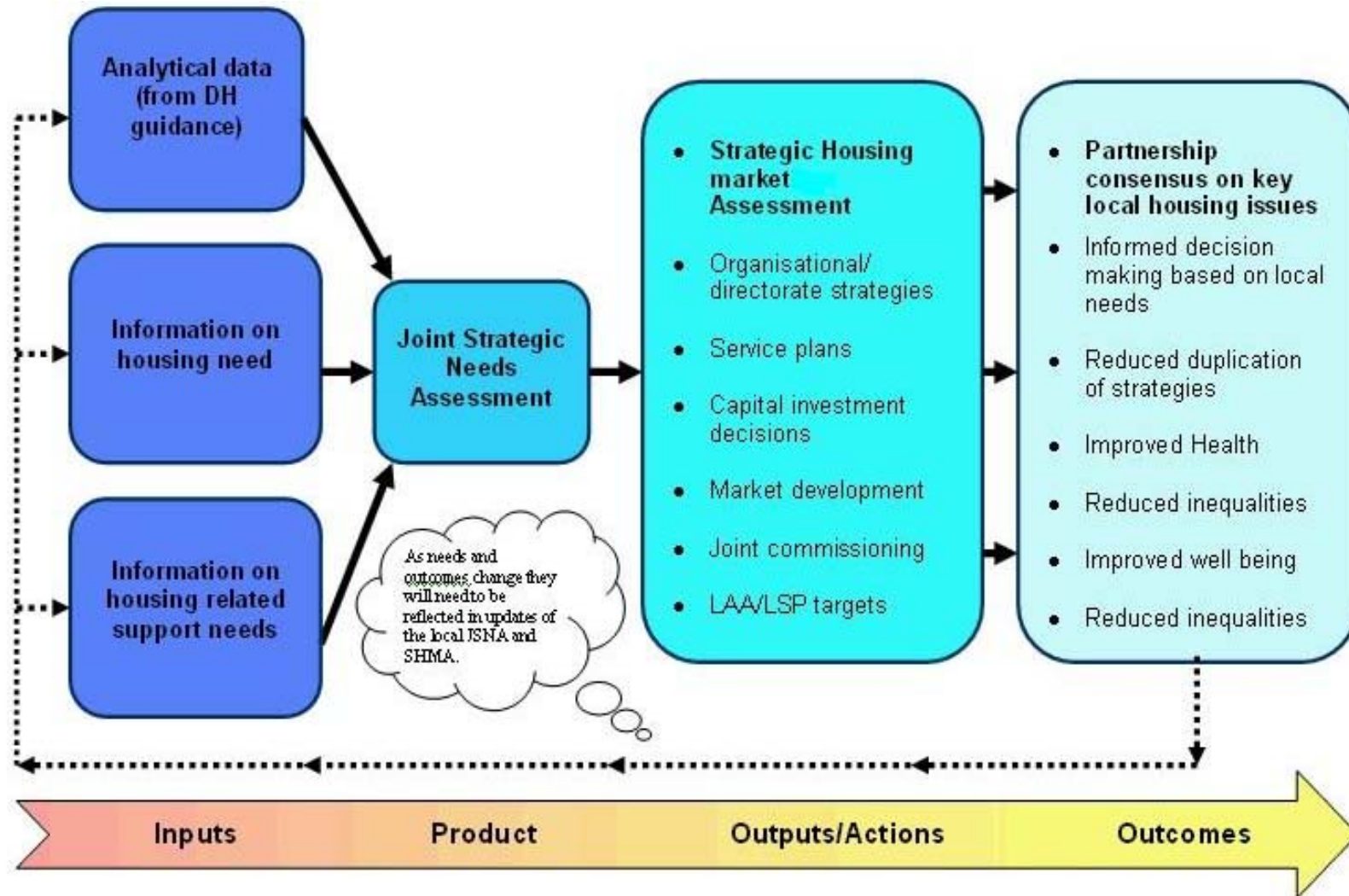
²⁸ CLG, *Housing, Care, Support: a Guide to Integrating Housing-Related Support at a Regional Level* (2008)

partnerships. The examination of JSNAs above shows the potential value associated with alignment can be seen in the fact that the two exercises do overlap, specifically where the outputs from one provide inputs to the other as demonstrated in Figure 2 below.

- 3.25 The Audit Commission has noted the importance of shared information to underpin future social care commissioning decisions, and that this should include relevant local information on housing-related support needs, for example the use of outcomes data from Supporting People services. *“There is a need to translate the outcomes framework data into health gains that can be used to inform future commissioning and procurement decisions. Joint guidance linked to targets from CLG and the Department of Health would encourage and support joint planning, commissioning and procurement.”*²⁹

²⁹ CLG and Audit Commission, *Supporting People Programme 2005-09* (2009) p.59

Figure 2: The relationship between SHMAs and JSNAs



4. Current assessment of need for housing-related support in the East of England

4.1 In this chapter, we look at the assessment of needs for housing-related support being undertaken in the East of England, with a focus on currently published JSNA and SHMA documents. This builds on the case developed through earlier chapters about what strategic assessment of future needs should work towards.

4.2 Partly based on CLG guidance³⁰ referred to in Chapter 3 it is possible to identify essential elements which an assessment of housing-related support needs in a JSNA would need to include:

- Indicators of the incidence or prevalence of different client types in relevant population groups within the wider population – national and/or regional.
- Indicators of the incidence or prevalence of different types of need for housing-related support among relevant client types within the wider population – national and/or regional.
- Data on existing needs as known through client records of existing housing-related support service commissioners or providers, broken down by type of service and client.
- Sources of information regarding needs for housing-related support among vulnerable people who are not known to commissioners of the service – these would include information from other care or support service commissioners.
- A triangulation between:
 - National data for indicators of need prevalence.
 - Local data for the indicators.
 - Actual needs estimated from records and other sources with the aim of calibrating local prevalence rates for need.
- Reliable forecasts or projections of demographic change and other relevant factors for the area in question.
- Application of the local prevalence rates to the forecasts to generate an assessment of likely future incidence of different types of need.

³⁰ CLG, *Needs Analysis, Commissioning and Procurement for Housing-Related Support* (2008) p.15

- Information on current supply – quantity, type, mix and use of supply.
- Information on planned future changes in supply.
- Balance of future supply against need as a gap analysis.

4.3 In this, it is important to recognise there may be practical issues to overcome, for example:

- Some client groups may not be currently recorded in a manner which facilitates direct indicators of “prevalence” to be calculated, so proxy measures will be needed.
- Triangulation will prove difficult without effective engagement with a range of local agencies. This engagement is needed if ‘unknown’ needs are to be identified or estimated.

Service-based personal needs assessment

4.4 Through the creation of an evidence-based strategic approach to local decisions on resource use, the creation of a sound assessment of future need may be precisely what is needed to enhance the resources available for housing-related support.

4.5 The JSNA provides the vehicle for these needs to be incorporated into a formal framework to inform decisions. On-going strategic assessment of future needs by each commissioning body would provide a ready source of information to feed directly into JSNAs. In addition, having this information would allow each commissioning body to ensure, through its local strategy, that resources are being targeted effectively.

Assessment by other agencies

4.6 It is likely that areas across the region will continue to develop common or single assessment processes for personal health and social care services, in line with the holistic approach. Wherever this is occurring, it will be important to ensure that assessment processes include needs for housing-related support.

Case Study 3: The benefits of involving a wide range of partners in the assessment process.

The Sedgefield Adult Community Partnership in County Durham was established in 2005 as a partnership between the PCT, Borough Council and County Council. Five integrated and co-located area teams cover the borough, each including district nurses, social workers, social work assistants, housing support officers, business support officers and occupational therapists.

A single assessment process addresses individual needs across the board, covering health and social care, housing-related and other forms of support, and provision of suitable accommodation for those unable to live in their current homes.

This ensures that all needs can be identified, but also that there is coordination in terms of setting priorities for action and targeting resources.

Source: DH Housing LIN Case Study 19

- 4.7 A CLG Select Committee report into the Supporting People programme³¹ encourages further progress on the inclusion of housing and housing-related support in the Common Assessment Framework (CAF) for Adults. The positive response to this from CLG noted that two of the original nine demonstrator sites announced in Phase 1 of the CAF pilot from February 2009 included a focus on housing and further development work is expected in these areas and subsequent sites during 2010.

Case Study 4: Using the assessed needs of people with poor mental health to inform future service delivery.

Rochdale is one of the original nine demonstrator sites in the pilot of a Common Assessment Framework for Adults. It concentrates on mental health, and specifically includes the issues of housing and housing-related support.

Focussing on how information is shared across health and social care agencies, it seeks to bring improvements through changing internal processes and IT.

Partners working together on this project include the Borough Council, Pennine Care NHS Foundation Trust (Mental Health), Age Concern, MIND, carers and patient representatives and voluntary agencies. Evaluation will address the question of how the work can be spread across all other agencies in the borough.

- 4.8 Even where common or single assessment arrangements are not operating, it will be important for Supporting People commissioners to be able to rely on needs for housing-related support being identified whenever other agencies undertake personal needs assessments of the health or social care needs of vulnerable

³¹ CLG Select Committee report, January 2010, recommendation 7

people. This could be done through the use of assessment packages – pro-forma, guidance, training, provided by the Supporting People commissioning body, or, failing that, it might prove sufficient for effective communication systems to alert SP teams to any potential clients.

Assessment at the regional level

4.9 As in other regions, the East of England has a suite of regional strategies:

Regional Housing Strategy

- 4.10 A priority for the 2005-10 Regional Housing Strategy was to provide housing to improve health and well-being, including the promotion of independence and choice for people in vulnerable groups.
- 4.11 The Regional Housing Strategy provided significant policy guidance in this area, relating to types of housing provision, forms of support and links to other strategies, with the focus on housing provision for vulnerable groups. However, it does not include an attempt to assess the scale of need for either specialist housing or housing-related support, but places emphasis on the role of SHMAs for this needs information.
- 4.12 The recently published East of England Housing Statement recognises the importance of housing-related support in “*enabling people to live independently, in particular the region’s increasing older population and to provide safe and suitable accommodation for people who are vulnerable or have complex needs*”. The Statement refers to this research and the key role of JSNAs and SHMAs in assessing needs, which must inform decision-making and the commissioning of services.

Regional Supporting People strategy

- 4.13 Published in 2008, this strategy is intended to provide a framework for co-ordination and other activities where a regional dimension can add value to the local strategies. The assessment of need for support is explicitly left to local Supporting People groups, for whom this is necessary in drawing up their local strategies; it provides no guidance on how need might be assessed.
- 4.14 It recognises that it is a priority for local Supporting People partnerships to engage in the production of SHMAs, and to ensure the need for housing, supported housing and housing-related support services is included in JSNAs.

Other regional strategies

- 4.15 The Regional Social Strategy (www.eelga.gov.uk) was published in 2004 and revised in 2007. The Strategy recognises the importance of housing-related

support services:

“Adequate support for vulnerable members of society can prevent chaotic lifestyles, anti-social behaviour and criminality ... [and make] an important contribution to ... equality of opportunity and social inclusion by helping to reduce homelessness, re-offending and enabling older people to remain in their own homes”.

- 4.16 The Regional Health Strategy *Healthy Futures* was published in 2005. It mentions housing as a factor in health, and identifies a need for the (then) Regional Housing Delivery Group to liaise with health professionals and to encourage better joint working and planning between housing authorities, social services, and primary care trusts.

Local Supporting People strategies

- 4.17 With the advent of the Supporting People programme in 2003, local authorities were required to have 5 year strategies in place to direct and prioritise the use of available SP funding. Generally, these strategies ran from 2005 to 2010 and many now require updating or incorporating into wider strategies such as the Sustainable Community Strategy, depending how authorities choose to take forward the programme with the removal of the ring fence from the SP grant.
- 4.18 An examination of local Supporting People strategies across the region reveals strong efforts being made to develop clear vision in terms of priorities, a requirement for greater efficiency and targeting of resources, and better integration with care services and housing provision.
- 4.19 Since the development of the 5 year strategies, Supporting People commissioning bodies have a growing database on referrals of people in need, combined with records of service provision, and these have been used to target, prioritise and make best use of resources.

Coverage of housing-related support in current JSNA documents

- 4.20 JSNA is viewed as an on-going exercise through which the picture of needs will be constantly improved through enhanced data and analysis. This is most evident where the JSNA has moved to being a website containing a set of information and analysis that is subject to continual development
- 4.21 The variation among JSNAs in the region is considerable in terms of the approach adopted, the detail and nature of their information provided on needs, the extent of their coverage, and in presentation. However, with respect to the treatment of housing-related support needs, there are certain general findings which are of

significance for this paper.

4.22 The approach adopted was to examine individual JSNAs in terms of the information they present on needs for housing-related support. Key findings were:

- Data on the present and the past predominate in JSNAs. These often represent actual factors indicative of health and well-being including morbidity, overcrowding, and measures of specific needs. However, in similar volumes are data relating to factors such as age, migration or housing numbers, offered as indicators of need.
- Where statements on future need are made, they sometimes relate to un-quantified indicators of change, for example, of need “increasing” in the future, or of groups being “more likely” to have needs.
- Most JSNAs make mention of housing-related support having a role to play in the health and well-being of the local population, which implies a recognition that need for this support ought to be included among the assessments. However, there were no assessments of future need for housing-related support services in the completed JSNAs examined in this paper, although there are now signs of this beginning to be rectified. In Cambridgeshire the “*JSNA – Homelessness and at Risk of Homelessness*” sets out to produce a basis for assessing future needs for this group.
- Some JSNAs included data on current provision with housing-related support, but giving no indication of whether this should be taken as reflecting current need, nor of how these data should be interpreted in terms of assessments of future need.

4.23 One consequence of this is that decision-making processes across the region may not have access to full and comprehensive assessments of future needs when they are required to set targets and prioritisation for service provision.

Coverage of housing-related support in current SHMA documents

4.24 There are fourteen areas covering the region for which individual SHMAs have been produced (see Map 2, page 22). The timing of production among the SHMAs varied considerably, with not all finished and some currently out for consultation. At the same time, some of the first are at present under review with the intention of producing revised assessments.

4.25 In 2008 a report by Savills and ORS³² drew attention to a lack of consistency in methodologies applied in the region’s SHMAs. The report contained a review of progress, innovation and good practice and found that most SHMAs assessed the

³² Savills and ORS, *SHMAs in the East of England - A Quality Assessment Identifying Innovation and Good Practice* (2008)

needs of groups with special housing needs in line with CLG's Core Output 8. However, the report added a note of caution, saying that good practice suggests that the SHMA may not be the most appropriate way to identify these needs; special studies might carry more value and could inform the SHMA. It recommends that future revisions to SHMA guidance should consider how the housing requirements of specific groups in SHMAs might be better informed.

4.26 The review of SHMAs in this paper had a different orientation from the 2008 report, and hence produced different key findings:

- More than half the published SHMAs provided some figures for housing-related support needs. In almost all, these figures were based on local sample surveys, undertaken primarily to identify need for housing, which may not be reliable indicators of housing-related support needs. Reasons for this include:
 - In each case the total figures were grossed up from relatively small numbers generated from surveys of a sample of households. Publishing the grossed figures correct to the nearest unit – i.e. not rounded – also suggests a level of accuracy that could be misleading.
 - Reported need for support was based on self-assessment in each household surveyed, with little guidance provided on what constitutes support.
 - Although the figures reported on a need for “support”, the questions posed in the surveys actually made insufficient distinction between support and care, and between support services and physical support (through, for example, aids and adaptations). As an illustration of this confusion, examples of “support” offered in one questionnaire included a “home carer”.
 - There was no evidence of any checks or calibrations having been made against other sources of needs such as Supporting People or other sources.
 - Data covered a small number of the client groups who might need support.
- All the published SHMAs acknowledged housing-related support as an issue in the future provision of housing. However, there is no clear evidence of how need for support may have influenced the production of figures for housing need, demand or provision. This may be because support does not feature in the long list of indicators of housing need, used for the calculation of numbers, specified by CLG.

4.27 If, in future, assessment of the needs for housing-related support from an area is already available from the JSNA process, this can be used as an input to the SHMA. The task for the SHMA would then be to translate that need into its own “currency”, namely into the effect on housing markets and the need for new homes.

- 4.28 To make an assessment of the need for new supported housing, for example, evidence should be applied within the SHMA process to determine how much housing-related support could be provided in supported housing, and how much through floating support. This evidence would need to include the need for additional support and supported housing.
- 4.29 The policy basis for selecting the form of provision would need to be defined by the relevant local authority, as policy is clearly outside the boundaries of the SHMA. This policy might be included in a housing strategy, supporting people strategy or through the local development framework as appropriate.

Recommendation 1

Supporting People commissioning bodies, or their equivalents, should produce their own robust assessments of need for housing-related support to inform service planning and delivery, and ensure that the outputs are available for inclusion in JSNAs and SHMAs.

Recommendation 2

National Guidance on producing SHMAs should be revised to make explicit reference to how they relate to JSNAs, and in particular how data concerning future needs for housing-related support should inform assessments of housing need and housing markets.

5. Setting an agenda for action in JSNAs

- 5.1 Having undertaken the reviews reported in the previous chapters, attention now turns to seeking improvements in the current position. Chapter 5 focuses on JSNAs and any steps to ensure the need for housing-related support is appropriately addressed in them.

Statement of the present position on JSNAs

- 5.3 In the East of England, assessments of future need for housing-related support are very limited in current JSNAs, and therefore there is a significant risk that this may lead to insufficient resources being made available to fund future services, including where these services directly support the prevention and early intervention, and the integration and Total Place agendas (see paragraph 5.8).

Using evidence of need from JSNAs

- 5.4 JSNAs must be recognised and genuinely used as a significant part of the evidence base for the Sustainable Community Strategy in any area, and also as supportive of the delivery of agreed priorities through the mechanism of the Local Area Agreement. This means that:
- JSNAs should produce information specifically designed in content and format to feed directly into local Sustainable Community Strategy and Local Area Agreements. In the context of this paper, this must clearly include a sound assessment of the range of future needs for housing-related support.
 - Those active in creating and implementing Sustainable Community Strategies and Local Area Agreements e.g. Local Strategic Partnerships and their “thematic” groups - should be effectively included in the JSNA process.
 - The language, databases and assessment criteria of JSNAs should be harmonised with those of the relevant Sustainable Community Strategies and Local Area Agreements.
- 5.5 JSNAs have a central role in informing local partnerships regarding their responsibilities to take account of the health and well-being needs of the local population. In the context of this research paper, JSNAs should provide information on the scale and type of future needs and how they relate to other factors, such as:
- Requirements for supported housing.
 - Complementing housing-related support through Lifetime Homes and other design elements.
 - Accommodation and complementary actions required to address

homelessness, Gypsies and Travellers and other discrete groups.

- Mixed communities and other policies to support greater health and well-being.
- Interventions in existing homes to achieve improvements and modifications to structure and management, aimed at greater health and well-being.

Investing to save

- 5.6 Attempts to get more output from the use of limited public financial resources, is nothing new, and the new financial constraints will simply put even more pressure on processes seeking ever greater efficiency. In this context, the financial savings on offer in the findings of Capgemini are very significant (described in paragraph 2.28). What they demonstrate is an example of investing to save: using resources in one area to make relatively much larger savings elsewhere, as is the case with preventative services including falls prevention, crisis response, assistive technology and re-ablement services.
- 5.7 There are significant practical factors which must be recognised in the context of this paper. There is strong evidence that resources used in the provision of housing-related support could enable very considerable savings in health services, care, policing, homelessness, and other areas. However, acceptance of this argument requires two issues to be addressed and overcome:
- There is a time-lag in the savings. By enabling vulnerable people to live independently now, the savings to the public purse may occur over many years into the future, i.e. in budgets which are not yet known or tangible.
 - The savings will probably be made largely in budgets other than that for housing-related support, and under present arrangements they are likely to be made by different public bodies. There are DH initiatives already in place which could help in addressing this issue: Care Services Efficiency Delivery (CSED) and the more recent Quality, Innovation, Productivity and Prevention (QIPP) programme in the NHS.

Case Study 5: How housing-related support can be effectively linked to health services

A partnership between Brent Council and Willow Housing Association provides a short period (up to 6 months) of targeted housing-related support for people about to leave hospital. The support plan would typically include advice on aids and adaptations, referrals to specific agencies, and advice on longer-term housing options. This provides a ready means of identifying some needs which might otherwise remain hidden.

Case Study 6: The necessity and benefits of partnership working to continually develop the JSNA

In the first version of Nottingham's JSNA, the assessment of needs from people suffering domestic violence was very general and descriptive, reflecting a recognition that there were neither systematic data nor measures of prevalence available. Subsequently, considerable efforts have been made to rectify this situation.

Based on a recognition that many agencies are actually in contact with people experiencing domestic violence, proxies are being derived from the data available, informed by research literature, to develop prevalence rates. An initial task in developing the JSNA was therefore to identify such agencies and seek to incorporate data on a systematic basis. Qualitative investigations have been used to bridge data gaps.

Profiling of the local population has been commissioned to help relate prevalence to appropriate factors that can then be used in forecasting future needs and targeting geographical areas.

The initial focus has been on health needs. However, a multi-agency approach and joint commissioning lie at the heart of the approach to developing and using the JSNA; and therefore it should be relatively easy to use the emerging framework for assessments of need for housing-related support.

Source: Domestic Violence - Nottingham City JSNA, 2008 & 2009

Recommendation 3

All JSNAs in the region should include an assessment of future needs for housing-related support of different types, for all vulnerable client groups, designed to inform strategic decision-making processes.

6. Setting an agenda for action in SHMAs

6.1 In this chapter attention is turned to SHMAs in the region, setting out an agenda for action equivalent to that for JSNAs in Chapter 5. It shows how housing-related support should be used as a factor in determining the results of a SHMA and makes recommendations about how this can be done.

Statement of the present position on SHMAs

6.2 Our reviews in this paper produced the following findings regarding SHMAs:

- SHMAs are required to focus on future requirements for different types of housing, and there is no requirement for them to assess need for housing-related support. This is the role of JSNAs.
- SHMAs play a key role in planning for future housing provision, providing the primary evidence base for the volume and type of new homes to be built. In this way they inform Local Development Frameworks, Sustainable Community Strategies and local housing strategies.
- If particular needs for housing are not included in SHMAs, there is a significant risk that provision for meeting them will not be made when land and public resources are allocated for new housing.
- Provision of supported housing is a key factor in meeting the particular needs of some vulnerable people.
- In the East of England, current SHMAs have made limited reference to any assessment of needs for housing-related support.
- There is therefore a significant risk of future under-provision of supported housing, both in total and also with respect to the needs of individual client groups.

6.3 The above can be translated into expectations which may be imposed on SHMAs and these are considered below.

Supported housing

6.4 The SHMA assessments of future overall housing need could include an assessment of the need for different types of supported housing, to help plan for adequate future provision. This assessment of need would not be sufficient to ensure new supported housing is provided as there needs to be sufficient resources made available from both capital and revenue funders (among other factors). However, the SHMA can play an important role because, like the JSNA, it should inform the Sustainable Community Strategy and hence influence local

decisions about the use of resources.

- 6.5 If SHMAs are to include assessments of the future need for supported housing, as a starting point they will require information on the future incidence of need for housing-related support services among all relevant client groups. For each client group a split will have to be determined between those vulnerable individuals whose health and well-being is best served as residents of supported housing, and those who should receive services floating support services living in mainstream housing. As referred to in paragraph 4.29, this split may require policy decisions which may not sit well within the SHMA itself.
- 6.6 Some further joint work may help link these issues with the current SHMA guidance, and to link the need for support and for the need for new affordable homes: one of the SHMA's required outputs. There may be an overlap between the need for new homes, the need for aids and adaptations, the potential to make best use of existing homes (with or without adaptations) and future requirement for adaptations and facilities, for example through Disabled Facilities Grants (DFGs).

Allocating need to supported housing or floating support

- 6.7 This split between supported housing and floating support cannot be viewed merely as a technical exercise, for there is a genuine choice between these two options for many people in need of housing-related support. To anticipate or determine the split relating to this exercise of choice requires judgement on several issues:
- Which clients would enjoy a better quality of life – all things considered – living in supported housing rather than independently with floating support, and vice versa?
 - Where clients would be better living independently with floating support, are their current homes suitable, or would a move to another home be necessary? Are suitable properties available, or would they need to be built anew?
 - What spare capacity might be available in existing supported housing schemes? How does this match geographically with the distribution of need? To what extent does this depend on the availability of move-on accommodation?
 - What revenue resources will be available for support provision in future, and are these more efficient when provided in supported housing schemes compared to floating support?
 - What capital resources will be available for investment in additional supported housing schemes and/or new affordable housing which is suitable?

- How affordable would any option be for the customer?

6.8 These judgements need to be informed by needs identified in strategic assessments, not in relation to the need of specific individuals. The results may be in keeping with the rest of SHMA work where it relates to identifying needs and setting out numbers of homes needed in future. The information needed for these judgements may already have been produced through the JSNA exercise or through strategic decisions on funding priorities made in planning service provision. It will be important to co-ordinate such judgements with those of service commissioners, to enable districts to implement the outcomes of their SHMA.

Move-on accommodation

6.9 In assessing the future need for supported housing, SHMAs must pay particular attention to the need and provision for move-on accommodation. Specifically, assessments must account for:

- The possibility of reducing need for supported housing capacity by facilitating relocation into the more independent move-on accommodation, and
- The potential additional need for housing-related support to those moving on.

6.10 Future requirements for supported housing schemes will depend partly on the degree of spare capacity that can be anticipated within existing schemes. In turn, this will reflect the availability of suitable move-on accommodation into which the residents of existing supported housing might relocate when they have developed greater independence. In other words, when a SHMA is assessing the future need for housing-related support, one area which should not be overlooked is the anticipated support needed in the future for those moving on. Information on this will be required from the respective JSNAs.

Other housing for people with special needs

6.11 SHMAs are charged generally with assessing the future housing requirements of groups with special needs. These requirements are not just for supported housing, or even for housing-related support; they may relate to the physical nature of housing, e.g. the provision of Lifetime Homes.

6.12 This is significant because some of these needs may be identified through information derived from assessments of housing-related support needs, for example relating to frail older people and others with physical or sensory disabilities. However there may be particular factors associated with other client groups. Given the role of JSNAs in assessing all needs relating to health and well-being, the SHMA could rely on suitable information included in JSNAs, to enable meaningful assessment of how these special needs might translate into

requirements for particular types of housing.

Overall housing provision

- 6.13 The current focus of SHMAs on the overall housing numbers required in the future depends heavily on the projection of various demographic trends, among which a key element is the projection of future household formation rates. While an extrapolation of recent trends may be entirely reasonable, it is implicit that older people will continue to live independently (as at present). With the ageing of local populations, the proportion of future households headed by older people, particularly those living alone, is expected to rise dramatically.
- 6.14 The scale of need for future housing-related support has important implications for household projections. Therefore, in assessing future household formation, SHMAs should check the plausibility of an increase in households headed by older people in respect of future need for housing-related support.

Recommendation 4

When work is undertaken to revise or update the region's current SHMAs, this should include an assessment of the need for housing for the appropriate client groups in each area and to take account of the local JSNA.

7. Strategy for action

- 7.1 This final chapter pulls together the findings from previous chapters and proposes an approach to help ensure housing-related support needs inform decision-making and commissioning of services across the East of England.

The case for housing-related support

- 7.2 The success of the strategic approach set out in this paper will depend on achieving partnership recognition of the vital role of housing-related support in achieving strategic aims: sustainable communities, the health and well-being of their members, and success in combating health inequalities and the social exclusion of many vulnerable people. In particular, this understanding will be necessary for those involved in decision-making relating to what services are commissioned in the future, and how.
- 7.3 Armed with a proper understanding of the role and value of housing-related support in improving outcomes and efficiency, decision makers should ensure that the issue receives appropriate attention from local partnerships when setting priorities and targets.
- 7.4 Perhaps the strongest case for giving attention to housing-related support is the costs to vulnerable individuals and local communities of failing to do so. This is evident in the scale of public funding that would be needed to compensate for the negative consequences to vulnerable people, including those client groups covered by the East of England Vulnerable Adults programme (see paragraph 2.7) being left without adequate support.
- 7.5 Policy decisions require evidence, and decision makers will not be able to give housing-related support due attention if they are not provided with evidence of the need for support and how this relates to wider population-level needs. The duty to produce and use JSNAs has been created to provide evidence for strategic decisions, and it is important that assessments of housing-related support needs are recognised as essential within JSNAs.
- 7.6 Similar arguments need to be made for ensuring assessments of future need for supported housing in SHMAs. However, in the context of this research paper, this is a subsidiary issue, since such assessments will only really be possible after information has been made available from assessments of housing-related support needs.

The case for action

- 7.7 There are favourable signs that JSNA processes are taking an interest in housing-related support needs and that future JSNA guidance may explicitly support inclusion of these needs. There is an opportunity for key stakeholders to build on this momentum, drawing on this paper's findings and recommendations.

How to develop future JSNAs and SHMAs

- 7.8 First for consideration will be the revision of current JSNAs and SHMAs to include reference to and analysis of housing-related support needs. The overarching aim will be to improve outcomes for vulnerable groups, increase efficiency and improve alignment between local partners and the way they work together to commission services for the people they serve.

Case Study 7: What could be achieved through more effective use of needs assessment.

Four documents, produced for Bradford in 2008, provide a useful illustration.

A report on an analysis of needs produced best-estimates of need, comparing this with actual supply of housing-related support services. Evidence for need among all client groups was drawn from a wide range of sources: quantitative where possible, supplemented by qualitative if appropriate, then using further consultation to “reality-check” the findings.

The area’s first JSNA was able to refer in detail to the assessment of housing-related support needs already available. This provided headline issues related to the needs of individual client groups, as evidenced by the quantitative and qualitative information from the detailed assessment. The greatest area of pressure were identified as a need to enable vulnerable people to stay at home using enhanced levels of floating support, particularly for older people.

The results of this analysis informed the priorities set in the 5-year Supporting People Strategy, and particularly a shift towards floating support to meet the disproportionate level of unmet need revealed for this kind of service.

Finally, in Bradford’s Sustainable Community Strategy can be seen that the housing-related support needs in the JSNA have been picked up and translated into strategic policy decisions. A strategic priority is to “help people maintain their independence and well-being at difficult times”. To achieve this, the strategy proposes to “increase resources for the Supporting People programme, improve access to housing and related support for vulnerable people, and prevent homelessness”, and “provide intensive support services in people’s own homes, or in a place of their choice, in ways which respect their dignity, wishes and aspirations.”

- 7.9 This approach requires the following action:

- An assessment in JSNAs of the future needs for housing-related support.
- Assessments of future housing-related support needs in the local JSNA are used in SHMAs as a significant factor in the evidence for future housing needs, particularly the need for supported housing.

- JSNAs to offer live sets of information and analysis on-line, so that they always provide the most up-to-date assessments for use by others³³.
- A common usage of terminology, definitions, and units, which is explicit and understandable for interested parties in all sectors.
- All local partners have an opportunity to inform the assessments, and there is active involvement of key stakeholders in managing their details.
- JSNAs and SHMAs need to ensure that their outputs can be aggregated and used as inputs elsewhere without encountering problems of compatibility.
- The presentation of evidence of housing-related support needs is differentiated by type and client group in a manner that facilitates prioritisation, targeting, service planning and budgeting.

7.10 In all of the above, the key voices to be heard will be decision takers and other practitioners who need to work with the outputs of assessments. It is important, therefore, that key players consider the above and agree a way forward.

Responsibility for implementation

7.11 The key people and agencies who would “own” the strategic approach proposed in this research paper might be:

- Directors of Adult Social Services, Public Health, Children's, and Community Services.
- The Regional JSNA group.
- District and borough council housing services.
- Heads of Supporting People.
- SPERG.
- Sub Regional Housing Groups, working separately or through RHAG.

7.12 Beyond these bodies, key stakeholders able to influence policy and support improved alignment are likely to be the East of England Local Government Association and the DH.. An important outcome will be a shared vision for housing-related support in strategic needs assessments that builds on the

³³ Consideration should be given to doing the same with SHMAs, although this would depend partly on the appropriateness of the methodologies used.

proposals set out in this paper. The East of England Local Government Association has a key role to play in facilitating discussion and joint working to support the “owners” of the strategic approach and other key stakeholders in providing leadership.

- 7.13 The Joint Improvement Partnership (JIP) is a partnership of Directors of Adult Social Services that aims to take an East of England Approach to improving social services in the Region. The JIP is interested in finding new and innovative ways to deliver better services to people in a more efficient way. It will be important to engage the JIP at an early stage, to ensure delivery of the recommendations contained within this research paper.

Dissemination

- 7.14 The proposed “owners” of the strategic approach set out above need to be responsible for ensuring its effective dissemination. A helpful starting point for dissemination may be to hold a launch event to present this paper’s findings and bring together the key players, in particular decision-makers who will be in a position to take the actions forward. The event could include workshops in which participants are invited to address the primary challenges in bringing about the proposed changes in JSNAs and SHMAs in order to inform the process of translating the strategic approach into a concrete plan of action.

Recommendation 5

Although there is an active regional JSNA network and SPERG coordinates Supporting People at a regional level, SHMAs do not have a similar network, It is recommended that an East of England SHMA project leads group is established to allow best practice (including comparing methods, costs, approaches and outcomes from each assessment, as they are created and updated) to be shared across the region. The group will help form links between the East of England JSNA Leads Group and SPERG, to ensure SHMAs and JSNAs are appropriately aligned and that the recommendations within this research paper are implemented.

Recommendation 6

It is recommended that the East of England Local Government Association, together with key partners and stakeholders, play an active role in facilitating the dissemination of the study’s finding to begin the process of translating the strategic approach proposed in this paper into an action plan.

Appendix 1: Sources of Information

Published by	Title and link	Date
National Policy / General		
Audit Commission	Supporting People Outcomes Data http://www.audit-commission.gov.uk/SiteCollectionDocuments/Downloads/spprogramme200509acfinalreportclg.pdf	2009
Bradford DC	Supporting People Strategy 2008-13 http://www.bradford.gov.uk/NR/rdonlyres/35781DD3-D997-42B7-B88B-B84DFE4D4D53/0/BradfordSupportingPeopleStrategy20082013FINAL.pdf	2008
Bradford DC	The Big Plan http://www.bradford.gov.uk/NR/rdonlyres/27B61414-0FE5-4B01-BE12-2E96A67D5C5E/0/BigPlanFullversion.pdf	2008
Capgemini for CLG	Research into the Financial Benefits of the Supporting People Programme http://www.communities.gov.uk/documents/housing/pdf/spprogramme.pdf	2008
CLG	Creating Strong, Safe and Prosperous Communities http://www.communities.gov.uk/documents/localgovernment/pdf/885397.pdf	2008
CLG	Creating Sustainable Communities: Supporting Independence. A Summary of Your Responses http://www.spkweb.org.uk/NR/rdonlyres/024F1D4C-9AD8-4842-96D7-82598EE5A005/9865/Consultationsummaryofresponses.pdf	2007
CLG	Homelessness Prevention Guide to Good Practice www.communities.gov.uk/documents/housing/pdf/policybriefing15.pdf	2006
CLG	Housing, Care, Support: a Guide to Integrating Housing-Related Support at a Regional Level http://www.communities.gov.uk/documents/housing/pdf/housingcaresupportguide.pdf	2008

Published by	Title and link	Date
CLG	Independence and Opportunity – Supporting People Strategy http://www.spkweb.org.uk/NR/rdonlyres/4E92E1E2-B5EF-42B4-AD0C-FE5B68C4330B/12855/bm07024supportingpeoplestrategy.pdf	2007
CLG	Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society http://www.communities.gov.uk/documents/housing/pdf/lifetimehomes.pdf	2008
CLG	Needs Analysis, Commissioning and Procurement for Housing-Related Support http://www.spkweb.org.uk/NR/rdonlyres/A0C59157-F85C-4D99-A7FE-BAD296978E0A/15297/NACPFinal.pdf	2008
CLG	Policy Statement on Regional Strategies http://www.communities.gov.uk/documents/planningandbuilding/pdf/1303429.pdf	2010
CLG	SHMA Practice Guidance and Annexes http://www.communities.gov.uk/documents/planningandbuilding/pdf/323201.pdf and http://www.communities.gov.uk/documents/planningandbuilding/pdf/323204.pdf	2007
CLG and Audit Commission	Supporting People Programme 2005-09 http://learning.chs.ac.uk/file.php/1/spprogramme200509acfinalreportclg.pdf	2009
CSIP, DH	Partnerships for Older People Projects – National Evaluation http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@pg/documents/digitalasset/dh_089539.pdf	2008
CSIP, DH	Partnerships for Older People Projects – Round 2 Profiles of Successful Projects http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_063725.pdf	2006
Devon County Council	Draft_Devon JSNA for People with Mental Health Problems http://www.devon.gov.uk/de/jsna_for_mental_healthv2.pdf	2009
DH	Commissioning Framework for Health and Well-Being http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_072605.pdf	2007

Published by	Title and link	Date
DH	Guidance on Joint Strategic Needs Assessments http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_081267.pdf	2007
DH	JSNA Core Dataset http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_099262.pdf	2008
DH	Shaping the Future of Care Together http://www.dh.gov.uk/dr_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_102732.pdf	2009
DH	World Class Commissioning: Introduction http://www.dh.gov.uk/en/Managingyourorganisation/Commissioning/Worldclasscommissioning/index.htm	2007-2009
DH	World Class Commissioning: Vision http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_080952.pdf	2007
Edwards, Margaret, for the Housing LIN, DH	Joint Strategic Needs Assessment and Housing: Report of a Study Based on the South East Region http://www.dhcarenetworks.org.uk/library/Resources/Housing/Support_materials/Reports/Report19_JSNA.pdf	2009
HGO for 4NW	The Need for Support and Supported Housing Services in the North West 2008-2020 http://www.4nw.org.uk/downloads/documents/aug_08/nwra_1217586078_4NW_Report_-_publication_versi.doc	2008
Housing LIN	Transforming the Delivery of Services - Policy Briefing 25 http://www.dhcarenetworks.org.uk/library/Resources/Housing/Support_materials/Briefings/Briefing25_JIP_RIEP.pdf	2008
Housing LIN, DH	Commissioning Housing Support for Health and Well-being http://www.dhcarenetworks.org.uk/library/Resources/Housing/Support_materials/Other_reports_and_guidance/HousingSupport.pdf	2008
Housing LIN, DH	Transforming the Delivery of Services http://www.dhcarenetworks.org.uk/library/Resources/Housing/Support_materials/Briefings/Briefing25_JIP_RIEP.pdf	2008
IDeA	JSNA: Progress so far http://www.idea.gov.uk/idk/core/page.do?pagelId=9616134	2009

Published by	Title and link	Date
JRF	Support for Living? The Impact of the Supporting People Programme on Housing and Support for Adults with Learning Disabilities http://www.communitycare.co.uk/Articles/2008/04/16/107923/Housing-support-for-people-with-learning-disabilities.htm	2008
Lancashire Drug and Alcohol Team	Needs Assessment http://www.lancashire.gov.uk/office_of_the_chief_executive/lancashireprofile/jsna/documents/LDAAT_Needs_Assessment_2009_10.pdf	2009
NHS et al	Putting People First – a shared vision and commitment to the transformation of Adult Social Care http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_081119.pdf	2007
North West Region	North West Needs Assessment Model within the Framework for Housing Support www.nwrpb.org.uk/whatwedo/issues/housing/?page_id=412	2009
Nottingham City Council	Domestic Violence - Nottingham City JSNA http://www.nomadplus.org.uk/secure/Intelligence/Health%20and%20social%20care/Joint%20Strategic%20Needs%20Assessment/DV%20final%20April%202008.pdf and http://www.ic.nhs.uk/webfiles/Services/in%20development/jsna/Nottingham%20Final%20Presentation.pdf	2008 & 2009
Peter Fletcher Associates for Bradford DC	Supporting People Needs Assessment for Bradford MDC http://www.bradford.gov.uk/NR/rdonlyres/388AA30F-ADE8-45D1-A462-1EAAE20B3C0D/0/SPNeedsAnalysisReportFinalJune2008.pdf	2008
Scottish Office Central Research Unit	Poor Housing and Ill Health: A Summary of Research Evidence http://www.scotland.gov.uk/Resource/Doc/156479/0042008.pdf	1999
Regional Policy Framework		
EERA	East of England Regional Housing Strategy 2005-10 www.eelga.gov.uk	2005
EERA	East of England Regional Social Strategy www.eelga.gov.uk	2007

Published by	Title and link	Date
SPERG	East of England Regional Supporting People Strategy http://www.spkweb.org.uk/NR/rdonlyres/1A47BFD4-8107-4097-9445-64DDE05178F8/15209/SupportingPeopleEastofEnglandRegionalStrategy20081.pdf	2008
Space East and Spiral	Adding value? – Rebuilding Lives http://www.eerhap.org.uk/index.php?option=com_docman&task=doc_download&gid=18&Itemid=26	2007
JSNAs in the East of England – correct at publication date		
Bedfordshire CC	Bedfordshire JSNA http://www.centralbedfordshire.gov.uk/council-and-democracy/statistics/joint-strategic-needs-assessment.aspx	2009
Cambs CC, NHS Cambridgeshire	Cambridgeshire JSNA Phase 2 http://www.cambridgeshirepct.nhs.uk/default.asp?id=656	2008
Essex LSP Southend-On-Sea LSP, and Thurrock LSP	Essex, Southend-On-Sea and Thurrock JSNA http://www.essexpartnership.org/vip8/com/Community/content/binaries/documents/Full_JSNA.pdf	2008
Hertfordshire CC and Herts. PCTs	Hertfordshire JSNA Core Dataset http://www.wherts-pct.nhs.uk/Documents/publications/Hertfordshire%20Joint%20Strategic%20Needs%20Assessment%202008.pdf	2008
Luton BC and Luton PCT	Luton JSNA http://www.luton.gov.uk/media%20library/pdf/housing%20&%20social%20services/joint%20strategic%20needs%20assessment%202008	2008
Norfolk CC, NHS Norfolk, NHS Gt.Yarmouth and Waveney	Norfolk JSNA http://www.norfolk.gov.uk/consumption/groups/public/documents/general_resources/ncc058348.pdf	2008

Published by	Title and link	Date
Peterborough BC and Peterborough PCT	Peterborough JSNA http://www.peterboroughpct.nhs.uk/default.asp?id=679	2007
Suffolk CC, Suffolk PCT, Gt Yarmouth and Waveney PCT	Suffolk JSNA 2008-11 http://www.suffolk.nhs.uk/LinkClick.aspx?fileticket=OTJZVJu3B2A%3d&tabid=331&mid=2642&forcedownload=true	2007
SHMAs in the East of England – correct at publication date		
Braintree, Chelmsford and Colchester	Braintree: http://www.colchester.gov.uk/Info_page_two_pic_2_det.asp?art_id=6629&sec_id=1443 Chelmsford: http://www.chelmsford.gov.uk/media/pdf/l/p/Chelmsford_SHMA_final.pdf Colchester: http://www.colchester.gov.uk/Info_page_two_pic_2_det.asp?art_id=6632&sec_id=1443	2008
Cambridgeshire Horizons	Cambridge sub-region SHMA www.cambridgeshirehorizons.co.uk/shma	2008
Ipswich BC	Ipswich SHMA http://www.ipswich.gov.uk/site/scripts/documents_info.php?categoryID=1004&documentID=628	2008
Peterborough CC	Peterborough sub region SHMA http://www.peterborough.gov.uk/housing/strategies_policies_and_plans/housing_strategy/peterborough_sub-regional_shma/shma_final_documents.aspx	2008
Rural East Anglia	Rural East Anglia SHMA http://www.northnorfolk.org/housing/967.asp	2007
Savills/ORS for EERA & GO-East	SHMAs in the East of England – A Quality Assessment Identifying Innovation and Good Practice www.eelga.gov.uk	2008

Published by	Title and link	Date
South Norfolk DC	Greater Norwich SHMA http://www.south-norfolk.gov.uk/housing/media/GNHMA_final_report.pdf	2007
Stevenage	Stevenage and North Herts SHMA http://www.stevenage.gov.uk/stevenage_web/res/filestore/dnld_ldf/SHMA_final-report.pdf;internal&action=save.action	2008
Thames Gateway South Essex Housing group	Thames Gateway South Essex SHMA http://www.castlepoint.gov.uk/file/Final_TGSE_SHMA_Report_19_09_08.pdf	2008
Waveney DC	Great Yarmouth and Waveney SHMA http://www.waveney.gov.uk/Planning/Planning+Policy/Local+Development+Framework/gy_w_housingMrket_assessment.htm	2007

Appendix 2: Abbreviations used in this report

CLG	Communities and Local Government
CAF	Common Assessment Framework
CSED	Care Services Efficiency Delivery
QIPP	Quality, Innovation, Productivity and Prevention
DH	Department of Health
DFG	Disabled Facilities Grant
EEDA	East of England Development Agency
EERA	East of England Regional Assembly (dissolved on 31 st March, 2010)
EELGA	East of England Local Government Association (taking forward the work of the former East of England Regional Assembly)
JSNA	Joint Strategic Needs Assessment
JIP	Joint Improvement Partnership
LIN	Learning and Improvement Network
SHMA	Strategic Housing Market Assessment
SOAP	Suffolk Offender Accommodation Project
SRS	Single Regional Strategy
SPERG	Supporting People East Region Group

Full report accessible at: www.eelga.gov.uk
www.suffolk.gov.uk
www.idea.gov.uk

Published: May 2010