

HOUSING LIN POLICY BRIEFING

Housing and New Horizons' consultation

Introduction

This briefing paper, published by the Housing Learning and Improvement Network, outlines the key points in the New Horizons Consultation document, highlighting where housing and homelessness are mentioned.

About New Horizons

The National Service Framework for Mental Health (NSF) was published in 1999. This had a ten-year life span and was the blueprint for the transformation of mental health services in England. As the NSF comes to an end, a new approach is sought for, one that builds on the NSF's successes by supporting the local development of higher quality, more personalised services, and one that also moves the agenda on by building a cross-government, multi-agency alliance that can tackle the root causes of poor mental health and get support to people where and when they most need it.

Setting out a Vision

New Horizons sets out the vision for 2020 for people with, or at risk of, mental health problems:

"In 2020 most adults will understand the importance of mental well-being to their full and productive functioning in society, to their physical health, and to their ability to make healthy lifestyle choices. They will also understand some of the factors that affect their mental well-being, and will have developed their own everyday ways for taking care of it. Children will increasingly be taught in school about the importance of mental well-being and how to nurture and preserve it, and a range of local services will support their well-being so that problems are detected early. Mental health needs will be identified at an early stage so that, for example, treatment and support can be provided while the individual is an adolescent, thus reducing the chances that mental health problems will continue and adversely affect their adult life. "

"In 2020 physical health and mental well-being will be seen as equal priorities, and the links between them recognised as key to maintaining physical and mental health. Lifestyle and well-being services will be widespread. Psychological and family treatments will be available to all who could benefit from them. Drug treatments will be individually tailored so they have fewer adverse effects. Services will use innovative technologies to promote independent living and the effectiveness of treatment. "

The vision includes:

- Personalised services

People with mental health problems, and those at risk, to receive personalised care packages designed to meet their individual needs.

- Equality

In 2020, all individuals to be treated with respect in an inclusive society, whatever their age, background or circumstances. Services to be attuned to the needs and wishes of individuals and communities and actively promoting equality.

- Stigma and understanding

In 2020, the stigma attached to mental health to have declined dramatically. People to know that mental health problems can affect anyone, at any time, and to understand that these problems have causes and can be treated, just like physical illnesses.

- High-quality care for all

In 2020, services to treat and care for people with mental health problems, including personality disorder, to be accessible to all who need them, to be based on the best available evidence, and aimed at regaining hope and recovery of psychological and social functioning and good physical health.

- No health without mental health

In 2020, people with mental health problems to be no longer be at greater risk of physical ill health than the rest of the population.

The association between poverty and mental and physical health inequalities in some groups and communities is highlighted. The aim is that in 2020 this interaction will be better understood and addressed. Local and national programmes to improve employment, housing, education, transport and health services will be based on a good understanding of the needs, assets and special characteristics of each community.

Key Themes

The following themes are outlined the consultation document:

- **prevention and public mental health** – recognising the need to prevent as well as treat mental health problems and promote mental health and well-being
- **stigma** – strengthening our focus on social inclusion and tackling stigma and discrimination wherever they occur
- **early intervention** – expanding the principle of early intervention to improve long-term outcomes.
- **personalised care** – ensuring that care is based on individuals' needs and wishes, leading to recovery.
- **multi-agency commissioning/ collaboration** – working to achieve a joint approach between local authorities, the NHS and others, mirrored by cross-government collaboration.
- **innovation** – seeking out new and dynamic ways to achieve our objectives based on research and new technologies.
- **value for money** – delivering cost- effective and innovative services in a period of recession.
- **strengthening transition** – improving the often difficult transition from child and adolescent mental health services to adult services, for those with continuing needs.

Links with housing and neighbourhoods

It is recognized that different aspects of housing and the neighbourhoods have the potential to play a role as part of the education and promotion of mental well-being across the whole population.

The role of community

Neighbourhoods and the delivery of care and support in local communities are seen as a place for that to happen through targeted prevention of those groups/individuals at risk. As a result, housing and related support could play a key role in targeted prevention. For example, from providing a safe environment for self-care to a place to receive specialist community services that aid recovery.

Hospital Discharge Protocols

A partnership of Homeless Link, the Homelessness Group of the London Network for Nurses, the Department of Local Government and Communities and Department of Health produced joint guidelines to support hospitals draw up their own protocols for the admission and discharge of people who are homeless. This was in response to people being discharged from hospital either to sleep rough or into a hostel that was not suitable for their health needs, both physical and mental. It can be used in general, A&E or adapted for mental health settings. The aim is to avoid people being discharged back to the streets or inappropriate temporary accommodation. The guidelines identify the processes, issues and partnership working involved.

http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/Homelessness1/No_One_Left_Out/Health_and_Rough_Sleeping/?parent=5954&child=5746

Accessing services

There is an emphasis on people living in cohesive communities. Local Authorities, third sector and statutory organisations can do much to promote social cohesion through facilitating leisure and social activities. Support workers can play a role in getting people involved. Housing providers could play a wider role in the community, one example is extra care schemes for older people who open up their facilities to the wider community and build links.

In addition, the use of Assertive Outreach (AO) has been developed in partnership between housing, health and social services in many areas to bring treatment and support to people who find it hard to engage with mental health services. These teams work with people who have severe mental health problems, often with additional needs relating to drug or alcohol misuse, offending and social relationships. The remit of the AO also includes people who traditionally have not accessed statutory services, including homeless people.

Homeless Health Project

Amongst Homeless people nearly 75 per cent have mental health problems; well over half are drug or alcohol reliant; and as many as a third have physical health conditions for which no treatment is being received. The homeless charity St Mungo's estimates that only 30% of people who are homeless come away from an inpatient stay with a treatment plan, and only 17% from A&E.

UCLH is enabling a potentially revolutionary project to develop which aims to take the care received by homeless people to a new standard that offers multi-disciplinary support. This includes:

- **Homeless ward rounds in central London hospitals**, to pull together the disparate efforts of social workers, physiotherapists, drug and alcohol workers, psychiatrists, housing

representatives, primary care teams, and discharge sisters; and coordinate care for the complex needs of homeless people, both in hospital and on discharge.

- **A model of perfect partnership** reaching out from homeless ward rounds to forge long-term links with homeless people following discharge, to help them rebuild their lives and ensure their needs are being met in the community.

- **Care navigators:** people who have experience of homelessness who can offer emotional support and assertive outreach for those most in need, and link them up with services.

The built environment

There is specific mention on the impact the built environment has on someone's mental health:

“Features of the physical environment such as building layout, transport links, green spaces and lighting can improve safety and community cohesion. Social housing and housing-based services have potential as ‘community anchors’, promoting a sense of belonging. Neighbourhood regeneration schemes can be innovative and do much to improve the environment.”

Design principles for Extra Care housing

This Factsheet , produced by the Housing LIN, describes key design principles and issues to consider when designing and developing a brief for a new Extra Care scheme. Case studies illustrate the variety of models that this concept of housing takes and show ways of developing a range of different sites. It signposts to the latest information on Building Regulations and standards, such as the 'Design and Quality Standards', and showcases industry-accepted good practice examples.

<http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/type/resource/?cid=1629>

Settled accommodation

A key government driver is the PSA 16 on settled accommodation for vulnerable people, including those with mental health problems.

Settled accommodation for the people with mental health problems is defined as:

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| owner occupation | supported accommodation | other accommodation with care and support (non specialist mental health) |
| settled mainstream housing with family or friends | supported lodgings | other accommodation with criminal justice support |
| a shared ownership scheme | a supported group home | sheltered housing |
| a social housing tenancy | other accommodation with mental health care and support | extra care sheltered housing |
| a private rented sector tenancy | a foyer | other sheltered housing |
| other mainstream housing | a bail/probation hostel (approved premises) | mobile accommodation for Gypsy/Roma and Traveler communities. |

More explanation of these types of accommodation are included at:

http://www.cabinetoffice.gov.uk/media/cabinetoffice/social_exclusion_task_force/assets/psa/guidance_psa_indicators_032808.pdf

Homelessness

In addition, the government's Rough Sleepers Strategy sets out how housing can play a key role for those with complex needs. Integrated care pathways for homeless people with mental health needs has tended to focus on co-ordination of clinical services and social care, rather than improving links and joint working with homelessness services. This will provide a challenge to commissioners of new services to support positive accommodation outcomes within integrated pathways

St Mungo's Health Strategy for Homeless People 2008 - 2011

St Mungo's, a charity providing services for homeless people in London, has published this strategy to elaborate how they will focus on health delivery in their hostels. It aims to integrate their vision of service delivery across physical health, mental health, drugs and alcohol and thirdly to address their priority areas for promoting positive health and well-being. It focuses on their hostels and will include piloting health services directly responsive to residents' needs in three hostels.

http://www.mungos.org.uk/press_office/352_st-mungo-s-publish-health-strategy-for-homeless-people

Housing and well-being

The example below showcases how housing can play a role in improving people's mental health and well-being.

Silver Deal Active

Silver Deal Active (SDA) was launched in Glasgow in November 2005 to provide a structured and tailored physical activity programme for Glasgow Housing Association

(GHA) tenants in local community venues (including GHA's sheltered and very sheltered housing complexes). The aim of SDA is to offer opportunities for older people who are too frail to take part in more traditional exercise programmes to build physical activity into their lifestyles. SDA has since expanded to other parts of the city. SDA East, for example, offers a programme of free activity sessions for people aged over 60 living in the east end of Glasgow. Run in partnership by East Glasgow Community Health and Care Partnership GHA and Culture and Sport Glasgow, the activity sessions are led by a qualified coach and tailored around the needs of local residents, ensuring that they are appropriate for their mobility and activity levels. The weekly one-hour sessions offer a variety of physical activities, including chair aerobics, Tai Chi and Pilates. A programme of health talks and active arts sessions is also available.

A range of benefits have been reported by those taking part in Silver Deal, including increased strength, stability and mobility, increased confidence and a more active social life – with many people making friends and enjoying the opportunity to get out of their homes on a regular basis.

Summary

New Horizons has two main aims:

- improving the mental health and well-being of the population
- improving the quality and accessibility of services for people with poor mental health.

The consultation takes a cross government and agency approach to those with mental health needs, those at risk and the promotion of mental well being generally. It covers childhood to old age. It looks at the wider determinants of mental health and the inequalities and social exclusion that impact on people.

This consultation is relevant for providers and commissioners of supported housing, and those working with homeless people, across client groups. Mental health problems and well-being cuts across client groups and ages. Housing and support can play a role in shaping the New Horizon.

There is a role with general well-being across all people who providers and support services work with. This includes looking at the environment, linking into the local community and supporting people in the activities and services that will keep them mentally healthy. This is a key preventative role.

It can include training for staff so they are aware of mental health issues and can identify where someone could benefit from some early intervention. This can include being aware of preventative and protective factors in keeping well as well as early signs. This is about addressing mental health and well-being across client groups and ages.

Have your say

To take part in the consultation click here

http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_103144. Consultation closes 15th October 2009.

About the Housing Learning and Improvement Network

The Housing Learning and Improvement Network (LIN) is the national network for promoting new ideas, sharing learning and supporting change in the delivery of housing, care and support services for older and vulnerable adults. It is part of the Putting People First delivery team at the Department of Health and oversees the extra care housing capital programme.

More information is available at www.dhcarenetworks.org.uk/housing