

SUPPORTING PEOPLE

1. Introduction

In December 1998 the Government put out a consultation paper on how lower levels of support as opposed to care should be funded in the future. At the heart of the proposals is the ending of the use of Housing Benefit to meet some elements of support. This paper sets out the proposals and the issues they raise for support providers.

“Supporting People” is one small element of the Government’s overhaul of the welfare benefits system. The origins of this particular set of proposals are:

- Housing Benefit (HB) was intended primarily to help meet the housing costs of those with a low income in relation to family needs. Increasingly it had been used to fund support services. Housing Benefit was escalating
- A judicial review case eventually concluded in 1997 these extensions were illegal. Emergency measures were rushed through.
- The question of how low level support should be funded in future was referred to an inter-departmental review

The inter-departmental review concluded that funding support of individuals is complicated, uncoordinated and funding streams overlap, nobody is responsible for the adequacy of support services, there are no value for money measures in the system, no co-ordination between government departments, and there are disincentives to work.

2. Proposals and aims of the Supporting People

“*Supporting People*” is to address these issues and reinforce the Government’s commitment to supporting individuals at home wherever possible, a two-stage change is proposed:

1. transitional arrangements to run from April 2000-2003
2. a new Specific Grant for support to be phased in from 2003

The aim of the *Supporting People* programme is to improve the quality and effectiveness of these support services.

- Focusing provision on local need: introducing local needs assessments
- Improving the range and quality of services based on informed good practice.
- Integrating “support” with wider local strategies: particularly within Health, Social Services, Housing, and Neighbourhood renewal and Community Safety.
- Monitoring and inspecting quality and effectiveness integrating with ‘Best Value’
- Introducing effective decision making and administration

3. What counts as ‘support’

It is important to be clear what is meant by the ‘support’ service provided within this programme. These are services which are intended.

- To enable people to remain, or establish themselves independently, in the community. This may be in a tenancy, their own home, or specialised supported

housing. Enabling older people to remain in their own homes for as long as they wish is a key element of our housing strategy for older people.

- To be part of the range of preventative strategies being developed by local authorities, aimed at giving early help to avoid the need for acute or crisis care.
- To form part of 'packages' of provision designed to meet the multiple and varied needs of vulnerable clients. Supported housing or support services may form an element of a package of care and support.
- To ensure that the full range of vulnerable groups receive support services. Older people in sheltered accommodation form a large part of the programme and are a key priority for continued support.
- To encourage more co-ordination with NHS in, for example: contributing to the health and well-being of older people; and speeding up discharge from hospital
- To complement other support provision made by the authority.

There is some less helpful published guidance which says that the programme is not intended to supply additional resources to Community Care packages or to subsidise local authorities' current community care budgets, although it can operate in parallel with them. Support within this programme is primarily delivered to people whose needs do not require intensive personal care. This seems to run counter to other parts of the DETR guidance and the principle that care, support and housing should be part of a seamless service.

4. The Supporting People specific grant

This will be a new grant specifically for the purpose of funding support is to be introduced. It will be administered by local authorities. The grant will **not** be tied to property but focused on people and as a result, owner occupiers will be eligible. It will be a single, co-ordinated budget for support needs. This includes for example older people in sheltered housing who pay £15 per week in their rent or service charge for a warden and upkeep of communal areas. The grant will be an amalgamation of existing funding streams.

5. The transitional scheme

Eligible services in the transition include:

- assisting tenant in maintaining security of home (reminding to lock up, intruder alarms)
- assisting tenant maintain safety of dwelling (arranging plumbers, electricians, adaptations)
- assisting tenant with compliance with tenancy agreement (nuisance, claiming benefits to pay rent, maintenance of interior - include teaching some life skills, resettlement work)

For older people they allow for: wardens service explicitly (Schedule 1B), community alarms, cleaning rooms and windows where residents cannot manage. Ineligible items are personal care and supervising medication. Transitional arrangements include: new supported housing opened since August 1997 and people over 18, living in the private sector, with a community care assessment.

All supported and sheltered providers have been asked to identify the amount of their charge which relates to support, and show this separately from other charges. In sheltered housing, there is a tradition that 15% of the warden cost goes in the rent, and 85% in the service charge. Some feel the figures need to be completely different and there is currently wide variation in rent/service charge splits. A great many of the tasks undertaken by support staff could be

classified as housing management (and therefore in the rent) or support (and therefore in the support charge).

6. Managing the change

A series of reviews of provision is to be carried out by each authority during the first three years of the new programme. Each scheme within the authority area will be included at some point during this three-year period. These reviews will:

- be planned and announced as a programme of reviews at least six months prior to the start of the new programme in 2003;
- involve consultation with the users, commissioners and providers of current services;
- lead to decisions which will be implemented only after a period of one years notice.

7. For and against

Many have welcomed an attempt to get a more coherent funding for support services, incentives to encourage housing and social services to work together but there are many concerns

- Moving from individual eligibility based, HB funded by central government to a cash limited budget administered through local government.
- The fund being inadequate because of new competing demands for funding.
- Not all local authorities have been using HB to the full but they will eventually catch up
- Doubts about how central government will inflate funding
- Initially allocations of funds to local authorities will follow present patterns but in the longer term may require re-distribution
- It has been suggested sheltered housing is removed from the arrangements because of the cost of administering very small claims for 500,000 older people.
- Uncertainty over the treatment of registered care homes and problems of inconsistency with new Care Standards Act arrangements for registration of services

8. Strategic Planning

Joint strategic planning of supported housing services by local statutory authorities is the key to Supporting People. Plans will be produced every five years, and the Supporting People Strategic Plan must

- map needs and supply, including specific reference to minority ethnic needs;
- review performance;
- take account of users' views;
- link into other strategic plans such as Health Improvement Plans (HimP), housing strategies, Community Care Plans and Crime & Disorder Strategies;
- set aims and priorities by client group;
- define 'cross-authority' arrangements;
- lay out adequate commissioning, monitoring and review arrangements at scheme level.

9. Recommendations

Supporting People recognises the importance of support for people live in their own home. It is the first time the DETR has formally acknowledged the value of the housing and support

partnership. What is also vital is that this should extend to the need for care as part of a mixed package for a resident. It is also valuable in developing structures for joint working between social service and housing departments. There is a danger that people with care needs should (as with the Care Standards Act) be placed into a separate category of service which is ineligible for housing and support through the DETR arrangements for *Supporting People*. To make the most of the initiative for people with learning disability local authorities should

1. Develop good housing - social service working arrangements to maximise the use of *Supporting People* and other resources and operational practices such as the joint assessments required under S 47 of the Community Care Act 1990.
2. Use the arrangements to improve services for people with moderate learning disabilities who might be ineligible for full care packages.
3. Ensure that support and care funding can be combined where an individual requires both.
4. Collect information on needs to inform the plans for services and support funding
5. Make sure that existing services where people are eligible for grant should use the Transitional Arrangements for housing benefit to ensure that their needs form part of the total for transferred funding in April 2003
6. Establish operational arrangements for joint action to sustain housing and support packages to avoid tenancy breakdown or manage problems that arise.
7. Co-ordinate the monitoring and supervision required for support, personal care or as part of contract conditions for funding.
8. Establish fair charging policies where people are receiving benefits or have their own income.*

*There is an additional concern at present with treatment of payments from the Independent Living Fund. If a Health Authority transfers money to a Local Authority, then for ILF purposes, it will be included in the calculation as part of the Local Authority contribution and as part of the total Package cost (Social Care cost). If a Health Authority funds a service directly, then that funding is disregarded as far as the ILF is concerned - both in terms of determining the Local Authority contribution and in determining the maximum cost of the package. Many areas have used the disregard of Health Authority's direct contribution to good effect - basically enabling people to still receive ILF even though the costs exceed £625 per week (the new limit since February).

More recently, the ILF has interpreted its own policy as being unwilling to consider any application from a person who has ever lived in a long stay hospital (no matter how long ago, and how short a stay). This has not always been the case. Historically, the ILF would only not consider an application if a person was leaving a long stay hospital as part of a closure programme. At least one authority is considering/preparing an application for judicial review of the ILF's change of position. The argument that the ILF cannot be used by people who, in the past have been in long stay hospital, regardless of whether or not they are currently 'fully funded' seems unreasonable.

SUMMARY OF RECOMMENDATIONS

People with a learning disability should be helped to have their own home. The government aim of promoting independence and less reliance on registered care will be frustrated if services providing housing care and support are fitted into a residential care home model for regulation and administration. It is therefore suggested that

1. People holding a tenancy are more properly considered as having their own home and therefore not be treated as living in a registered care home. Regulation of domiciliary care could be registered through the agency providing that care.
2. Funding and benefit entitlement should not be linked directly to registration status but more properly depend on their tenancy or occupancy agreement
3. Where care is provided under an agreement separate from their housing this should more properly be treated as domiciliary care.
4. Where the local authority are purchasing support or care services these should additionally be supervised through contract monitoring and care management.

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