

Research into the effectiveness of floating support
services for the Supporting People programme
Final Report



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Civis Policy Consulting Research

April 2008

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Executive summary

The findings in this report are based on a short-term, secondary review of available literature and current practice undertaken by Civis for Communities and Local Government in September 2006. The researchers drew on a range of information, including a literature and Administering Authorities (AA) documentation review, meetings with eight key stakeholders¹, a questionnaire to Audit Commission Supporting People inspectors, telephone interviews with a sample of AAs and providers (covering a variety of client groups) and an analysis of Supporting People Local Services and Client Record data.

Purpose of the review

The review was commissioned in order to better understand the effectiveness of floating support services, and the balance needed between floating support and accommodation based services in order to improve service delivery and choice and control for service users.

Benefits of floating support

The review found a number of benefits in providing floating support services. These are mainly focused on the delivery of flexible, person centred services to enable people to establish and maintain independence in “ordinary” housing. Benefits identified included:

- This type of support can be provided to anyone who requires the support irrespective of the type of accommodation in which they live.
- The separation of support from housing allows floating support workers to be advocates for the service user and not representatives of the landlord.
- Services are flexible and can respond rapidly to crises or emergencies.
- People in isolated or rural areas can be provided with support in their own homes – services can have a greater “reach” than accommodation-based services.
- The level of support provided can be tailored to meet the needs of individuals and the hours for individuals can be moved around.
- Floating support adopts a “holistic” approach to assessing an individual’s needs and acts as a focal point for brokering access to other services.
- It can be focused to meet strategic objectives, such as tackling homelessness (by sustaining accommodation), crime, anti-social behaviour and wider social inclusion issues.

¹ Audit Commission, Homeless Link, Housing Corporation, National Housing Federation, National Women’s Aid, NIMHE, SCIE and Sitra.

- It can deliver health and social care outcomes including prevention of hospital readmissions, support through hospital discharge, reduction of substance misuse, and prevention of institutional care.
- Positive outcomes for service users include improving quality of life, learning independent living skills, accessing training/employment and improving health.

Circumstances where the provision of floating support can face obstacles

- Some individuals may be reluctant or resistant to engage with support and other services, and a floating support approach may allow or provide opportunities for disengagement.
- There are risks to be managed about the timing of support withdrawal – too early can lead to tenancy breakdown, too late may make the user dependent on the service.
- Some individuals who require stabilisation may require more intensive on site or 24-hour cover.

Types of floating support

The review found that all floating support services can be grouped under the broad headings of generic or specialist services. In addition, it found that there is a specific type of generic floating support service which solely focuses on crisis intervention work and then moves away. The review defined specialist services by the specialist knowledge of staff as well as a higher intensity of support.

The review concluded that all floating support services are, to a greater or less extent, multi-disciplinary. It also concluded that all types of floating support services can carry out crisis intervention work, although generic crisis services move away once the crisis is resolved.

Cost-effectiveness of floating support

The researchers reported a considerable body of evidence about the cost effectiveness of floating support in terms of:

- Reducing rent arrears
- Prevention of tenancy breakdown and the resulting costs
- The reduction of hospital admissions (for people with mental health problems)
- The timely discharge of older people from hospital

- The reduction of re-offending rates
- Addressing anti-social behaviour
- Preventing truancy costs

All of these outcomes reduce costs for public agencies, but also have wider social benefits of helping to create sustainable communities and greater social cohesion.

The balance between floating support and accommodation-based services

The debate about the balance between floating support and accommodation based services has tended to be framed in terms of the more floating support commissioned, the less accommodation based services will be available. This review showed that by re-commissioning existing floating support services it is possible to not only increase the capacity of these services, but also provide much more focused and coherent services, without impacting on the level of accommodation based services.

The researchers found a general consensus that an effective balance between floating support and accommodation based services should be based on local circumstances, and result from the strategic approach adopted by each authority to achieving the outcomes they require. The authorities interviewed identified a number of factors that could influence the right balance in each area, including:

- different strategic approaches to commissioning;
- local assessments of needs;
- the level of legacy floating support services;
- the scarcity of affordable housing within the authority; and
- whether the authority covered an urban or rural area.

The review came to the conclusion that the balance between accommodation based and floating support services should only be altered as part of a strategic approach to effectively address needs and achieve strategic outcomes. In particular authorities need to consider the point at which people require access to services and how people can move through services.

Preamble

This review is intended to provide Communities and Local Government with a better understanding of floating support services, specifically in achieving the aims of the Supporting People programme. A summary of the research aims and the approach adopted is shown in Appendix 1.

The definition of floating support for the research is '*support services which are not tied to the accommodation*'. For the purpose of this review this means support that either:

- floats off to another service user when the support is no longer required, (usually crisis intervention or short term work); or
- follows the individual as the service user moves through different types of accommodation (usually long term support).

This review is not intended to provide a definitive statement about what is meant by the term floating support, or its boundaries with other types of services. However the definitions used above were understood by most of the participants and were considered sufficiently universal to encompass the majority of floating support services.

The report is structured to address the key research questions, particularly in relation to the effectiveness of floating support services and the appropriate balance between these types of services and accommodation based services. Appendix 2 draws out a number of action points in relation to good practice in delivering floating support services. A glossary of terms is shown in Appendix 6.

Throughout the report there are a number of illustrative examples. These examples are intended to illustrate the issues raised in the text and are not intended to illustrate good practice.

Chapter 1:

Introduction

1.1 Introduction

The Supporting People programme was launched in April 2003 and aims to provide housing related support services to help vulnerable people live independently in their home and prevent problems that can lead to hospitalisation, institutional care or homelessness. The programme is also intended to help with the transition to independent living for those leaving hospital and institutions such as prisons.

The Supporting People programme is administered by 150 Administering Authorities that are responsible for delivering the programme at a local authority level including developing Supporting People strategies, working in partnership with other stakeholders, commissioning support services and monitoring the quality and performance of the services. The majority of support services commissioned under the programme are either accommodation based services, where the support is linked to the accommodation, or floating support services.

One of the main reasons for this review was the considerable amount of re-commissioning activity involving floating support services. There have been some concerns that the growth of floating support, in particular generic services, has been funding led rather than strategically led. It is therefore useful to look at the context to the growth in floating support services over the past decade, to set the scene for this review.

1.2 The growth of floating support

The growth of floating support services was first stimulated by a number of new service initiatives in the 1990's, which created considerable interest in these types of services as an alternative way of providing support to vulnerable people. Some of the floating support services were developed as local initiatives led by providers, while others involved a strategic multi-agency approach (CVS 1997).

The Housing Corporation's decision in 1991 to allow housing associations to bid for revenue only funding (using Supported Housing Management Grant) provided considerable impetus to the development of floating support services. This programme meant that housing related support could be provided to people living in

ordinary housing association units and, instead of developing accommodation based support services, housing associations had the option of developing floating support.

Several events in the mid 1990's contributed to the development of Supporting People, the main catalyst being a high court judgement confirming that restrictions on housing benefit to cover counselling and support services were lawful. As a consequence the government introduced a Transitional Housing Benefit (THB) scheme to protect existing supported housing service users until an alternative permanent solution could be found.

In 1999 the government announced that it would introduce the Supporting People programme from April 2003, with support funding drawn together into a single pot to be administered by local authorities. A new THB scheme was introduced in the run up to April 2003, the costs of which rose considerably during this period. There were a number of reasons for this increase, including the costs of new services to meet new policies e.g. homelessness prevention and the implementation of Valuing People (Audit Commission 2005). As floating support could be developed over a relatively short timescale it became the main model for delivering new support services.

In September 1999 there were 2,435 units of floating support services funded under the Housing Corporation's SHMG funding framework, over 40 per cent of which were for people for mental health problems (a unit of floating support is defined as a service user household). In April 2003 there were 106,892 units of floating support, with the main client group being people with generic needs (27%). Over a very short period of time there had been a substantial increase in these types of services.

Timeline	
1991	Housing Corporation began funding floating support services using SHMG
1997	High court decision on the use of housing benefit for counselling and support services. Introduction of Transitional Housing Benefit
1999	Government announcement of the introduction of Supporting People and the introduction of a new THB scheme for the period up to April 2003
2003	The introduction of the Supporting People programme on 1st April 2003

1.3 Floating support under Supporting People

The introduction of the Supporting People programme led Administering Authorities to re-appraise their legacy funded services to assess whether they were strategically relevant and appropriate for meeting the needs of service users. In particular legacy funded floating support services had a number of limitations, including the type of tenure on which THB could be claimed. Furthermore, the way in which support was provided usually meant that individual housing associations only provided support to their own tenants and there was an uneven approach to the way in which these services were being provided.

The introduction of the Supporting People programme led authorities to question whether legacy funded floating support services were appropriate to achieving their corporate strategies. Authorities have been through a process of re-evaluating these services using the quality and monitoring tools supplied by Communities and Local Government, and many have decided to re-commission their floating support services. This report mainly concentrates on examining the re-commissioning of floating support services by those authorities that have already undertaken this exercise or are in the process of doing so.

Chapter 2:

Floating Support Services

2.1 Introduction

This research has found a general perception amongst some of the strategic stakeholders that the commissioning of generic floating support is largely driven by financial expediency. Commissioning floating support services is perceived as the primary method used by authorities to deal with a reducing budget, at the expense of accommodation based services. Furthermore, as authorities are able to commission a lower level of support input, immediate savings can be made irrespective of the outcomes that they may want to achieve.

However, the research also found that the sample of Administering Authorities interviewed have re-commissioned their floating support services to more effectively achieve their strategic objectives. Rather than decommissioning accommodation based services, in favour of floating support, these authorities have focused on rationalising their existing floating support contracts to increase capacity and improve coverage.

Discussions with the Audit Commission, and other strategic agencies, indicate that some Administering Authorities are driven by financial expediency and may not have linked the commissioning of floating support to the outcomes they want to achieve. The sample of Administering Authorities interviewed for this review was selected to highlight good practice and may not present a typical picture.

2.2 Strategic approach to commissioning floating support

One of the key issues the review wanted to examine was whether there was a strategic approach to commissioning floating support services and whether the authorities were clear about the outcomes they wanted to achieve. Of those authorities that had re-commissioned floating support services, the review found that all had adopted a strategic approach to achieving key corporate outcomes including:

- preventing homelessness i.e. reducing evictions;
- reducing crime e.g. by working with those involved in anti-social behaviour;
- increasing social inclusion e.g. by providing access to mainstream services;

- providing support to homelessness applicants and make savings to related costs such as reducing school exclusions.

The review also found that a number of authorities had carried out some strategic thinking about visiting support and were either in the process of re-commissioning these services as floating support, or reviewing how these services could be provided within an overall pattern of service provision to vulnerable people.

The cross authority strategies of some Administering Authorities have provided a framework for thinking about sub-regional commissioning. The West London group of authorities is in the process of jointly commissioning a cross authority floating support service for single homeless people and Southampton, Portsmouth and Hampshire may commission a sub-regional floating support service for offenders.

2.2.1 Key Drivers for developing floating support

In addition to the strategic objectives identified, the review found the following were key drivers for commissioning floating support.

Rationalising legacy provision

All the authorities involved in commissioning floating support had inherited a patchwork of floating support services as result of legacy arrangements. Some of these services were long established, while others had been pulled together to take advantage of THB funding prior to the introduction of the Supporting People programme. Therefore, many of the authorities interviewed wanted to reconfigure existing floating support services to more effectively meet their strategic objectives and to reduce the number of contracts where similar services were provided.

Example – Cornwall County Council

Cornwall reviewed their floating support services under the auspices of Communities and Local Government's Value Improvement Programme. The council found that they had 49 different floating support services in the county and as a consequence started a process of rationalising contracts and services. The county has produced a service specification for a new floating support service that will be split into three geographical areas to cover the whole county. All clients requiring floating support will be served through the services provided under the three contracts. Cornwall envisages that the services will be delivered through partnerships or consortia with one umbrella organisation managing the overall contract/s. The county considers these services to be multi-disciplinary, with partnerships to deliver the specialisms within the overall zoned contracts.

Improving coverage

One of the main reasons for re-commissioning support services has been to improve their coverage, particularly in rural areas. County councils, in particular, want services that can respond to a variety of needs across the county. This issue has been the main driver for commissioning generic services, as they can respond immediately to the needs of individuals irrespective of the client group or the accommodation in which a person lives. The review has shown that often support is needed on housing and financial matters and swift intervention can prevent problems from escalating. Furthermore, one of the purposes of such services is to broker access to more specialist services, where a client requires specific help.

Providing more equitable access

The re-commissioned floating support services involve a tenure neutral approach so that people living in private rented housing, social housing and owner occupied accommodation can access the service. Legacy floating support services often involved ring fencing services for people living in particular types of tenure, e.g. social housing, mainly because these tenancies could easily be linked to THB.

The review found that authorities also want to create greater clarity of access for service users, including developing single points of access or single 'gateways'. A single point of access can replace the numerous access arrangements under legacy funded services and as a result can provide more equitable access for service users. Some authorities have introduced open access arrangements (including self referrals) to ensure a rapid response.

Example – Somerset County Council

Somerset has commissioned a generic floating support service from Novas with county wide coverage. The service provides support for up to 650 service users at any one time. Previously Somerset had a patchwork of floating support for different client groups and has replaced them with a single generic service. There is a single gateway through Shelter which does the initial advice and screening. The main advantage of the generic service is that it is a more responsive and inclusive way of providing a support service – the service is tenure neutral and can provide access to people living in rural areas and meet a diversity of needs. Furthermore there is less stigma attached to the service as users are not linked to a particular client group and the service can be provided in a person's own home.

2.2.2 Commissioning Issues

There are a number of commissioning issues that have arisen from this review. This review is not specifically required to address commissioning issues, but some of these have implications for the effectiveness of floating support services. These issues are as follows:

Service specifications for floating support

One of the stakeholders made the point that a service should not be too tightly defined as this could result in a less flexible approach to delivery. One of the main advantages of floating support is that it can respond flexibly to individual need and as a result the specifications for these services need to be broadly based and focused on outcomes.

Authorities differed in their approach to defining the volume of services required. Some required the volume of services to be specified in terms of the number of hours and others required the number of units. Some authorities took the view that specifying the number of hours creates a much more flexible service as this involves agreeing a target number of service users and allowing the provider to manage the coverage of the service.

Providers

The re-commissioning of generic floating support services has had a considerable impact on the number of contracts for floating support services. Authorities have tended to roll together a number of existing floating support contracts into one, two or three contracts for generic services.

The review involved discussions with authorities about the impact of this approach on providers and found the following:

- A London authority pointed out that although this process has reduced the volume of services provided by some providers, most of the providers are still running other types of services;
- A county authority pointed out that larger organisations have the capacity to deliver large contracts and they intend to use smaller organisations to deliver specialist services and services for high risk groups;
- A unitary authority explained that although it is rationalising the number of contracts for floating support the process will not necessarily rationalise the number of providers as many are creating consortia.

It is clear, though, that where floating support services have been re-commissioned there has been a rationalisation of those providers delivering this type of service. One authority explained that they did not set out to reduce the number of providers, but the tender process resulted in a “massive shake up”. Other authorities explained that

they intend to award some of the large floating support contracts to partnerships or consortia – probably with one umbrella organisation managing the overall contract and other partners delivering specific elements. Voluntary sector organisations are more likely to be sub-contracted under this arrangement, unless a large voluntary sector provider leads the partnership.

Although a reduction in the number of providers was highlighted as potentially reducing choice from a service user point of view, the issue of choice may be more related to the way in which the service is provided (i.e. having a 'say'), for instance the frequency of visits, the options available and the extent to which the support plan is person centred.

Savings

The issue of savings was discussed with the authorities and it is clear that, for some, the commissioning process has resulted in savings compared to the cost of the previous floating support contracts. These savings have either been re-invested in increasing the capacity of the new floating support service, or have made a contribution to the overall Supporting People budget reductions.

The interesting point is that none of the authorities involved in re-commissioning floating support services identified the need to make savings as the main driver for commissioning floating support. Some authorities recognised that floating support gives them a more flexible commissioning model for the future, as these services could be de-commissioned should substantial reductions to their budgets be required.

Administrative savings have also resulted from the re-commissioning of floating support, for example one authority will manage 3 contracts for a county wide floating support service instead of the 66 existing contracts. This will provide for greater efficiencies in terms of monitoring the quality and performance of these services.

Costing the service

The authorities involved in the review pointed out that the contracts for legacy floating support services showed a huge variation in the prices paid for these services. The vagaries of THB meant that the services were costed in different ways and there was no consistency between similar services. An analysis of the contracts for floating support services by one of the authorities showed the following:

- The hourly rate for all floating support services ranged from £4.00 per hour to £62.90 per hour.
- The average hourly rate was £22.46.
- The median (midpoint) hourly rate was £19.78.

- Providers that had more than one service charged different rates for each service. This includes services which related to similar client groups in similar areas.
- The average hourly rate charged by providers, ranged from £10 per hour to £51.44 per hour.
- The contract price per unit per week ranged from £3.05 per unit to £163.44 per unit.

As part of the rationalisation process authorities wanted to obtain consistent prices for similar services, based on a service specification for floating support. This approach can provide a more transparent method for pricing services against specific expectations around quality and outcomes.

The most common method for tendering floating support services has been on the basis of an hourly rate for support. This approach allows providers to define the number of hours of support that can be provided for a given contract sum. Other approaches have involved the unit cost of providing floating support, with the costs broken down between staffing and overheads.

The SPLS data for February 2006 shows that on average floating support services provide about 3.3 hours of support per unit per week for front line staff and 0.61 hours for direct managers of front line staff. This works out at an average hourly rate of approximately £28 for floating support, which is higher than the hourly rate for those services that have been re-commissioned (in one example an hourly rate of £21 was awarded).

There is an issue about defining what an hour of support should cover, in particular the proportion of contact time with service users, and related follow up work compared, with the time spent on travel and supervision/management. Monitoring these areas of activity can help authorities assess the level of productive time spent on direct services to service users.

Example – Essex County Council

Essex will be commissioning a county wide floating support service through three separate contracts, as follows

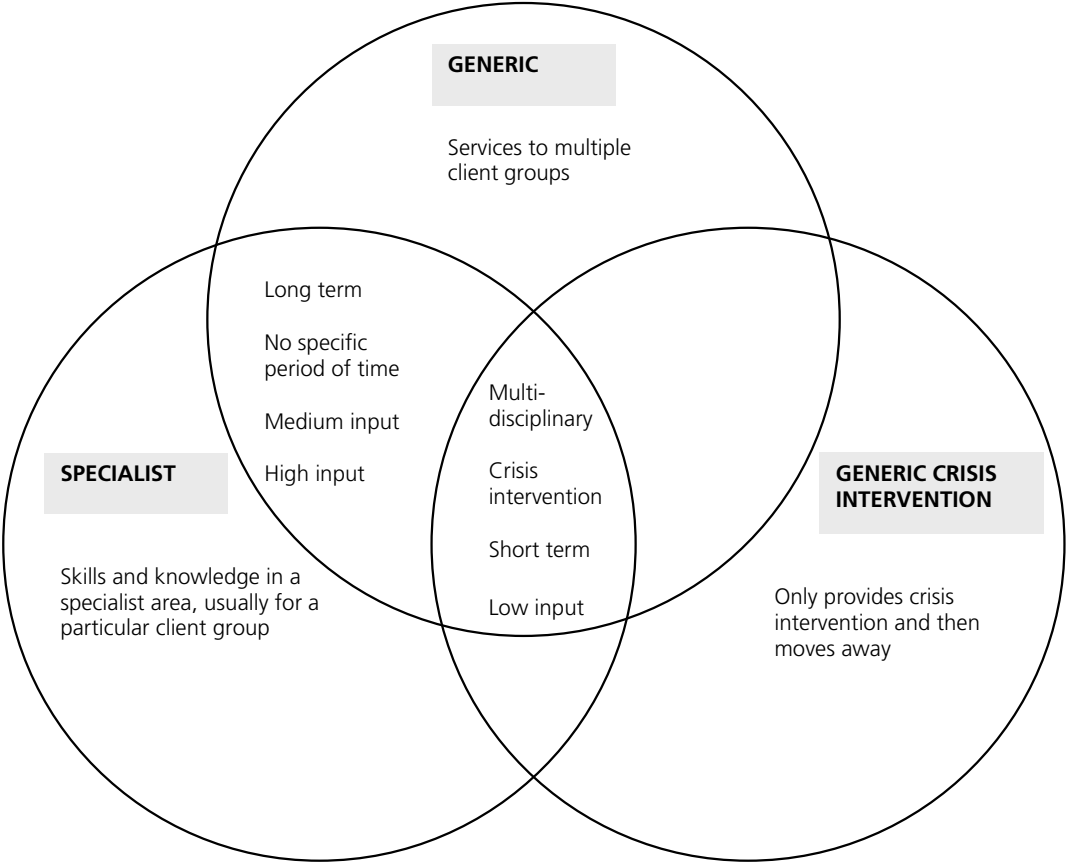
- Thames Gateway **£1.8m**
- London Commuter Belt **£1.13m**
- Greater Haven Gateway **£1.36m**

The provision of the service will be on a block contract basis that will specify the number of hours support to be provided.

2.3 Generic and specialist services

The review has shown that the diversity of floating support services can broadly fall under the headings of generic and specialist services. In addition the review found a specific type of generic floating support service that is solely focused on short term crisis intervention work.

The diagram below illustrates the main characteristics of each type of floating support service.



The review found that all floating support services are, to a greater or lesser extent, multi-disciplinary. Although specialist services focus on particular needs, the review found that they still require a multi-disciplinary perspective as clients often have multiple needs e.g. a young person may have mental health problems and substance misuse problems.

Furthermore, all floating support services can carry out crisis intervention work, although generic and specialist services usually follow up with other interventions whilst generic crisis intervention services move away once the crisis is resolved.

2.3.1 Generic floating support

One of the stakeholders remarked that the term 'generic' is associated with being 'grey' – in other words there can be a perception that a generic floating service

involves providing a bland service which meets low support needs in a superficial way. This perception is held by a number of the strategic stakeholders.

Some authorities and stakeholders thought the use of the term 'generic' was misleading and instead thought that these types of services should be described as 'multi-disciplinary', mainly because:

- The staff teams have the skills and knowledge that cover a number of specialist areas. Either the staff in these teams are trained across a wide range of disciplines or specialist staff are incorporated into these teams;
- The floating support teams are expected to work in partnership with other agencies including Community Mental Health Teams (CMHTs) and other statutory services.

The extent of these characteristics does vary from one service to another. Some generic services expect the whole team to carry a multi-disciplinary case load, but draw on the specific expertise of colleagues where appropriate.

The perception that generic floating support services only provide a very low level of support to as many people as possible was not found to be the case. The review involved examining a number of service specifications and found that generic services are often commissioned on the basis of high, medium and low inputs.

In large geographical areas generic services can increase coverage as they can deal with a whole spectrum of needs irrespective of client group. A number of concerns, however, have been raised about commissioning large volumes of services from single providers and questions have been raised about whether this restricts user choice and the diversity of the provider market.

Example – Essex County Council

Essex will be commissioning a county wide generic floating support service that will be split into 3 areas, with a separate contract for each area. The generic services are going to be multi disciplinary and will cover all client groups (apart from domestic violence), with specialist staff within each service and links with statutory services. Essex found considerable evidence to demonstrate that mental health needs cross all client groups and these needs will be met within the generic service.

Essex will be separately commissioning a countywide floating support service for women escaping domestic violence as the county consider that a specialist service is required to meet these needs e.g. employment of women staff, links with the police and legal services and children's services, counselling. The countywide service will be based on extending existing district based services for women escaping domestic violence.

Crisis intervention services

The review identified a specific type of generic service which is distinct from other types of floating support services and involves crisis intervention and signposting service users to other services. These services are multi-disciplinary in the sense that the staff need to know where to sign post people and how to broker access to other services, although they may not have an in-depth knowledge of any particular specialist area.

Crisis intervention floating support services tend to be focused on low level prevention work. These services deal with a range of problems including debt, neighbour nuisance, harassment, evictions/courts, domestic violence, mental health, drug and alcohol issues. However, as the focus is around dealing with the crisis, these services tend to resolve the immediate problem, refer people onto more specialist services where appropriate, and then 'back off'.

The evidence shows that short term generic services are very flexible and can respond immediately to dealing with crises. Furthermore, short term generic services have the potential to intervene before a crisis starts and this is a particularly important preventative aspect to these services.

These services have an important role in brokering access to more specialist services such as social services or child protection. The service can also broker arrangements between statutory services e.g. mental health services and children's services.

Example – HARTS

Epic Trust manages a floating support services known as HARTS which provides floating support to 700 service users. There are 7 teams, 6 of which provide low level floating support and one of which is sub-contracted to the Family Welfare Association to provide a more intensive service e.g. work on child protection issues. The service is open access and anyone who lives in the borough can access the service – someone can ring up and be seen within a week, with the support service starting within a fortnight. Epic consider that floating support lends itself well to short term work as people who are vulnerable can get themselves into trouble very quickly, with issues escalating quickly.

2.3.2 Specialist floating support services

The majority of authorities interviewed thought that there was a role for specialist floating support services. Specialist floating support services are usually defined as services which have:

- Staff with specialist skills and knowledge (usually related to a client group); and
- A high intensity of support (although this is not the case for all specialist services).

Most participants acknowledged that the specialist skills and knowledge of staff is the most significant characteristic that defines these types of services and generally this is related to specific client groups. However, the intensity of input is another factor that can also define a specialist service, although it is quite possible to provide an intensive service within the scope of a generic service. The intensity of input is greatest where a service is jointly commissioned and includes social care.

Specialist floating support services tend to focus on specific client groups, in particular the following:

- Women escaping domestic violence
- Travellers
- Older people
- Young people
- Learning disabilities
- Offenders
- HIV
- Refugees
- Mental health
- Substance misuse

These services can provide both short term and long term interventions. Although specialist services can carry out crisis intervention work, the specialist nature of the services usually involves follow up support.

The main rationale for developing specialist services is to provide a service that fully understands the resources available to the client group, can effectively build relationships with specialist agencies and retains the credibility of clients. The views amongst the strategic stakeholders were split between those that thought that all floating support should be generic multi-disciplinary services and those that thought that specialist services were required for some client groups.

The National Institute for Mental Health in England (NIMHE) takes the view that from a social inclusion point of view you don't need specialisms and responses should be based on a person's requirements. This does not mean that there shouldn't be specialist intervention, but the service itself does not have to be specialist – this can either be provided by linking into CMHTs or by employing specialist workers within a generic team who have an understanding of diagnosis (for service users with mental health problems).

Generally, the predominant view amongst the authorities is that housing related support covers the same tasks for all client groups, but that some specialist services are also required.

Example – Hornsey Housing Trust

Hornsey Housing Trust has been commissioned by the London Borough of Haringey to provide a floating support service to older people. The Trust considers that the service works well for older people as it provides low level support when it is needed e.g. to support individuals through low level depression, bereavement and hospital discharge. The service gives service users short term intervention, reassurance and practical help to resolve problems. The service works closely with hospital discharge teams and spends 6 to 8 weeks with clients to 'get them back on their feet'. The service also runs a phone line so that people who have been signed off know that they can re-access the service for advice. It is considered to be a good model for keeping people living independently in general needs housing and also for meeting the needs of owner occupiers and those in private rented accommodation. The Trust think that the service is useful for filling gaps e.g. for someone who is 80+ and has few needs but is not in sufficient need to be picked up by social services.

Specialist services for Ethnic Minority groups

Another issue highlighted by this review is that of floating support services for ethnic minority groups. These tend to be separately commissioned as specialist services, although some authorities are encouraging ethnic minority providers to 'buddy up' with larger providers who can deliver larger contracts. Furthermore, ethnic minority needs can also be addressed within generic services by employing staff with the appropriate skills and knowledge – one authority explained, *"we found through needs mapping that a large proportion of people had a language need so we insist that the generic floating support service has staff that can speak a range of different languages"*.

Although this review has found that it is possible to meet the needs of ethnic minority groups through a generic floating support service, that is culturally sensitive, these services may be more effectively provided on a sub-contracted basis to an ethnic minority provider (as part of a generic service) or contracted separately as a specialist floating support service. The key commissioning issues for authorities in meeting ethnic minority needs are:

- Credibility and approachability of the service;
- The ability of the service to encourage engagement;
- Whether the authority wants to capacity build ethnic minority providers.

One of the authorities that had commissioned a large generic floating support service explained that it had carried out work on ethnic minority capacity building and had recently approved two floating support contracts directly with ethnic minority organisations.

Joint commissioning

The joint commissioning of floating support services provides a strong focus for specialist services, as these are usually commissioned on the basis of client group. The following client groups have provided the main focus for the joint commissioning of floating support between Supporting People and social care:

- Older people;
- People with learning difficulties;
- People with mental health problems.

The main advantage of joint commissioning is that the issue of the apportionment of funding between support and care can be resolved. Furthermore, a single contract and a single monitoring process can be introduced for the service.

2.3.3 Links between generic and specialist services

There are operational issues about how generic and specialist services link. One London authority is creating links between their generic floating support service and their specialist services. Where the generic floating support service picks up more specialist needs it will refer these individuals to a specialist floating support service. Some authorities adopt a different approach whereby service users first receive specialist services, which then refer onto a generic service when the individual requires lower support.

Both the approaches described above can be more effective in urban areas as it is difficult to provide specialist coverage across large rural areas, unless the specialisms are incorporated into area based teams.

Example – London Borough of Camden

Camden wants to link together all their floating support services so that people can easily move in and out of services e.g. a person with a mental health problems can start with a specialist service and then be moved onto a generic service for low level support as the individual improves. Camden is looking to develop specialist services that can provide a high level of input and then use generic services to provide low levels of support. Camden also wants floating support services to refer in and out of each others services. The borough wants to extend this approach to all floating support services for all client groups e.g. a floating support service for women escaping domestic violence will work at a high level of intensity for 6 months and then the generic service will take over.

2.3.4 Service costs

A number of authorities made the point that specialist services cost more than generic services. This is true where the specialist skills of staff command a high hourly rate; however it is also the case that a number of generic services employ highly skilled and experienced staff.

It appears that the costs of providing a generic service may be lower because of the economies of scale involved in purchasing a large volume of services from a small number of suppliers. There can be sub-contracting arrangements to smaller providers, but these are usually based on hourly rates or unit costs submitted for the whole tender. There are usually additional costs associated with specialist services for ethnic minority groups e.g. translation and interpretation costs.

2.4 Duration of Floating Support

We asked participants in the review about the need for the two types of floating support defined for this review (short and long term). All the participants thought that both types of floating support services are required.

Some of the authorities had defined specific types of interventions required by floating support. This approach can develop into a commissioning framework; for instance one authority has developed a framework for floating support as follows:

- prevention;
- emergency;
- resettlement short;
- resettlement long (follows the person).

Some authorities commissioned short or long term floating support by defining the aims and objectives of a service, while others adopted a broader approach where the level and duration of support is determined by an individual needs assessment (in other words the service can provide both short and long term support).

2.4.1 Short term support

Virtually all the participants thought that some form of time limit is useful to focus short term services on addressing needs, but that this approach should involve targets rather than rigid limits. As one authority stated, *“It is good to keep focused on the issue that the support should not be permanent and there is an expectation that it should end – we expect the short term element to be around 2 years but we are not going to be hard about this. The key is for the service to stay focused on how it can be withdrawn and this exit should be clearly managed through the support plan.”*

There was a perception amongst a few of the participants that Communities and Local Government’s definition for short term services requires a cut off point at 2 years, which contrasts with the Supporting People grant conditions which are clear about not setting an absolute time limit. Although most participants considered a two year cut off point as a useful target, some were concerned that this interpretation was resulting in support being moved away before some people were ready. As one provider pointed out *“Enforcing support to end is very clumsy and could leave people vulnerable with support needs – better to retain the support and find other ways to pick up their needs.”* There was also anecdotal evidence to suggest that some people are signed off a service after two years and then immediately signed back on again, where they need further support.

Short term crisis intervention is seen as making an important contribution to prevention in terms of preventing homelessness. One provider described how most of the work can be done within 3 to 6 months, with the option for individuals to re-enter the service.

Example – Novas

The generic service provided by Novas in Somerset was originally commissioned as a longer term service, but has turned out to be much shorter term. The service is now involved in crisis intervention work to sort out an immediate problem, but also engages people with other services to sort out longer term or underlying issues. Novas consider that early intervention, preventive, short term work can be invaluable in stopping problems from escalating. This approach has led to a high throughput as it is focused on goals that can be achieved within a few months.

2.4.2 Long term support

Some stakeholders thought that all floating support should come to end at some point by definition (i.e. it floats from an individual). Others thought that the support should be needs led and should last as long as the individual requires it – the support would be floating in the sense that is not tied to the accommodation and could move if an individual moves accommodation. It was recognised by most participants that some individuals may require a low level of support on a very long term basis.

A few participants confused mobile support linked to accommodation with long term floating support linked to the individual – in other words they defined some accommodation based services with flexible support as ‘floating support’. The vast majority of participants understood that ‘true’ long term floating support involves the support following the individual irrespective of their accommodation.

A number of participants questioned the value of using Supporting People funding to provide on-going low levels of floating support, particularly where individuals were unlikely to increase their independent living skills. One provider was concerned that some people could become dependent on long term floating support and may use the service to alleviate social isolation. Furthermore, concerns were expressed about services becoming ‘lazy’ where no time limits exist.

The review has found that where an individual requires long term low level floating support there needs to be regular reviews, with a clear focus on making links to the wider community to reduce dependency on the service. One authority explained that, *“we review progress monthly; we want providers to move away from creating dependency; we want to have a culture of reducing support which can come back if there is a problem; we want much improved throughput and this will depend on the culture and ethos of the service, the training given to staff, and a clear intention that the service is enabling.”*

Example – Solent MIND

Solent MIND provides floating support to people with mental health problems. Although the service is intended to be short term (up to 2 years) some service users have received support beyond this period. The service follows service users to new accommodation, if they move, and assists them with setting up the new tenancy and plugging into local services. One of the difficulties of providing longer term support is that service users can become dependant on their support worker, especially if they are not having much contact with other people or are not plugged into other services. Two years provides a focus and sets a boundary around the service, whilst ongoing support can blur boundaries. People can be referred back to the service where they have problems and the service has a policy of looking closely at cases that have been referred back three times.

2.4.3 Charging

A number of participants pointed out that authorities are not obliged to charge for floating support services, should they be provided for longer than two years, as their local charging policies can define these services as non-chargeable. Other authorities charge for these types of services, particularly for older people where these services have often been remodelled as peripatetic warden services. One authority has a charging menu for older people where they can choose from alarm only, alarm and support or support only.

2.5 Level of support input

Generally, the views emerging from the review emphasise that floating support can be most effective for people with low to medium support needs. However, it has been pointed out that floating support can also be effective for those with a high level of needs.

The Social Care Institute for Excellence (SCIE) pointed out that it is proven to be possible to support people in their own homes with very complex needs e.g. providing support to a person with learning difficulties in their own home on a 24 hour basis. However, this approach does require Supporting People funding to be combined with social care funding. An administering authority explained that, "Individually tailored services can meet quite a high level of needs. It works for people who need to be in a dispersed setting e.g. substance misusers where people can relapse if they are in a setting with other ex-users and one lapses."

A question was raised during the review about the extent to which floating support services are able to provide services to people with complex needs. The review has found that most floating support should be able to provide such services, either through low support interventions that deal with crises and signposting to other services, or through high support services providing more intensive support and brokering access to specialist services.

2.5.1 Calculating the level of support

Short term generic services tend to provide a low level of input to a large number of people. For example one service has 700 service users to whom support is provided either weekly or fortnightly through 1 to 2 hour visits. This service provides support for a maximum of 2 years and typically there are 15 new cases a week.

Other generic services involve defining different levels of support within a single service, for instance in one authority this involved categorising support as follows:

High	High intensity (should not exceed 10 hours per week unless there are exceptional circumstances) – short term high level of input will be required by the support worker. This is typically at the outset of support being provided. Needs will have to be assessed and relationships established in order for effective support to be delivered. Service users in crisis situations and / or who are leaving supported housing will often fall into this category
Medium	Intermediate (generally 1-3 hours per week) – the main bulk of the support given will fall within this level. Crisis/immediate needs will have been met and the service user should be established in their accommodation. Support will be at a lower level than previously and once the service user is ready, and it is evident that they have gained a higher level of independence with relevant outcomes achieved, will start to reduce.
Low	Low level monitoring/on call (less than 1 hour a fortnight) – this is the tail end of support where minimal contact with the service is required bar a monitoring service to ensure the service user does not slip in their ability to cope and manage in accommodation.

2.5.2 Use of assistive technology

The use of assistive technology is regarded as important in complementing floating support services, particularly for older people and people with a physical disability. Also it is recognised that assistive technology can ‘float’ where an individual moves from their accommodation. However, assistive technology on its own is not regarded as floating support, but rather as part of package that can help to sustain an individual in their own home for longer than would be possible without it.

2.6 Who accesses floating support?

The data from the Supporting People Client Record System was analysed to provide a better understanding of who accesses floating support services. During the year 2005 a total of 62,440 people accessed Supporting People funded floating support services in England.

The following charts provide an overview of the characteristics of those who have used floating support services during this period.

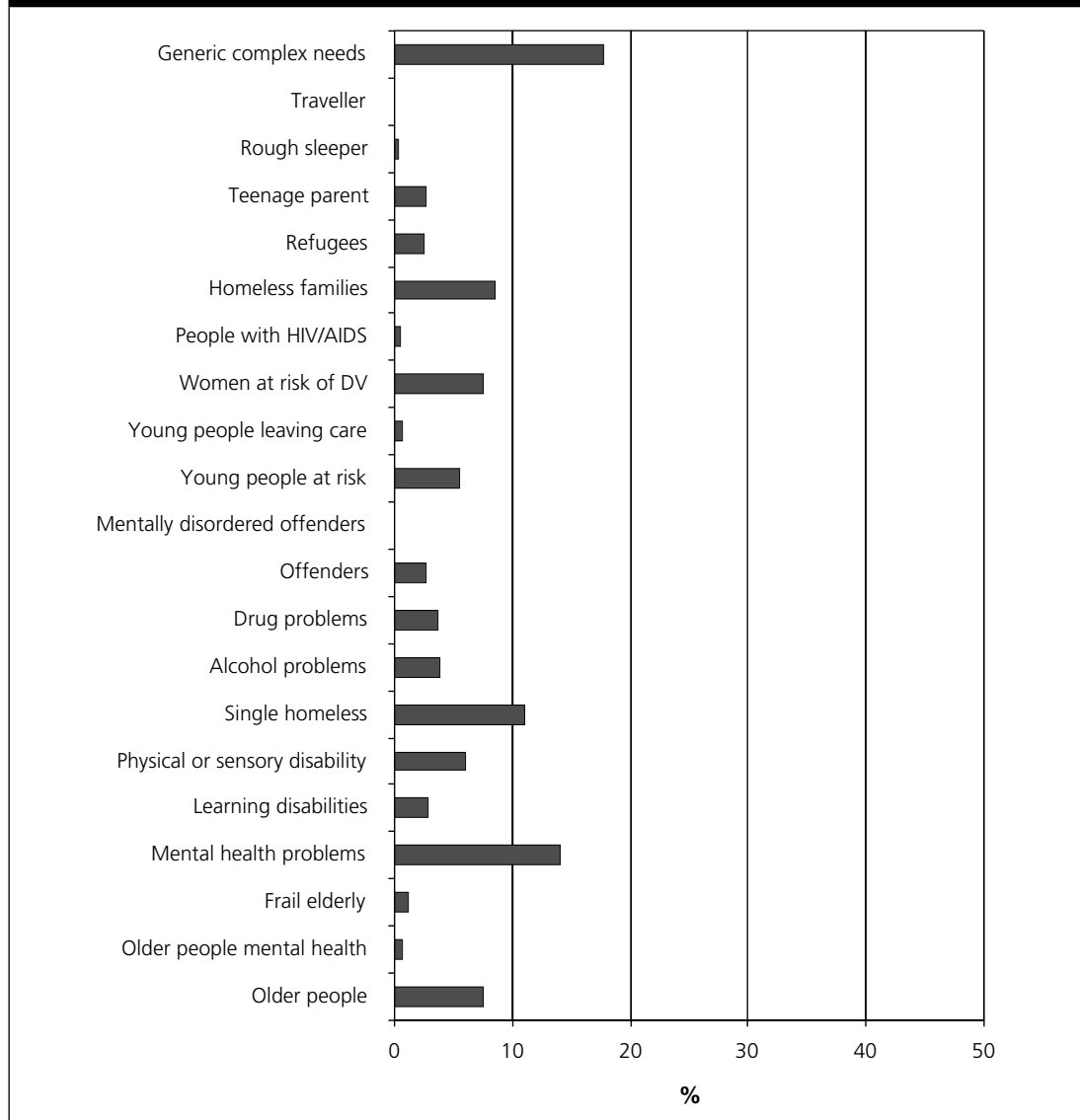
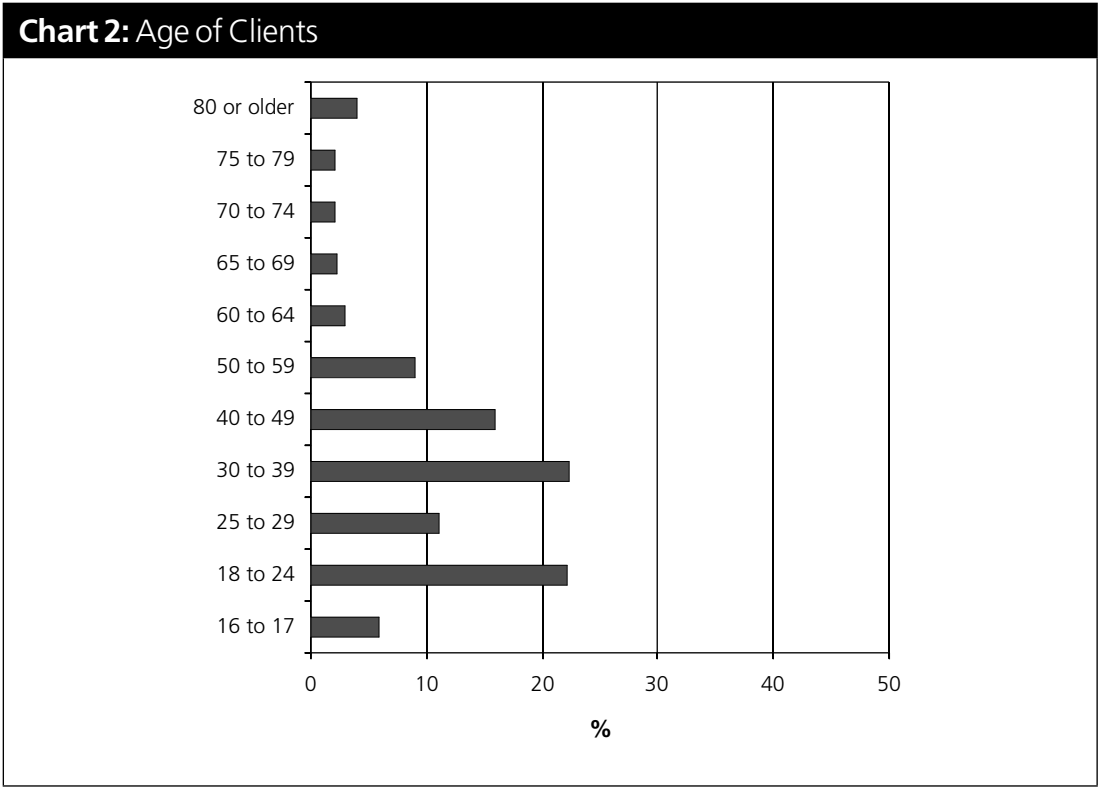
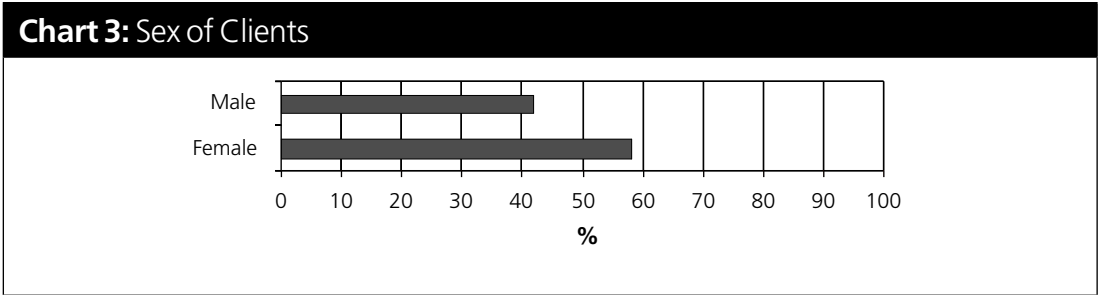
Chart 1: Primary Client Group

Chart 1 shows that the most significant client group categories were those of generic, mental health problems, and single homelessness. The data from the CRS reflects the supply profile, which shows a significant volume of floating support services contracted for these client groups. Although there is a substantial supply of floating support services for older people, the chart indicates a low level of turnover, possibly because these services may be tied to existing service users living in sheltered housing with on-going support needs.

The data on secondary client groups shows that the proportion of those with generic needs is even higher (28%) which indicates that a significant number of people who access floating support services have multiple needs that cannot easily be categorised.



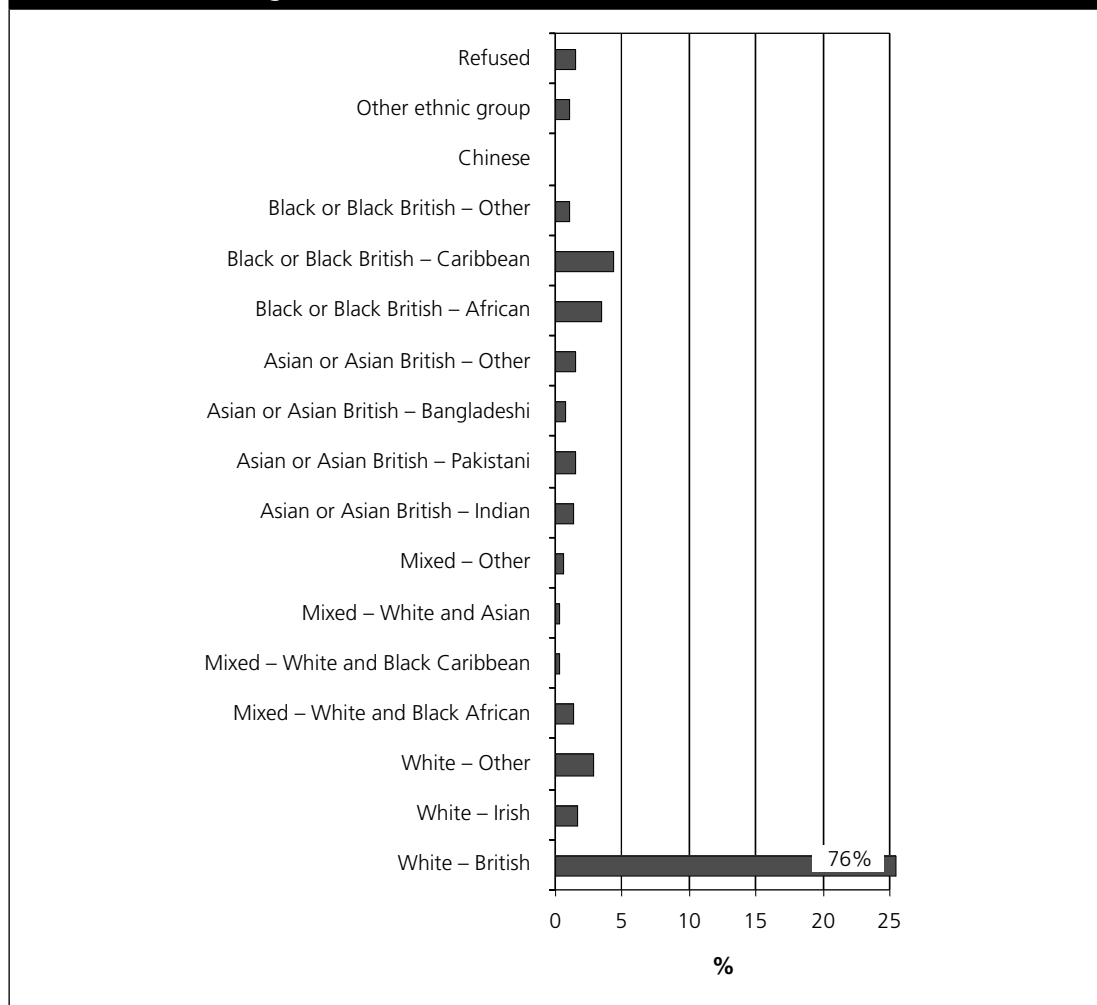
Although the largest proportion of people that accessed floating support services were under the age of 40 (62%), it is noticeable that a significant proportion of people over the age of 60 also accessed floating support services (14%).



The majority of service users accessing floating support services were women. An analysis at a client group level shows that three of these groups were almost exclusively women i.e. women escaping domestic violence, teenage parents and homeless families (78% women). These client groups make up over 20 per cent of service users who accessed floating support services during 2005. Furthermore, there are other client groups where women comprise the majority of clients, such as older people with support needs (55% women) and generic needs (64% women).

It is important to point out that men do predominate in some of the other client groups, such as rough sleepers (81 % male), drugs (60% male) and alcohol (70% male) – although these client groups only make up 8 per cent of those who accessed floating support services. However, within the client group ‘single homeless people’ 60 per cent are male and 40 per cent female and this group accounts for over 10 per cent of service users that accessed floating support. The data on people with mental health problems shows an even balance of 50 per cent male and 50 per cent female.

Chart 4: Ethnic Origin of Clients



The data shows that the proportion of ethnic minority groups accessing Supporting People floating support services was higher than the proportion of ethnic minority groups in the population as a whole (20.1 % of people accessing these services were from an ethnic minority, while the 2001 census data shows that 7.9 per cent of the population was from an ethnic minority). However, to provide a more meaningful analysis the data would need to be examined at an individual authority level and compared with ONS estimates for the local ethnic minority population over the age of 16, taking into account the fact that ethnic minority groups are over represented amongst Supporting People users as a whole.

The client groups in which a high proportion of service users were defined as White included older people (88.1%), people with drug problems (92.6%), people with alcohol problems (89%), people with learning disabilities (94.7%) and offenders (92%). The main client group with a lowest proportion of White clients was homeless families (69% White).

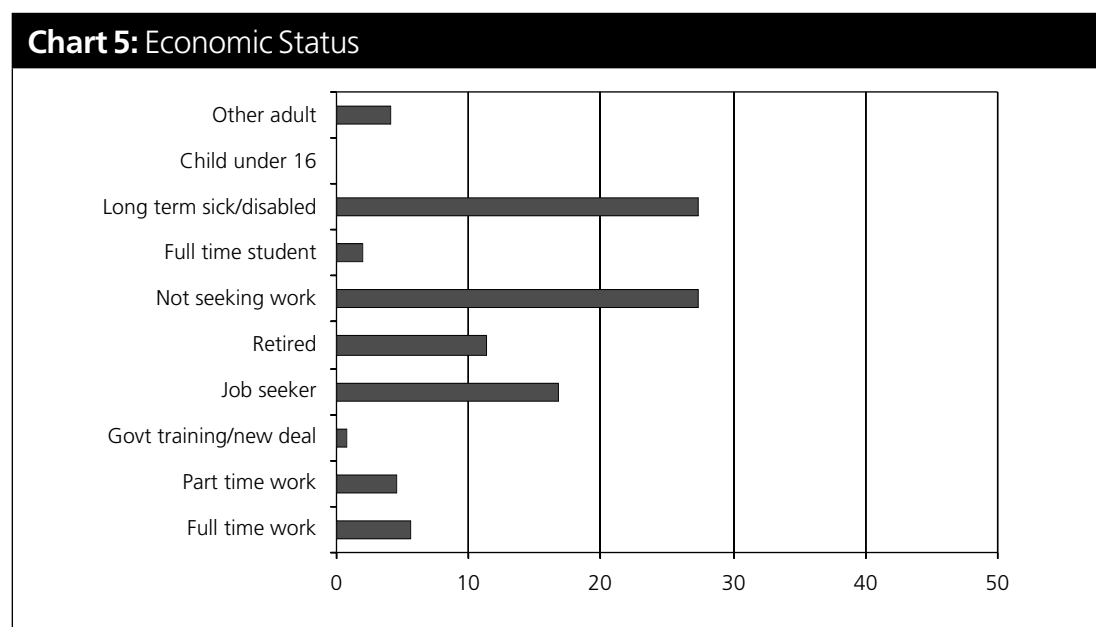
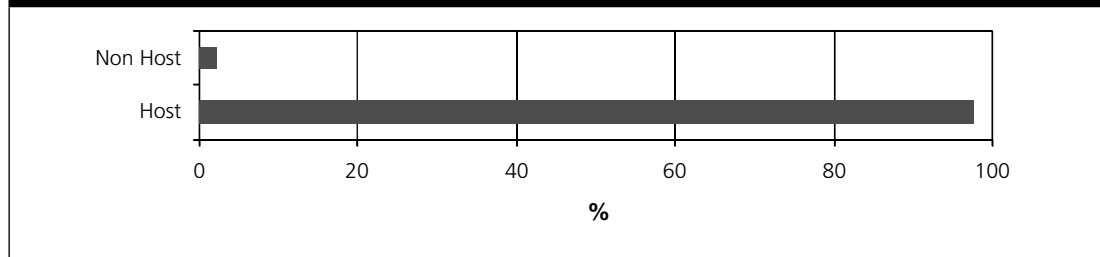


Chart 5 on economic status shows that the majority of clients accessing floating support services were either not seeking work or were long term disabled. Only a very small proportion were in full time or part time work (about 10%), with about 16 per cent seeking work.

A relatively high proportion of generic clients were in work (nearly 20%). Most people with generic needs were living in general needs local authority or housing association accommodation (over 70%). A high proportion of people with mental health problems and people with learning difficulties were categorised as long term sick and disabled (69% and 43% respectively).

Chart 6: Host and Non-Host Referrals

The data shows a small proportion of non-host referrals, which is not surprising as most referrals to floating support are either from local people living in independent housing, or from people who have moved on from accommodation based services within the authority. Some of the referrals moving on from accommodation based services may originally have been non-host referrals, but are defined as host where they continue to live in the authority and have accessed floating support.

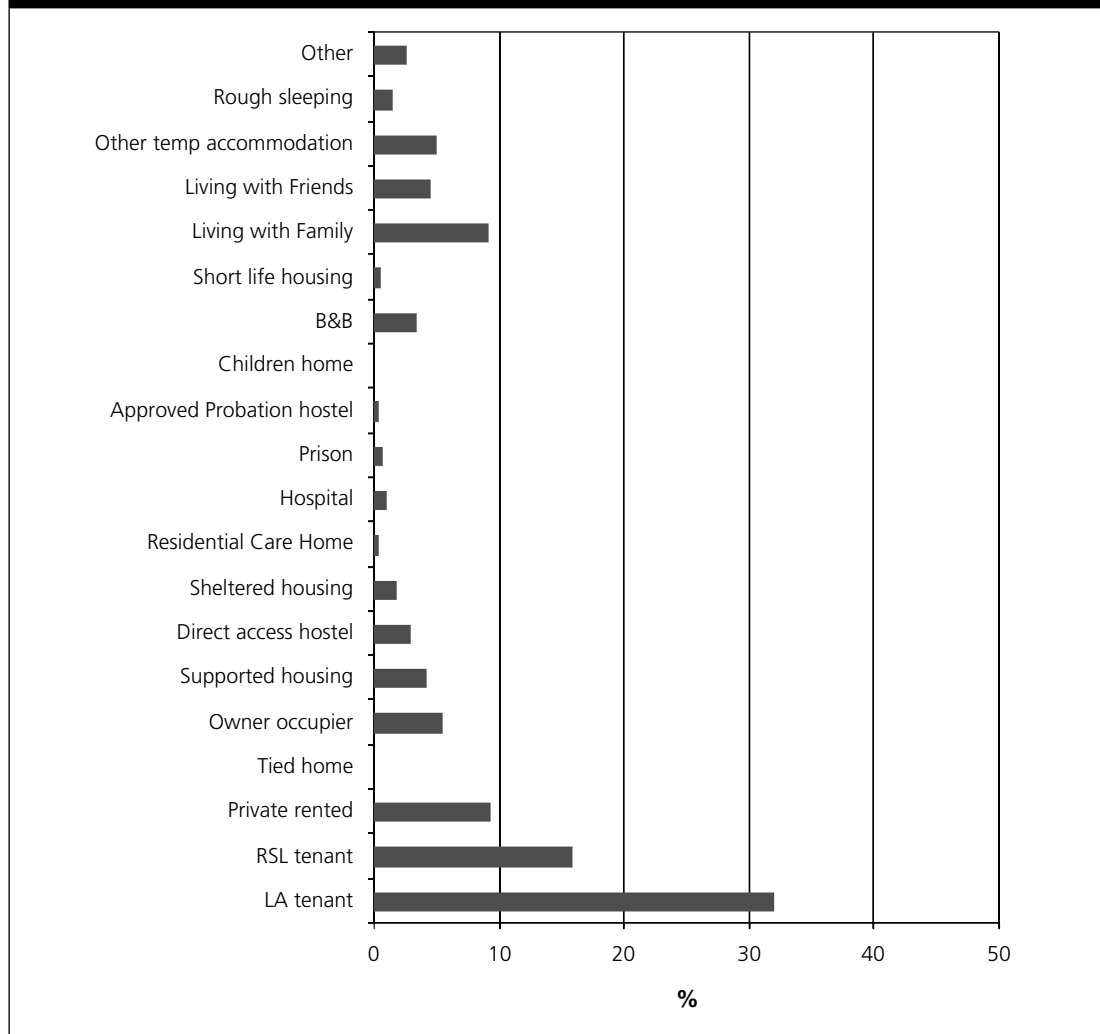
Chart 7: Clients' accommodation immediately prior to receiving the service

Chart 7 shows that a significant proportion of clients were living in independent accommodation immediately prior to receiving floating support (64 %) – either as social housing or private sector tenants, or as owner occupiers. Most of these individuals (nearly 75%) continued to live in this accommodation at the point the floating support service commenced.

Those clients living in temporary accommodation, prior to receiving the service, are likely to have moved into independent housing at the point the support commenced (although some may have received floating support while still living in temporary accommodation).

Chapter 3:

The effectiveness of floating support services

3.1 Introduction

All the participants in the review recognised that there are massive benefits in providing floating support services. In particular, these types of services can provide a flexible response to people living in a variety of types of accommodation.

The authorities highlighted that floating support services can be effective in achieving their corporate objectives, such as preventing homelessness, addressing anti-social behaviour and developing sustainable communities, as well as having positive benefits for service users and improving the quality of their lives. There is a considerable body of literature on the impact of floating support services, although this is mainly available as evaluation reports on individual services.

3.2 What are the benefits of providing floating support?

The review has identified a number of benefits in providing floating support services, as opposed to accommodation based services. These benefits are focused on the delivery of flexible person centred services to enable people to establish and maintain independence in ordinary housing. The main benefits of providing floating support services are summarised in the sections below.

3.2.1 Enabling people to live in ordinary housing

Tenure neutral

A major benefit of floating support is that it is tenure neutral. This type of support can be provided to anyone who requires the support irrespective of the type of accommodation in which they live (including social housing, owner occupied, private rented, mobile homes and houseboats). A number of authorities highlighted the fact that some people living in owner occupied or private sector accommodation had high levels of support need. These individuals could not previously have been provided with support services, unless they moved to supported housing. One authority commented *“We have a large number of people in HMOs in the private sector and in owner occupation and the borough is also very ethnically diverse – we can’t see what other model would cater to all these issues”*.

Separation of support from housing

The review has identified that floating support can provide a more effective support service, as it is provided separately to housing management services and landlord functions. The perception of many of those interviewed is that separation of these functions allows floating support workers to be advocates for the service user and not representatives of the landlord. Furthermore, support workers can create links with a variety of landlords and help people access a much wider range of housing options – the support worker can provide landlords with reassurance as the worker can quickly intervene to sort out problems.

Non-institutionalised approach

As floating support services are provided in a service user's own home they can be provided in a non-institutionalised setting. Where a person does not have a permanent home floating support services can be provided to people living in temporary housing, for instance bed and breakfast accommodation, and can provide a bridge between temporary and permanent housing.

3.2.2 Providing flexible services

Responsive

Floating support services are flexible as they can respond rapidly to crises or emergencies, particularly where these services are open access. One authority commented that, *"its biggest benefits are flexibility and responsiveness – low level interventions can be put in very quickly"*. The provision of floating support means that people in isolated rural areas can be provided with support and helped to remain in their homes. Floating support can therefore have a much greater 'reach' than accommodation based services.

Flexible staffing input

The level of support provided can be tailored to meet the needs of individuals and the hours for individuals can be moved around. This process needs careful management to ensure that the levels of needs are balanced. One authority commented, *"the services will have the capacity to be flexible and reduce or increase support as it is needed... it is a key way to prevent homelessness by guaranteeing a package to anyone who needs support and is coming out of a hostel, or going into a tenancy for the first time. It will be a massive player in the prevention of homelessness and also preventing access to homelessness services by helping to resolve issues before someone becomes homeless"*.

3.2.3 Providing a person centred approach

Person centred

The general consensus from the interviews is that floating support can be much more person centred than accommodation based services. As one Audit Commission inspector pointed out, *"the real beauty of floating support is that it can be varied and moved around to suit individual need"*.

Holistic approach

The key strength of floating support is that it adopts a 'holistic' approach to assessing an individual's needs and acts as a focal point for brokering access to other services – one authority described floating support as the service user's '*total personal advisor*'.

Choice and control

The feedback from the review suggests that floating support promotes choice while accommodation based services can limit choice. For instance, accommodation based services are based in particular areas and people often have to live away from networks and families to receive support – sometimes this can be a good thing, but generally people want to live near the community they know. National Women's Aid (NWA) pointed out that providing support to women in their own home, sometimes with a safe room in the house, allows greater choice – this option may be particularly relevant to Asian women who often wish to remain in their community.

A number of participants made the point that floating support fits with the concept of individual budgets, where service users can purchase the level of support they require and match that to the type of housing in which they would like to live. Authorities highlighted the importance of separating housing from support to give users greater choice and one authority considered that this approach would make the concept of accommodation based services redundant.

3.2.4 Providing Brokerage and Advocacy

The brokerage and advocacy roles of floating support were identified as essential to meeting the more specialist needs of services users and gaining access to mainstream services such as health and social care. However, as floating support services provide a 'holistic' approach to meeting users' needs, brokerage can extend to helping people access training and education and develop leisure interests. All these activities are housing related support in the sense that they enable service users to develop independent living skills and sustain their accommodation.

One authority made the point that *"floating support services can provide a crucial role in brokerage between different elements of the statutory services; we have examples of parents with mental health problems where the floating support service has helped children's services and mental health services to work better in the interests of the child. Statutory services tend to work in silos and the floating support service can help get them working together by acting as a bridge"*.

3.3 What is the impact of floating support services?

This review has investigated the impact or outcomes of floating support services. Outcomes measures for Supporting People services are still at an early stage of development, although the authorities involved in the review considered that outcomes need to be measured at a number of different levels including:

- strategic outcomes
- service outcomes
- outcomes for service users

The following highlights the impact of floating support services using the evidence gathered from the literature review and from the interviews.

3.3.1 Meeting strategic targets

Most of the authorities interviewed highlighted that the outcomes of floating support services should be focused on meeting their key strategic corporate objectives, such as the prevention of evictions and the reduction of homelessness applications. Other broad strategic objectives were identified such as the reduction of anti-social behaviour, the reduction of crime and the prevention of hospital admissions. Those authorities that had re-commissioned floating support services considered that these services are contributing to meeting such strategic objectives.

The review found that a few of the authorities interviewed are developing outcome measures to provide evidence about whether floating support services are delivering on these key objectives. Some authorities consider that service outcomes, as well as outcomes for service users, could be aggregated to provide an indication of whether strategic objectives are being met.

Example – London Borough of Haringey

The borough's 5 year SP strategy sees floating support as a tool for promoting social inclusion and as essential in providing low level prevention work for the borough's three floating support services (homeless people aged 16-65, older people aged 60 plus, and homeless families). The borough is looking at integrating floating support within homelessness prevention and wants floating support to contribute to meeting its corporate targets such as reducing evictions and reducing homelessness applications.

3.3.2 Housing outcomes

Sustaining accommodation

Helping people to establish independence and maintain their accommodation is one of the key objectives of a floating support service. This activity lies at the heart of the Supporting People programme and is an important aspect of homelessness prevention.

An evaluation of Shelter Homeless to Home service (Jones et al 2002) found strong evidence of success in helping families sustain their accommodation. This service established three low intensity floating support services to help homeless families

establish themselves in their own home. The tenancy sustainment figures for the project showed that nine of ten families that had ceased to use the service were still in permanent housing and 82 per cent of families that had been out of contact with the service for nine months or more were still housed.

An evaluation for New Leaf (Torr 2002) compared the outcomes for tenants that received the tenancy sustainment service with outcomes for a 'non-intervention' group that didn't receive the service, both of which met the same referral criteria. The study concluded that the tenancy support service was cost effective for those tenants who received the service compared with the non-intervention group. During the study 8 per cent of the tenants in the intervention group and 20 per cent in the non-intervention group ended their tenancy (none were evicted in the intervention group while 12 per cent were ended negatively in the non-intervention group).

3.3.3 Health & social care related outcomes

Prevention of hospital readmissions

A number of floating support services for people with mental health problems have identified the prevention of admission to acute psychiatric hospital as an outcome. The hact evaluation report (CVS 2001) identified that floating support services for people with mental health problems helped to prevent people from being re-admitted to acute psychiatric hospitals. Most of the individuals who received the services had a history of psychiatric problems and had previously been in and out of psychiatric hospital. An evaluation of one of the services measured the readmission rates during the period the service was received, compared to the readmission rates for individuals prior to receiving the service.

One of the issues identified by several evaluative studies is the need for some clients to have continuing support, particularly people with mental health problems. The Bournemouth Churches Housing Association evaluation (Sharples et al 2000) pointed out that for these clients *"success cannot be measured in terms of the number of clients who no longer require support... factors such as sustained tenancies, rates of hospital readmission, attendance at day centres, voluntary work and training courses and employment undertaken, all should be taken into account."*

Hospital discharge

Some floating support services provide support for older people when they are discharged from hospital. These services work with hospital discharge teams and provide short term support to get service users 'back on their feet'. Other services then work with the service users on a longer term basis.

Reduction of substance misuse

Floating support can also help people who need to keep away from the influence of other service users as illustrated by the following quote from authority, *“we re-modelled a substance misuse project from accommodation based support to floating support for this very reason; being together was actually setting up some people to fail by keeping them within a drugs related network”*.

Child protection issues

The evaluation of HARTS (Epic 2004) highlights that floating support services have been able to work with vulnerable families with complex needs, who often have children on the at risk register.

Prevention of institutional care

Floating support services can have an important role in preventing people moving into residential care and can provide an alternative to residential care.

For older people floating support can provide more general support alongside a domiciliary care package. However, a provider of floating support services pointed out that older people with deteriorating health may need help to move and *“if they are in a large property that they can’t manage any longer, we work with people through the process of selling/moving, looking at their options and can support them once they have moved until they settle into their new service – usually moving to sheltered housing or residential care in advance of deteriorating health.”*

3.3.4 Impact on the wider community

Social inclusion

SCIE and NIMHE emphasised that the drive to be socially inclusive involves providing services to people in their own homes, rather than accommodation based services. In pushing the agenda for social inclusion NIMHE considers that it is better to integrate people into the community rather than create supported housing ghettos, but recognised that it may be necessary to move along a continuum as not everybody may be ready for their own home. NIMHE also thought it is important to change the culture of professionals to have greater expectations of people being able to live independently in the community.

A report on mental health and social exclusion (ODPM 2004) identified that one of the causes of social exclusion experienced by many adults with mental health problems is the actual fear of, or rejection from, the community leading to people wanting to stay in the safety of mental health services rather than engaging in the mainstream. The brokering role of floating support enables people to be mainstreamed into services, both in relation to mental health services as well as other services.

Sustainable communities

The evidence from a number of evaluative studies focuses on the sustainment of tenancies as a means of contributing to sustainable communities. This type of intervention can provide people with stability and help them retain accommodation e.g. through the prevention of evictions.

However, floating support can contribute to sustainable communities in other ways, for instance helping vulnerable people to engage with their community and interventions in relation to anti-social behaviour. One of the interviewees remarked that floating support is *“more outward looking into the community”*, compared with accommodation based services.

Reduction in crime

An evaluation of the Coventry and Warwickshire Substance Misuse Initiative (Sandman 1998) provides some evidence of the impact of floating support service on the reduction of crime. The purpose of the project was to reduce crime related to drugs by providing access to accommodation and floating support for people with serious drug problems, on the basis that they would be prepared to work with the support worker and maintain contact with the community drug team. Although the evidence from the evaluation on re-offending rates was not clear, the findings showed that the service could work with people with a history of serious offending and serious drug taking and reduce the use of drugs and spending on drugs. Potentially this could provide the benefits of improved community safety and a reduction in crime.

Anti-social behaviour

Increasingly, floating support services are focused on the issue of anti-social behaviour. The review has found that some authorities have commissioned floating support on the basis that anti-social behaviour can manifest where individuals have unmet support needs. The self evaluation of the HARTS service (Epic Trust 2004) points to the work that the floating support service has undertaken with families who are at risk of having an ASBO taken out against them, as well as those families who have been the victim of anti-social behaviour.

The evaluation of the Shelter Inclusion Project (Jones 2004) shows a number of positive achievements including successful engagement with the project by people with alleged anti-social behaviour, assisting the majority of households to maintain their tenancies and a reduction in the level of alleged anti-social behaviour. This project is described as a tenancy sustainment service, but with an added emphasis on addressing alleged issues of anti-social behaviour. In particular staff helped to address underlying issues that may be causing the perceived problem behaviour.

3.3.5 User centred outcomes

Service user outcomes relate to improving the quality of life of service users and helping them to meet their aspirations. Most of the evaluative studies involved an approach that included service user feedback, much of which provides a positive picture about the impact of floating support services. The feedback was usually obtained through qualitative semi-structured interviews, or focus groups, with service users.

The following provides a summary of the main outcomes identified for service users. These mainly relate to an overall outcome of achieving greater independence.

Improving quality of life

The evaluation of Bournemouth Churches Housing Association's floating support service (Sharples et al 2000) concluded that the service made a significant contribution towards service users' independent living skills, confidence and motivation and their participation in voluntary work and paid employment.

The study Living Independently with Support (Douglas et al 1998) identified that *"these benefits included having much greater self confidence and being able to go out and do things that they would not have been able to do in the past"*.

Learning Independent Living skills

One of the key themes in defining success for service users is helping people move towards independent living. This can be related to housing such as helping deal with arrears, but can also be about helping people to improve their independent living skills such as shopping for food and self care.

A number of studies have highlighted the importance of learning independent living skills so that service users can cope on their own. One study (Douglas et al 1998) pointed to, *"other benefits which people talked about included greater independence, making new friends, being able to get out and do things, practical help such as form filling, peace of mind, security"*.

Establishing social networks

Helping establish social networks is an important part of the process of disengaging floating support services. This aspect of floating support is often identified as one of the most difficult areas as there is some evidence that vulnerable people can be rejected by communities (Douglas et al 1998). However, success in establishing social networks reduces isolation and enables service users to be more independent and Fisk (2000) found ample evidence of integration.

Training/employment

Floating support services can help service users to access training, employment or meaningful day time activity. Sharples et al (2000) found that a number of service

users had become involved in voluntary work and clients gained confidence and skills as a result.

Some of the other evaluative studies identified positive outcomes such as helping service users access training courses and helping to prepare them for employment, although these options may not be appropriate for all service users, particularly those with enduring mental health problems.

Improving the health of individuals

There is considerable evidence that floating support services can improve the health of individuals. This may simply be the result of helping people to budget more effectively and learn basic cooking skills. It can also involve helping people to address substance misuse problems and accessing specialist treatment.

3.4 What are the limitations of floating support?

The review has found a number of circumstances where the provision of floating support can have a limited impact. These are as follows:

Non-engagement

There are some individuals for whom floating support may not be the appropriate service model. This may in particular apply where individuals are reluctant or resistant to engaging with support and other services, and where a floating support approach may allow or provide opportunities for disengagement.

The Shelter Homeless to Homes evaluation (Jones et al 2002) reported that there were a handful of cases where the families' problems were so overwhelmingly difficult for the project to manage that working with them would not be productive. Accommodation based services providing intensive support in temporary residential units for families with multiple problems may provide an alternative model and a recent study (Nixon et al 2006) found that such interventions may be beneficial to service users.

This does raise the issue about the extent to which floating support services should adopt a more coercive or assertive approach with some individuals. There are examples of social care assertive outreach teams for people with mental health problems and these could provide a model for assertive floating support. One of the difficulties identified by providers is that the provision of their services is based on trust between the support worker and the service user and any form of coercion could undermine such trust. Furthermore, a floating support service does not have the incentives, or sanctions, associated with accommodation based services (i.e. ending the occupancy agreement where there is no engagement with the support service).

A number of providers pointed out that some service users only want to address their immediate problems and do not want to address underlying or long term problems. In these circumstances the service users just disengage once the immediate problem is resolved.

Withdrawal of support

The review has found that there is some evidence to show that early withdrawal of support can lead to tenancy breakdown. Although floating support services may need to create a focus on when support should end, the withdrawal of support should be planned carefully. Authorities were aware of the need to balance the support needs of individuals requiring continuing support, with the objectives of a service to provide time limited support. A provider of floating support services to people with learning difficulties pointed out, *“time limits for people with learning difficulties are not useful; people have on-going needs. Targets are, however, useful for enabling a reassessment of needs and promoting independence to reduce the amount of support.”*

Dependency

The review suggests that providing longer term on-going floating support to individuals may make people dependent on the service. For instance one authority pointed out that they were *“discussing these issues with social care, especially in relation to learning disability clients, as they tend to want to hang onto them and they can become quite institutionalised in receiving this service”*.

Service users who require stabilisation

Where service users require a period of stabilisation, before moving into their own accommodation, they will often require accommodation based services, particularly where they have been homeless. In these circumstances individuals may require accommodation based services with on site staff or 24 hours cover. Service user feedback from a recent local authority review of support services included the following comment from a service user: *“I know people who have ended up on their own and started drinking and taking drugs again as they could not cope... that’s why I asked to be in a hostel longer until I am ready to cope.”*

3.5 How cost effective is floating support?

There is a considerable body of evidence about the cost effectiveness of floating support. These studies have covered cost effectiveness in terms of:

- Reducing rent arrears
- Prevention of tenancy breakdown and the resulting costs
- The reduction of hospital admissions (for people with mental health problems)

- The timely discharge of older people from hospital
- The reduction of re-offending rates
- Addressing anti-social behaviour
- Preventing truancy costs

All of these outcomes reduce costs for public agencies, but also have wider social benefits of helping to create sustainable communities and greater social cohesion.

One of the most frequent methods of assessing cost effectiveness involves the assessment of costs relating to eviction. An evaluation of Camden's floating support services (Compass 1997) estimated that the costs of evictions were £1,920 each, comprising the following (not including staff time):

Legal and court costs	£420
Lost income from voids	£300
Arrears written off	Up to £1,200

This evaluation estimated that that through helping clients to sustain their tenancies the service had covered, or almost covered, its costs. A hact report (CVS 2001) estimated that the cost of tenancy failure as between £2,100 to £3,800 (including staff time) and that the average cost of providing floating support for each household as £1,500.

Other evaluations have also focused on the cost effectiveness of floating support in reducing rent arrears. The New Leaf evaluation (Torr 2002) shows that the impact of employing Tenancy Support Officers resulted in a reduction of rent arrears. Although the reduction was less than the cost of employing Tenancy Support Officers (TSOs), the service was cost effective when compared with not employing a TSO. For each tenant referred, due to an issue with rent arrears, the tenancy support service saved an average of £543 per tenant.

The assessment of cost effectiveness should not solely focus on the extent to which a floating support service has directly saved resources relating to tenancy sustainment. There are far wider cost benefits to floating support services that can include those relating to the prevention of:

- homelessness;
- residential care;
- hospitalisation.

A self evaluation by Epic Trust (2004) provides a comprehensive breakdown of savings resulting from providing a floating support service for homeless families. Based on a random sample of case files the evaluation found savings in the following areas:

Activity	Cost saving
Eviction prevented	Savings related to courts, voids, arrears
Custodial sentence avoided	Savings related to the costs of prison
Care placement avoided	Savings related to residential placements
Mental health admission prevented	Savings related to the cost of an acute psychiatric admission
Truancy stopped	Savings related to dealing with truancy
Prevention of anti-social behaviour order	Savings related to the time involved
Foster placement prevented	Savings related to the cost of foster placements

There are some areas in which cost effectiveness can be more easily assessed than others. For instance, where the service intervenes and prevents an eviction the costs can be calculated and the savings demonstrated. Furthermore, where a floating support services reduces the frequency of acute psychiatric hospital admissions it is quite possible to demonstrate the savings that have been made.

However, there are some areas where the relationship between the impact of the service and the savings made is more tenuous. For instance, some evaluative studies have costed the savings made to public services – although it is quite possible for a floating support service to reduce the costs to the public purse there needs to be more robust evidence to demonstrate that such cost savings are the direct result of the intervention of the service.

3.6 Towards a more effective evidence base

There a number of limitations to the research studies undertaken on the effectiveness of floating support. A literature review of low intensity support services (Quilgars 2000) points out that some studies have concentrated on inputs and processes and not so much on outcomes. Furthermore, the literature review found that studies often represent snapshots of success and there have been few long term evaluations.

Despite the limitations of the evidence the evaluative studies do show that floating support services can have a positive impact on service users, housing providers and

the wider community, and that there can be a reduced demand on public services, for instance health and social services. The studies have also shown that floating support can intervene quickly and potentially prevent crises from escalating.

This review has found that a more effective evidence base needs to be developed on floating support services. There is a need to undertake more comprehensive and longer term studies to evaluate the impact of floating support services. In particular, generic floating support services developed under Supporting People need to be fully evaluated to understand their effectiveness. Furthermore, there needs to be a better understanding of the circumstances where floating support services are less effective and where accommodation based services can have a greater impact.

With the introduction of the Supporting People programme national data is being collected on floating support services for the first time and this can provide a better understanding of who accesses these services, their coverage and their costs. Communities and Local Government is currently developing a national Supporting People strategy, which includes work on developing an outcomes framework and considering the possibility of tracking people going in and out of Supporting People services. The availability of national data, and an outcomes framework, will provide a longer term evaluative study of floating support with a much larger data set than has been the case in the past.

Chapter 4:

Accommodation-based Services

4.1 Introduction

This review has found that the pattern of support services is beginning to change based on the commissioning priorities of authorities. Those authorities that have been most active in considering the use of floating support services have begun to reconfigure existing floating support services and are challenging the provision of accommodation based services.

Emerging from this process is a much stronger move by many authorities towards commissioning more flexible support services. This can include re-commissioning existing floating support services, as well as reconfiguring visiting support as community support teams or as floating support. Nevertheless, virtually all the participants in the research recognised that accommodation based services will continue to be required, although there is a continuing debate about the scope of such services and the extent to which they can be replaced by floating support.

4.2 Commissioning accommodation based services

Accommodation based services have been developed primarily as a way of delivering integrated housing and support services. The models of housing support vary considerably with some accommodation based services providing 24 hour cover and others providing visiting support.

The following table summarises the scope of accommodation based services, although within each type identified there can be considerable variations.

Type of accommodation based services	
Hostels	These are short stay or direct access accommodation services for homeless people usually with staff cover provided on a 24 hour basis. Waking night or sleep in cover can sometimes be provided.
Supported housing	Supported housing can either be provided in shared housing or self contained flats or a combination. The support can either be provided as visiting support, on site staff support during the day, or 24 hour cover. The support service can be short or long term. The support services can meet generic needs or provide specialist services.
Foyers	Foyers provide young people with accommodation, support and training. The accommodation and training facilities are usually based on the same site.
Refuges	Refuges for women escaping domestic violence provide a place of safety in an emergency.
Sheltered housing	Sheltered housing is specialist housing for older people where residents live in their own self contained flats with communal facilities. A scheme manager provides support to the residents.
Extra care housing	Extra care housing provides a high level of adaptations for physically disabled people compared with sheltered housing e.g. all areas are fully wheelchair accessible, walk in showers, and assisted bathrooms. In addition to the scheme manager there are care staff that are based on site, together with waking night cover.

Accommodation based services have been inherited by authorities as part of the transfer of legacy funding for Supporting People services. As the factors influencing the development of accommodation based services have varied from one authority to another, there are different levels of supply and different types of services in each authority, some of which cater for cross authority needs.

The review has shown that some Administering Authorities are questioning the use of accommodation based services, particularly those that provide low levels of support to people in shared housing, often on a long term basis. This study has found that two very different approaches are being adopted to the re-commissioning accommodation based services. These can be summarised as follows:

Separation of accommodation and support	<p>This approach involves adopting a strategy where the support is not tied to the accommodation. The approach still includes the provision of accommodation based services, but requires a business case to be made for these services (e.g. it has to be more cost effective or meet particular needs). Low support accommodation based services are generally reconfigured as floating support with the housing element 'designated' for letting to vulnerable people.</p>
Linking accommodation and support	<p>This approach involves adopting a strategy that continues to promote accommodation based services alongside floating support services. The authorities that have adopted this approach do not intend to sever the link between accommodation and support, except where an accommodation based services needs to be decommissioned (e.g. where it not strategically relevant). These authorities may re-commission the support element (by using flexible community teams) but the link between accommodation and support is still maintained.</p>

4.3 The effective use of accommodation based services

The main advantage of accommodation based services is that they 'ring fence' access to accommodation and support for vulnerable people, particularly those that have difficulty accessing ordinary housing and who are not eligible for help from social services. Accommodation based services can also provide specialist accommodation that is adapted to meet specific physical disabilities.

The effective use of accommodation based services has been highlighted by this review as follows:

- **Assessment**

Accommodation based services provide an opportunity to carry out an assessment of needs so that individuals can be referred onto appropriate accommodation and support. Some authorities are proposing to adopt a multi-disciplinary assessment process so that the accommodation, support and care needs of service users can be assessed before they move onto independent housing or other types of accommodation.

- **Cost effectiveness**

Generally accommodation based services can be more cost effective as the support service is provided in one setting. This is particularly the case for high support services where 24 hour cover is provided. Some authorities consider that accommodation

based services with 24 hour cover should be the only model commissioned, with low and medium support services being re-commissioned as floating support.

- **Stabilisation**

Accommodation based services can provide stability for individuals prior to moving onto independent housing. This stability may be required because an individual needs to address substance misuse issues or has mental health problems. Often individuals are not ready to move into independent housing and accommodation based services provide a stepping stone. Some participants in the review pointed out that, *“accommodation based services can help people learn to live by the rules, establish routines”*.

- **Access to accommodation**

Accommodation based services provide individuals with housing where a person is homeless (e.g. because of eviction, relationship breakdown, domestic violence etc) or sleeping rough, or because of recently leaving an institution (e.g. prison). Most accommodation based services have been developed to provide a first step towards becoming rehoused. Access to the accommodation element provides an important housing resource for vulnerable people who are homeless.

The main problem with accommodation based services is that they can become silted up because of a lack of move on accommodation, or because those living in long term accommodation based services no longer require such support. As a result support services may not be utilised effectively, although this can be addressed through appropriate management arrangements and following good practice in relation to reassessing the support needs of service users and accessing other accommodation.

- **Engagement with services**

The provision of housing and support on one site can help people to engage with services and address complex needs. Service users can easily access staff and staff can easily monitor service users. Furthermore, the service can build in incentives to help service users engage with the service, address their problems and move to independent housing.

- **Cross authority needs**

The issue of meeting the support needs of cross authority transient groups was raised as an important function of accommodation based services. These services provide access to accommodation and support for people who have no local housing connection with any particular authority and for people who need to move to another authority (e.g. to escape from a drug culture where they currently live).

- **Unpopular client groups**

A number of providers pointed out that accommodation based services provide an important resource for unpopular groups. Accommodation based services can therefore become a community safety resource, particularly as staff can provide a reasonable level of supervision. One provider explained that they use their accommodation based services for Schedule 1 offenders and it would be impossible to recreate housing provision for this group as planning consent would not be granted.

4.4 Baseline provision of accommodation based services

The baseline provision for accommodation based services in each authority will vary depending on the needs that have been assessed and the strategies that have been developed for meeting these needs. However this review has found that there are particular types of accommodation based services that will always be required as part of a continuum of services and are generally more effective in meeting support needs than floating support.

The table below shows the types of accommodation based services that were identified by participants as essential to meeting the support needs of vulnerable people. The table shows the core accommodation based services that should be available within each Administering Authority. Most authorities already have a much wider range of accommodation based services, many of which help to achieve key strategic outcomes e.g. prevention of homelessness.

Service type	Purpose
Direct access hostel	Where someone is homeless and needs to access accommodation immediately or where a person requires emergency accommodation (e.g. a young person who has problems at home).
Highly intensive services	For people with specialist or complex needs or who require a period of close monitoring, such as those with serious substance misuse problems or anyone who needs stability and an intensive input (before moving on) and for harm reduction and respite.
Women's Refuges	For women at risk of domestic violence, where a response is needed on an emergency basis or safety is a key consideration.
Specially adapted accommodation	Accommodation that has been specifically adapted to meet a need (e.g. to wheelchair standard) and where on site support is required e.g. extra care housing.

The services set out in the above table usually involve 24 hour cover, or staff based on the site during the day with an out of hours cover service (for example second stage accommodation for service users with specialist needs). These services may involve accommodation located on a single site, core and cluster accommodation, or dispersed units.

As most authorities provide a much wider range of accommodation based services, than those shown in the above table, there have been concerns that some authorities may de-commission these types of services to provide a minimum level of provision. In particular, there is a concern that by re-configuring accommodation based services as floating support there will be a potential loss of accommodation for vulnerable people.

A number of key stakeholders emphasised that Administering Authorities need to understand the implications of de-commissioning accommodation based services and raised concerns about the following:

- The problems of replacing this type of service, as planning consent can be difficult to obtain for accommodation based services that meet the needs of particular client groups. Although the evidence arising from the review on this issue is largely anecdotal, it was highlighted as a problem by two of the key housing stakeholders.
- The amount of time involved in developing a new accommodation based service.
- The possibility that the accommodation may be disposed of as it may be perceived to be surplus to requirement.
- The reduction of choice to service users where particular types of properties (e.g. shared housing) are used for other purposes, such as student accommodation.
- The importance of retaining housing stock located in desirable areas as this helps promote social inclusion – these services could not be replaced in these areas.
- The reduction of the volume of housing for vulnerable people where the accommodation is switched to general needs housing use.
- The difficulty for vulnerable people to access this accommodation, should support no longer be linked to accommodation (as a floating support service may not have the capacity to provide the support required).

Some of the above issues could be resolved through 'designating' the accommodation for vulnerable people, but nevertheless there were concerns that over time the accommodation could become lost. In particular there were concerns that the separation of accommodation from support may either result in designated accommodation being disposed of, or becoming absorbed within a general needs allocation process, resulting in a loss of access to vulnerable people.

A couple of the authorities interviewed preferred to retain the link between accommodation and support, even though they may commission the support on a more flexible basis. Ultimately the volume and type of accommodation based services needs to be determined locally, based on the each authority's strategic approach to meeting needs.

4.5 Sheltered housing for older people

The review has highlighted that sheltered housing has an important role to play in meeting the needs of people who want to live in their own flat in a community setting and have the security and peace of mind that such accommodation can provide.

However, the review has also shown that substantial changes are taking place to the way in which sheltered housing is provided. A number of factors are having an impact on changes in sheltered housing including:

- less demand for sheltered housing as people are tending to move to sheltered housing later in life;
- large numbers of sheltered housing schemes are not up to modern standards and are provided in bedsit accommodation;
- significant numbers of sheltered housing residents do not require support services and are being defined as 'active elderly'.

Some Administering Authorities are commissioning flexible mobile support to sheltered housing tenants based on an assessment of support needs; others are extending this mobile support to older people in other types of accommodation e.g. owner occupiers and private rented tenants. Some of these changes have resulted in support services continuing to be linked to the accommodation (as the support does not follow the individual when they leave a sheltered housing unit). Other changes have involved moving to a floating support model where short term interventions can be made, or where the support moves with the individual irrespective of the accommodation in which they live.

To more effectively meet the aspirations of older people some of the authorities have been working with providers to re-configure support alongside capital improvements to bring sheltered schemes up to modern standards. Furthermore, some sheltered housing schemes are being remodelled into extra care services to prevent the need to move into residential care, or are being designated as older person housing (without any fixed support).

Example – Cornwall County Council

Cornwall County Council will be looking for multi-disciplinary partnerships to deliver older people's support services. Currently older people's services are based on extensively traditional provision (sheltered housing with a warden) and large district based providers. The authority intends to move all sheltered provision (with low support) to a floating support model with a menu of services from which service users can purchase e.g. how many visits someone wants a week. This support service for older people will probably be extended to all tenures including private rented and owner occupiers.

4.6 Visiting support and low level support

A number of authorities are reviewing the link between support and accommodation for accommodation based services that provide low levels of support or visiting support. There are two main reasons why authorities are reviewing these types of support services, which are as follows:

- Some shared and self contained supported housing has become long term accommodation for service users who are on assured tenancies, many of whom no longer require support.
- Some authorities want to create community support teams that can be applied flexibly across existing accommodation based services (rather than having dedicated support staff for each scheme or a landlord solely providing support to tenants living in the units that they own).

These authorities are either commissioning flexible support teams or completely breaking the link between accommodation and support. Commissioning a support team to provide a flexible support service based on an assessment of individual need can achieve a more person centred approach. Although a flexible support service may initially be linked to the accommodation, potentially it could be completely floated off. Where floating support is provided the accommodation can continue to be 'designated' for vulnerable people, so that the resource doesn't become 'lost'.

A few authorities said they will not be commissioning any more low level accommodation based support, or support services in shared housing, and are either 'designating' the accommodation for vulnerable people or reusing it for large families. A number of providers thought that accommodation based services with visiting support allows another option from which service users can choose and can be a useful 'step down' from high support services before moving onto floating support.

Example – Southampton

Southampton's key strategy over the long term is that support should not be tied to the accommodation. The authority is emphasising to providers that those who own the buildings may not necessarily be the ones providing the support service – however the authority does not want to lose the accommodation. The authority has moved from having staff based on site to staff providing visiting support – it sees this as a staging post to providing full floating support.

In the future there will be less accommodation based services. Instead there will be more floating support with a pool of accommodation prioritised for people who need support, but with the support not being linked to their tenancy.

4.7 Social isolation

The issue of social isolation came up on a number of occasions, particularly in relation to the benefits of accommodation based services. The point was made that floating support can result in social isolation – examples were given of where older rough sleepers can do better with companionship and young people who prefer not to live on their own. However, it is also clear that vulnerable people can find sharing accommodation with other people difficult and this can lead to tension. The Supporting People Baseline User Survey Report (ODPM 2005) shows that those living on their own, or with their family, were much more positive about their accommodation than those that were living with others.

A number of authorities interviewed argued that where accommodation and support is separated, it is quite possible to accommodate an individual in shared housing and separately provide flexible floating support. People could therefore choose to live in shared housing with other people, while at the same time access flexible support that eventually floats away. A few authorities cited such a model as desirable for low level supported housing and sheltered housing.

Research on the social isolation of people in receipt of floating support is not conclusive. The research has shown that these services can successfully link vulnerable people into community and mainstream activities and as a result reduce social isolation (Fisk et al 2000). However, one study (Douglas et al 1998) found that some service users can become very isolated, and dependent on the support worker, and live in an environment where there is hostility from the community. It is questionable about whether the visits by a support worker should become a way of reducing social isolation, as this can create dependency.

4.8 Making more effective use of accommodation based services

This review has highlighted that the use of accommodation based services is being challenged by a number of authorities. However, the review has also shown that there continues to be a role for accommodation based services especially those that provide a high level of support, specialist services and housing and support services for people who are homeless.

There are, however, steps that authorities can take to make more effective use of accommodation based services. In particular the following issues arose from the review:

4.8.1 Stepping up

Some of the authorities interviewed have identified that their accommodation based services provide low levels of support, particularly for people with mental health problems. These authorities have re-configured their services so that some of their accommodation based services are re-commissioned to 'step up' from the existing visiting support service to provide much higher levels of support. The needs of people who require low levels of support can then be met through floating support.

This is illustrated by an authority that explained, *"We carried out some research on mental health service users and found that people actually have much high support needs than are currently being catered for: floating support is not working for these people. They want to live with other people so we are going to develop more accommodation based services with higher support for this group"*.

4.8.2 Pathways model

Some authorities are developing a continuum of support provision so that service users can move along a 'pathway' towards independence. Accommodation based services are part of this continuum and allow service users to access accommodation for assessment and then step down to 'satellite' or 'second stage' accommodation based services, where they are not ready to live independently.

One authority has developed a hostels pathways model for single homeless people where there are assessment bedspaces, progress bedspaces, training bedspaces and then floating support. The authority has looked at its services and categorised them into these pathways and will extend this approach to all client groups.

4.8.3 Move on accommodation

A number of agencies raised the issue of service users becoming trapped in short term accommodation based services because of the lack of move on. Homeless Link has been funded by Communities and Local Government to carry out a move

on project and has commissioned research which has shown that 46 per cent of residents did not need to be in hostel provision and either needed to be in independent accommodation or higher needs services.

A couple of the authorities interviewed were concerned that providers of accommodation based services encouraged stability rather than moving people. More effective use of accommodation based services could be made where there is access to move on accommodation (see Chapter 6 on access to accommodation).

4.8.4 Stock appraisal

Some authorities are carrying out an appraisal of their accommodation based housing stock. This involves authorities appraising the stock that they own, in particular sheltered housing, as well as working with housing providers to get them to examine their own stock. Such appraisals can provide an overview of issues such as:

- the level of voids;
- the design of the provision e.g. bedsit accommodation;
- the overall condition of the stock.

Stock appraisals can provide information for local authorities on how to make better use of this stock, including funding changes of use e.g. converting sheltered housing to take other client groups. Furthermore, some authorities are taking a regional and sub regional look at provision for particular client groups e.g. specialist regional provision for substance misuse.

4.8.5 Remodelling/re-provision

A number of authorities made the point that some accommodation based services need to be improved or remodelled. In particular, two authorities identified that they needed to upgrade the accommodation and provide more self containment – although this could result in a reduction in the capacity of accommodation based services. The Housing Corporation's existing funding system allows bids for remodelling accommodation based services.

Re-provision (i.e. the complete replacement) of some accommodation based services may be required. As Homeless Link pointed out *"Big hostels are past their sell by date – some people can become lost because the services are under such pressure to deal with people who are the biggest drain on time. Smaller hostels can give people greater containment, more intensive input and less time is spent on managing the conflicts and difficulties that arise between people when sharing a big hostel."*

Communities and Local Government's Hostels Capital Programme has enabled a number of large hostels to be remodelled, including the provision of self contained accommodation and modern facilities.

4.9 Capital funding of new accommodation based services

The Housing Corporation has a capital programme for accommodation based services. Although the Corporation no longer insists on guaranteed revenue funding for support, it does require housing associations to have an exit strategy in the event their revenue funding ceases.

The priorities for bidding for capital funding are defined in the Regional Housing Strategies and increasingly these strategies are incorporating a Supporting People component. However, the feedback from the review suggests that more work is required between Supporting People authorities and Regional Housing Boards to ensure that support needs are planned for in the strategies.

Some authorities are integrating Supporting People into their regeneration programmes. This involves a strategic approach to supply and looking at where it overlaps with regeneration areas. One authority said, *"we are ensuring that all Supporting People strategies go into the local plan and link with regeneration strategies e.g. in one area we are demolishing a sheltered housing scheme and providing for a smaller core service and a lot of dispersed units so that the core can act as a hub to the cluster."*

A couple of authorities made the point that they want to create supportive communities in their re-generation areas. They want to provide self contained accommodation based units mixed in with general needs housing. One authority states that, *"it is very important to encourage cohesion, including people with support needs e.g. groups of flats within general needs developments"*. Other authorities, though, consider that such an approach could be achieved through the allocation process with support being provided to vulnerable individuals who access general needs housing, without the need for support being linked to the unit.

Chapter 5:

Balance between Floating Support and Accommodation-based Services

5.1 Introduction

The debate about the balance between floating support and accommodation based services has tended to be framed in terms of the more floating support commissioned, the less accommodation based services will be available. This review has shown that by re-commissioning existing floating support services it is possible to not only increase the capacity of these services, but also provide much more focused and coherent services, without impacting on the level of accommodation based services.

However, this review has also identified that some Administering Authorities are questioning the value of accommodation based services, particularly visiting support, and whether these services can really provide a person centred approach. Some of these authorities are in the process of re-commissioning visiting support as floating support.

Other factors can affect the balance between accommodation based services and floating support, including the extent to which the allocation process ensures that vulnerable people access general needs housing, the availability of private rented housing and whether support services can prevent individuals from becoming homeless in the first place.

5.2 What is the current balance?

The interviews with the sample of authorities highlighted that most legacy services are accommodation based, although there is also a substantial amount of floating support services. The February 2006 SPLS extract was analysed to assess the balance between these two types of services. The analysis separated data on sheltered housing for older people from other types of accommodation based services and compared that to data on floating support services only (i.e. the analysis did not include other types of non accommodation based services such as resettlement services, outreach services, community alarms and HIAs).

The table below summarises the data from the February 2006 SPLS extract for all Administering Authorities (apart from the Scilly Isles). The data shows that overall 47 per cent of services are defined as floating support (excluding other types of non-accommodation based services and sheltered housing). If sheltered housing is included, the overall proportion of floating support services would be 18 per cent.

Balance of accommodation based and floating support services by region			
TOTAL OF CLIENT GROUPS	Accommodation based services units*	Floating support units**	F/S as % of total in each region
East Midlands	15,865	13,453	46%
East of England	17,099	6,213	27%
London	37,671	24,710	40%
North East	5,479	28,628	84%
North West	24,540	13,590	36%
South East	22,209	22,493	50%
South West	16,625	13,146	44%
West Midlands	23,605	26,593	53%
Yorkshire and The Humber	22,637	17,784	44%
	185,730	166,610	47%
*Not including sheltered/very sheltered housing			
** Not including resettlement, outreach, community alarms or HIAs			

The review also found that within those authorities that re-commissioned floating support services the balance of units has increased in favour of these types of services. This is largely due to the re-commissioning process which has resulted in increasing capacity, as a consequence of rationalising legacy provision. There are concerns, amongst some of the key stakeholders, that the changing balance in some authorities is due to the de-commissioning of accommodation services and their replacement by floating support.

Appendix 3 shows the data on floating support for each client group by region from the February 2006 SPLS extract. This data provides an overview of the supply and costs of floating support by client group at a regional level. The May 2006 SPLS extract provides a fuller data set showing costs and spend, but was not available in time for this review.

Appendix 4 shows a comparison of the Platinum cut data (April 2003) with the February 2006 SPLS extract. Although the Platinum cut data can provide a useful baseline, considerable caution needs to be exercised when comparing these two sets of data (in particular there is a lack of consistency with the way in which data on older person services has been reported). The most significant trend appears to be

a substantial increase in the number of generic floating support units since 2003, which is supported by the evidence obtained from the interviews.

5.3 What is an effective balance?

There was a general consensus that an effective balance between floating support and accommodation based services should be based on local circumstances, and result from the strategic approach adopted by each authority to achieving the outcomes they require. The authorities identified a number of factors that could influence the right balance in each area, including:

- different strategic approaches to commissioning;
- local assessments of needs;
- the level of legacy floating support services;
- the scarcity of affordable housing within the authority; and
- whether the authority covered an urban or rural area.

Concerns were raised by some stakeholders about floating support being perceived as a new panacea. The central concern was that too much emphasis was being placed on floating support services, at the expense of accommodation based services, as they are easier to commission and are more flexible to de-commission.

A number of authorities made the point that they need a much better understanding of what prevention of homelessness is about. The use of floating support services to prevent homelessness, and intervene before a crisis occurs, could become a key driver to divert people from having to use accommodation based services. Effective early intervention and prevention has the potential to reduce the level of accommodation based services required by an authority.

Examples of preventative interventions

NWA pointed out that most women who leave a violent partner don't go to a refuge and may go straight into temporary accommodation as a homeless family. Floating support could therefore be a model for reducing homelessness by supporting women to stay in their own homes, if it is safe for them to do so. The Sanctuary model where a woman has a secure room in her own home was given as an example of how to keep women safe.

Where people are admitted in acute psychiatric hospital they may lose their home and have to start from scratch. NIMHE pointed out that there is a stigma attached to hospital stay and high level supported housing and there is a need to intervene to prevent the downward cycle. Floating support could potentially intervene to prevent the loss of accommodation and the need to access a specialist accommodation based service.

5.3.1 Defining the balance

Virtually all the authorities interviewed considered that they needed more floating support services and the majority were not intending to commission any more accommodation based services (apart from some specialist services e.g. a wet house).

Some authorities went further to specify a balance in percentage terms, for instance one authority said that they needed a 50:50 balance; another said that they will end up with 70 per cent floating support and 30 per cent accommodation based. However, a London authority stated that their tendering process had resulted in a reduction of floating support services and they would not be replacing any accommodation based services with floating support.

The approach adopted by some authorities to separating accommodation from support will have an impact on the balance between accommodation based services and floating support. Although the support capacity may remain the same, such a change will result in these services being defined as floating support, with the accommodation remaining as 'designated' housing for vulnerable people.

An Audit Commission inspector raised concerns about the changing balance adopted by some authorities as follows, *"I perceive a danger in engineering the wrong balance between accommodation based and floating support as councils struggle to manage budget reductions (floating support being cheaper and not requiring the capital investment of accommodation based services)."*

5.3.2 Generic or specialist

The review found that the issue of balance relates not only to that between floating support and accommodation based services but also to that between generic floating support and specialist floating support.

Some authorities want to assess whether there is a discernable difference between generic and specialist services, or whether specific client group issues can be addressed by specialist workers within generic services – as one authority said “at the moment we are commissioning both but want to see what the difference is between them and whether generic services provide better quality”. Other authorities have defined the balance they want, as one authority explained, “we will have 18 floating support contracts, one of which will be a generic service taking up 25 per cent of the funding, and the others specialist services which will take up 75 per cent of the funding”.

Furthermore, the issue of balance also needs to focus on the intensity of support as authorities need to consider how to balance low and high levels of support. This can either be addressed by commissioning generic floating support services with low levels of support and specialist services with high level of support or adopting an approach whereby each floating support service can deliver high, medium and low levels of support.

5.4 How can the balance be altered?

The review has come to the conclusion that the balance between accommodation based and floating support services should only be altered as part of a strategic approach to effectively address needs and achieve strategic outcomes. In particular authorities need to consider the point at which people require access to services and how people can move through services. Some individuals will already be accommodated and will need a responsive floating support service, while others will need to be accommodated in temporary accommodation before moving onto intermediate accommodation or independent housing (with or without floating support).

The approaches to changing the balance between accommodation based and floating support services can be summarised as follows:

- Re-commissioning floating support services
- Reconfiguring existing accommodation based services as floating support
- De-commissioning accommodation based services.

Example – Nottingham City Council

Nottingham will be re-tendering all existing services. All legacy floating support services are being re-tendered with the aim of expanding the current volume of floating support across the board; some are expanding by 50 per cent with the council aiming to increase spending on floating support by £1m per annum. The tendering process is not replacing existing accommodation based services, but some contracts have already been terminated for accommodation based services and these are to be replaced by floating support. Furthermore, visiting support services will be turned into floating support.

5.4.1 Re-commissioning floating support services

This review has already described the process of re-commissioning existing floating support services, usually as a combination of a large generic service and a number of specialist services.

The procurement process can change the balance as it can increase the capacity of the services as a result of tendering. One authority gave an example where it increased the capacity of its floating support services and reduced their overall costs and explained that, *"In 2003 the homeless floating support service supported 600 households for £6m; since then we reviewed the service and it now supports 1400 households with lower costs"*.

5.4.2 Re-configuring existing accommodation based services as floating support

One authority described the changes to accommodation based services as an evolving process whereby on site support evolves to visiting support then 'true floating support'.

One authority stated that, *"By the end of the process we will not have any visiting support. They will either be accommodation based with staff based on site or floating support with staff not attached to any scheme. Overall our intention is to reduce the number of temporary housing schemes by 50 per cent and put the money back into floating support services."*

5.4.3 De-commissioning accommodation based services

Only two of the providers we interviewed had had their accommodation based services de-commissioned. One of the providers was concerned that such an approach would result in the loss of a significant amount of accommodation. This approach was perceived as reducing choice for service users, particularly unpopular client groups. The providers pointed out that it would be impossible to replace accommodation lost in this way due to problems with planning consent.

To prevent accommodation from becoming 'lost' some authorities intend to 'designate' this accommodation so that it can be retained for vulnerable people (provided that floating support services are available to support individuals in this accommodation). It had been suggested that some authorities are decommissioning accommodation based services to deal with reductions in budgets and are not re-commissioning any support services to replace these services.

5.5 Improving choice and control

By changing the balance of provision from accommodation based services to floating support there is a perception that choice and control for service users could be improved. Although the review has found that floating support can promote greater control and choice, a few stakeholders made the point that an effective needs assessment and support planning framework should enable service users to have control and choice regardless of service type.

There has been a debate about whether floating support services give sufficient choice and control to service users in relation to choice over provider. It may be possible for choice to be expanded in terms of choosing between a generic, specialist, or an ethnic minority provider, although this may only be feasible in unitary authority areas. In county areas partnership arrangements could potentially provide greater choice, where smaller more specialist providers are sub-contracted by the main contractor, although there may be an issue about being able to provide even coverage across a large geographical area.

Should individual budgets be introduced for Supporting People, service users could potentially purchase services from a number of different providers. However, there are efficiency issues about a number of different providers covering large geographical areas and whether this can be a productive use of time.

5.6 Access to accommodation

Some of the participants thought that it was not a question of the balance between accommodation based and floating support services, but rather a question about access to accommodation.

A number of participants pointed out that accommodation based services have largely been developed in response to a lack of accommodation. These services provide access to scarce housing resources and can then support people to access independent housing. However, the difficulties involved in accessing independent housing has resulted in many of these services becoming 'clogged up' with nowhere for people to move on to.

The review has highlighted the importance attached to accessing independent accommodation for people who are homeless or inadequately housed or who need to move on from an accommodation based service. Administering Authorities are now taking greater ownership of this issue as access to independent accommodation will increase the efficiency of support services. The approaches being adopted include:

- Promoting choice based letting;
- Use of the private rented sector;
- Rent deposit schemes;
- Integrating Supporting People into the re-generation agenda;
- Other types of tenure e.g. shared ownership.

A key stakeholder pointed out that choice based letting can work well for vulnerable people and that authorities need to look at good practice models in making choice based lettings work effectively, particularly in moving people on from accommodation based services.

Another stakeholder made the point that the issue of move on accommodation needs to be looked at, as it can appear that service users are gaining access to independent social housing through the back door. A provider pointed out, *“much more attention needs to be paid to who really is going to need accommodation based services and who actually needs access to social housing or any form of housing; just because someone has a support need doesn’t mean that they have to access social housing.”*

5.7 Balance of resources

There is a perception that floating support services are less expensive than accommodation based services. Furthermore, some of the key stakeholders interviewed were concerned that authorities were commissioning floating support services to solely generate greater capacity at a lower price, irrespective of the outcomes they wanted to achieve.

The interviews with the authorities showed that in some circumstances, where similar needs are met, the costs of floating support can be greater than the costs of accommodation based services. This is because the level of input to a service user requiring intensive support can amount to 10 to 14 hours per week, making the unit costs far in excess of that of an accommodation based service for a similar client group.

At a national level the SPLS February 2006 extract data shows the funding contracted for floating support services is about 17 per cent of the total for both accommodation based and floating support (excluding other types of non-accommodation based services and sheltered housing). This figure contrasts with the supply data which shows that 47 per cent of the supply as floating support (excluding other types of non-accommodation based services and sheltered housing). This illustrates that the unit costs of floating support services are generally lower than accommodation based services, particularly as accommodation based service often have to provide higher levels of staff cover (e.g. 24 hour cover).

The overall balance of Supporting People resources invested in floating support, compared with that invested in accommodation based services, is an issue for authorities. As this report has pointed out the balance at a local level needs to be driven by the strategic outcomes that the authority is seeking to achieve. Ultimately it may require investment in a combination of different services, including floating support services providing high and low levels of support, to effectively achieve the outcomes required.

Chapter 6:

The provision of other services

6.1 Introduction

It is clear from the review that housing related support services cannot provide for all of the needs of some service users and that it is essential to access other services such as social care, to ensure that individuals are able to sustain independent living.

Good practice suggests that other services should be accessed through a single point of assessment where individuals with complex needs undergo a multi- disciplinary assessment. However, the picture emerging from the review is that floating support services themselves largely carry out 'holistic' assessments and then broker access to other services where these are required. Some participants made the point that floating support services may end up providing social care services to some service users because of the difficulties of accessing statutory services, with the risk of using Supporting People funding to provide services outside of its remit.

There are a number of examples where floating support services have been jointly commissioned by Supporting People and social services. These services are intended to provide housing related support as well as help maintain service users in their accommodation.

6.2 Single point of assessment

A number of authorities are introducing multi-disciplinary assessments or joint assessments as a way of ensuring that service users access appropriate social care services and to link support to care. These types of assessments tend to be focused on specific client groups such as people with learning difficulties, or people with complex needs.

More generally a single 'gateway' is being introduced by some authorities for accessing floating support, where a single agency is responsible for referring individuals to these services following an initial screening. The floating support service then carries out an assessment to identify the level of support required and other services that are needed. As floating support services adopt a 'whole person' approach to assessment they become a focal point for drawing in other services.

6.3 Brokering access to other services

Many of the participants explained that help from statutory services is not available and floating support is carrying out tasks that social workers used to do. Often the intervention of a floating support service can stop problems escalating to the point where “someone has to resort to statutory services”. However, where an individual requires access to these services then floating support services are usually involved in brokering access to statutory services on behalf of service users.

6.3.1 The brokering role and co-ordination

The brokering role may still be required even where a joint assessment has been carried out; an authority pointed out that, *“statutory services stay in their silos and floating support services can help them work together”*. Therefore, floating support services have a central role in bringing together statutory services to work together to meet an individual's needs.

There was debate about the role of specialist floating support services and the extent to which specialist workers prevent the need to access social care. One authority took the view that even with specialist services the level of housing related support should not be that different from any other floating support service and that these services should signpost and broker access to social care services, where required.

The review found that home care services and support are often not co-ordinated, particularly for older people. Lack of communication between providers means that service users are not getting as holistic service as they should; for instance it was pointed out that in sheltered housing there is a need to be clear about who does what between the home care staff and the scheme manager. One authority said that *“Care managers need to recognise the role of housing related support and work in a multi-planned way.”*

A number of participants highlighted that protocols are needed with statutory services as it is important to access these services quickly, with early intervention resulting in ‘real’ prevention. Some participants pointed out that services need to work together within strategic policy frameworks, as one provider stated, *“all young people’s services should be working within the Every Child Matters framework and the developing children’s’ trusts. Each agency must be aware of the other’s remit, and the pressures of that part of the system, and have agreements for working together e.g. social care realising that if you refer someone to them you are not passing the buck but that you have done as much work as your service can do and that they need to take the case on.”*

6.3.2 Access to other services

The types of services that floating support services broker access to can include:

- Social care services
- Mental health services
- Health services
- Children's services
- Child protection services

The main problems with accessing social services is that very low levels of need are not addressed and often floating support services have to 'fill the gap' i.e the gap between housing related support and eligibility for social care services. Although these floating support services are not providing personal care, the intensity and scope of their activities can cover areas that were previously eligible for social care funding.

One of the strengths of floating support is that it adopts a 'holistic' approach to an individual's needs and can provide access to a vast range of other services. An evaluation of Hampshire's floating support services (Goldup 1999) showed that the floating services helped service users access a diversity of services including:

- Money advice services
- Rent deposit schemes
- Further education colleges
- Careers advisors
- Amateur Dramatics Society
- Local singing group

6.4 How does the support float?

The Audit Commission and other participants in the review made the point that housing related support is about 'enabling' independence while social care is about 'maintenance'. Good support planning is perceived as the reduction of support over time, although participants acknowledged that some individuals may always require some level of support, perhaps within a multi agency approach (e.g. people with learning difficulties).

Participants described how floating support services can resolve particular problems and 'dip out' after they have linked people into social care. The point was also made that where domiciliary care is involved then floating support can 'float', leaving domiciliary care to do its job.

However, it is also clear that this process can operate in reverse. A provider of services for learning disabilities described how care management can float off leaving the floating support service to monitor the service user. Another provider made the point that their floating support for travellers stays around to make sure that 'others do their bit', acknowledging that although *"people should be handed over to mainstream services, the knowledge and capacity to provide appropriate support is not there and they do not have flexible enough systems to work with travellers"*.

A number of participants made the point that floating support services can provide easier access to statutory services than would otherwise be the case. Although floating support can float away leaving statutory services in place, it is also important for the support to be easily accessible so that people can come back to the service.

6.5 Joint commissioning

The review has shown that there are examples where floating support services have been jointly commissioned. The purpose of this approach is to develop a seamless service that provides a greater level of intensity. This may result in some services being provided on a long term basis and others where the intensity can diminish with some services floating off. Furthermore, it is another way in which the Supporting People/ social care interface can be dealt with, as the service can be jointly funded and there is no argument about who should do what.

The review found examples of joint commissioning for the following groups:

- **Learning Disabilities** – joint commissioning of floating support is most advanced for this client group. However, most of these services are provided on a long term basis and there is a question about whether maintaining individuals in their accommodation is the best use of Supporting People resources.
- **Older People** – joint commissioning has resulted in flexible services that can support individuals in a variety of tenures. One example involved floating support being added to a much larger package of accommodation based care, either where a 24 hour presence is needed to address frailty or where specially adapted accommodation is needed to meet particular needs e.g. dementia.
- **Travellers** – one example involved the floating support service being part of a partnership funded by health, education and Supporting People. The education team works with children, the health team works to access health and the support team works with housing related issues including domestic violence.

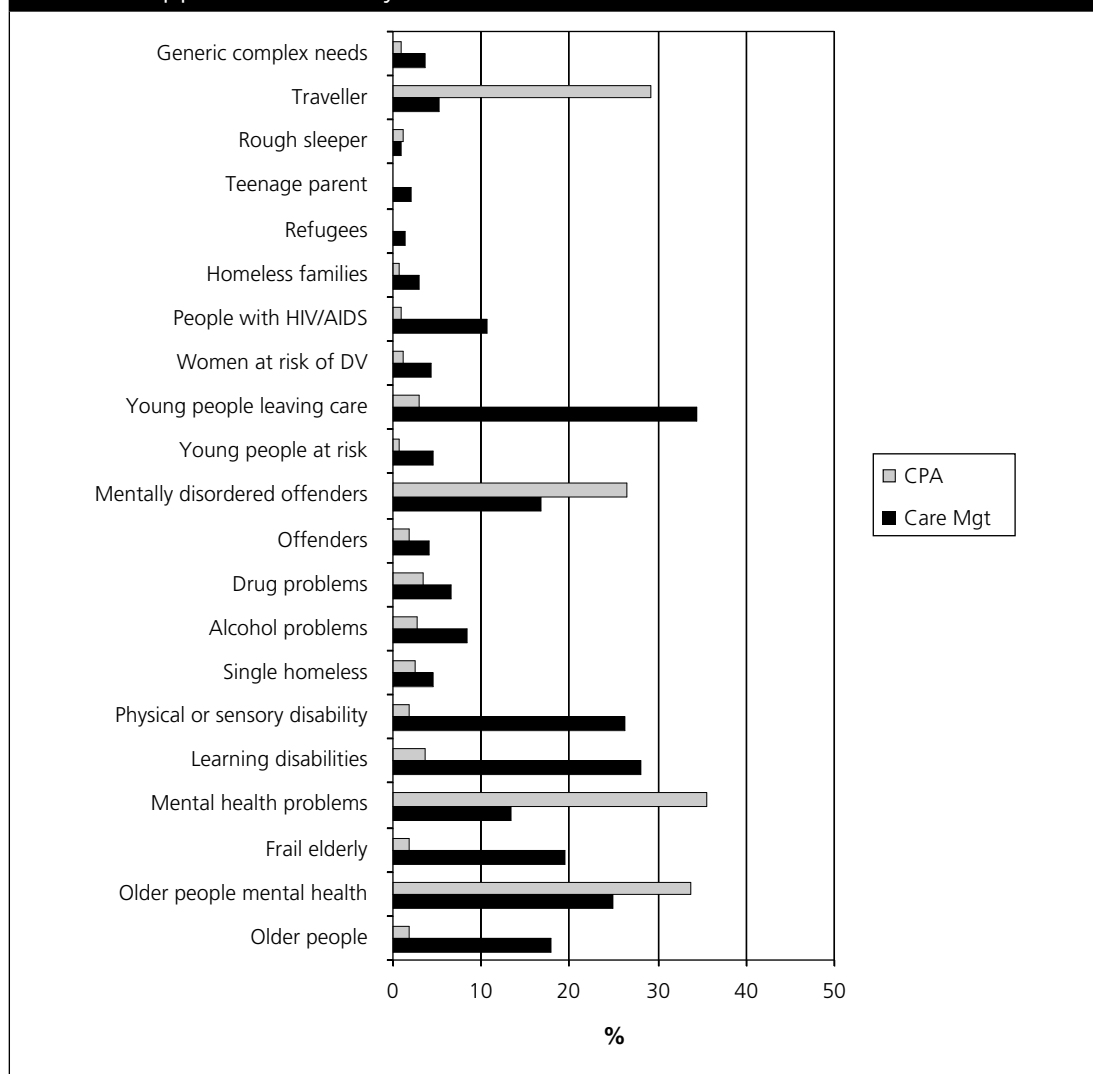
In relation to joint commissioning one authority described the problems in getting the two sides together, *“we are trying to work on learning difficulty services with our colleagues in the Learning Disability team, but it can be a nightmare. Learning Difficulty services purchase everything on the basis of the individual and their care plan and have no concept of a contract or a service specification. They also have no concept of operating at a provider level. Supporting People on the other hand is totally focused at the provider level and does not recognise or have contact with the service at the individual level. We need something to bring the two approaches together into a workable joint contract”*. Another authority said that *“Ideally we want to jointly tender services with social services and have integrated contracts”*.

6.6 Who accesses statutory services?

All Supporting People client groups may require access to health, social care services and other services. However, there are specific client groups for whom social services have a statutory responsibility and are more likely to be in receipt of social care services. This often results in a situation where socially excluded client groups (e.g. single homeless people, rough sleepers) have far less access to social care services than other client groups, such as older people or people with learning disabilities

An analysis of the Client Record data has been carried out on a client group basis to show the proportion of those who were subject to a statutory social care framework at the point they accessed a floating support services (during 2005).

Chart 8: Clients accepted under the Care Management and Care Programme Approach Statutory Frameworks



The data in this chart illustrates that the more socially excluded client groups have gained less access to statutory frameworks. The only exception is travellers who have accessed mental health services under the CPA – it is probable that they have been referred to a floating support services as a consequence of their engagement with mental health services. This means that ‘social care’ clients groups, such as people with learning disabilities, people with mental health problems and older people have the greatest access to statutory social care services and as a consequence Supporting People services are likely to have greatest difficulty in brokering access to social care for other client groups.

Chapter 7:

Conclusions and Recommendations

The following sets out the key conclusions of the review and, in particular, addresses the questions posed in the research brief. In addition the review makes recommendations on a number of areas where further research may be required.

7.1 Conclusions

7.1.1 Floating support

The review focused on interviewing Administering Authorities that had re-commissioned, or were in the process of re-commissioning, their floating support services. The review has concluded that the key drivers for the authorities re-commissioning floating support were to rationalise legacy floating support provision, improve geographical coverage and to provide equitable access to people living in different types of tenure.

The review has concluded that all floating support services can be grouped under the broad headings of generic or specialist services. In addition the review found that there is a specific type of generic floating support service which solely focuses on crisis intervention work and then moves away. The review concluded that specialist services are defined by the specialist knowledge of staff as well as a higher intensity of support (although the level of support can vary from one service to another).

Although floating support to ethnic minority groups can be delivered through a generic service it may be more effective to commission specialist ethnic minority floating support services, either on a sub-contracted basis or through a direct contract with an ethnic minority service provider.

The review also concluded that all floating support services are, to a greater or less extent, multi disciplinary. Furthermore the review has concluded that all types of floating support services can carry out crisis intervention work, although generic crisis services move away once the crisis is resolved.

7.1.2 The effectiveness of floating support

The review has concluded that there are a number of key benefits to providing floating support services. These benefits include a tenure neutral approach which enables people to live in ordinary housing, providing a person centred approach

tailored to the individual and brokering and advocacy services that gain access to social care, health and other services.

The review has concluded that floating support services are effective in achieving a number of outcomes. Floating support services can help achieve strategic targets such as the prevention of homelessness, support service users to maintain independent accommodation, achieve health and social care outcomes such as reducing hospital admissions, improve wider community outcomes such as preventing anti-social behaviour and underpin a number of user centred outcomes such as improving self esteem.

However, there are limitations to the provision of floating support services. There are some individuals for whom floating support services can do very little either because their problems are so overwhelming or because they disengage from the service – in these circumstances an accommodation based service may be more effective. Where floating support services are withdrawn too early tenancy breakdown can sometimes result, while long term support can result in creating dependency. Where service users require a period of stability before moving into their own independent accommodation, an accommodation based service is more appropriate.

In addition, the review has concluded that there are a number of limitations to the research studies that have been carried out on floating support services and that a more effective evidence base needs to be developed to assess the impact of these services and their effectiveness in achieving the objectives of the Supporting People programme.

7.1.3 Accommodation based services

The review has concluded that accommodation based services are effective in providing a place where an individual can be assessed, cost effective high support services, stability for individuals before moving onto independent housing and easy access to housing for homeless people (i.e. into the accommodation based service), particularly for those without any local connection.

The number and type of accommodation based service in each authority needs to be commissioned on the basis of how to most effectively achieve the strategic objectives of the authority. The review has concluded that there is a core level of accommodation based services that should be available in each authority.

There continues to be a role for accommodation based services, particularly those that provide a high level of support, specialist services and support to people who are homeless. The review has also concluded that there are a number of steps that authorities can take to make more effective use of accommodation based services.

7.1.4 The balance between floating support and accommodation based services

The review has concluded that an effective balance between accommodation based and floating support services depends on local circumstances and the strategic approach adopted by the authority in meeting current and future needs.

The balance between accommodation based and floating support services can be altered by re-commissioning floating support services to generate increased capacity, reconfiguring existing accommodation based services as floating support (and prioritising the housing element for vulnerable people) and de-commissioning accommodation based services.

The review has also concluded that access to independent accommodation is essential for people who are homeless or inadequately housed or who need to move on from accommodation based services.

7.1.5 The provision of other services

The review has concluded that floating support services have an important role to play in accessing statutory services, and other services, on behalf of service users.

Floating support can float away after linking people into statutory services. The review has also concluded that this process can happen in reverse where floating support services can end up monitoring individuals after social care floats off.

The review has concluded that those client groups for whom social services have a specific statutory responsibility are more likely to be in receipt of social care services. This often results in a situation where the social care needs of socially excluded client groups (e.g. single homeless people, rough sleepers) receive far less priority than other client groups, such as older people or people with learning disabilities. This can be despite the brokering played by floating support services.

7.2 Recommendations

This review has identified a number of areas where further research may be required. The following recommends areas for inclusion in a longer term study:

- As most evaluation studies to date have been localised to a particular area or type of service, a national study of floating support is required so that the findings can be more widely applied.
- A comprehensive study is needed of the impact of the generic floating support services that have been re-commissioned under the Supporting People programme.

- A better understanding is needed of the advantages and disadvantages in providing specialist floating support services and the extent to which these services can be incorporated into a generic service.
- A long term evaluative study is required to measure the outcomes for individuals who have received floating support services. No longitudinal studies have been undertaken of the impact of floating support services and such a study will need to develop an approach that can measure the distance travelled by individuals.
- The role of floating support in providing preventative services needs to be better understood and how such services can intervene to prevent a crisis from occurring in the first place.
- There needs to be a better understanding about the extent to which floating support interventions prevent the use of health and social care services. The question that needs to be asked is what would have happened to the individual had the floating support service not intervened.
- Although there is a considerable amount of literature on good practice in delivering accommodation based services, there are few studies on the impact of these services. Further studies are required to better understand the effectiveness of accommodation based services in comparison with floating support services.

Appendix 1

Summary of Research specification and approach

1. Summary of the Research Specification

The Communities and Local Government research specification required a short-term, secondary review of available literature and current practice, which, in addition to addressing the research questions as far as current literature and practice will allow, will lay the ground for future, longer-term, primary research. Specifically, Communities and Local Government wished to answer:

- a) in which circumstances or contexts is floating support effective in improving services? This question should be addressed particularly in the context of Communities and Local Government desire to move towards more user-centred services.
- b) in which circumstances or contexts does floating support not add value in comparison with accommodation-based services?
- c) and, given the above, to what extent does an effective balance currently exist between floating and accommodation-based services? How might this balance be altered to improve service delivery, and to improve choice and control for service users?

The specification asked the research to consider that effective answers to the above questions will need to address the wider context of care, health and support provision received by the person and within which Supporting People services operate. Specifically, Communities and Local Government wished to answer:

do other services, including care and support, also need to be available on a floating basis in order to make this an effective method of provision? Does this relationship vary between Supporting People client groups?

Communities and Local Government wished to answer these questions both for short-term support in crisis situations, and for longer-term delivery.

2. The Approach

The approach to the review has involved the following:

- A literature review;
- Meeting with 8 key stakeholders; which were:
 - Audit Commission
 - Homeless Link
 - Housing Corporation
 - National Housing Federation
 - National Women's Aid
 - NIMHE
 - SCIE
 - SITRA
- A questionnaire to Audit Commission Supporting People inspectors;
- Telephone interviews with a sample 15 Supporting People Administering Authorities;
- Telephone interviews with a sample of 17 providers (covering a variety of client groups);
- A review of the documentation produced by the Administering Authorities (e.g. strategic reviews of floating support services, models of service delivery, service specifications)
- An analysis of the February 2006 SPLS extract data;
- An analysis of the Client Record data for 2005.

The table below summarises the sample of Administering Authorities interviewed by type.

Type of Authority	Sample	Experience of floating support
Counties	5	All these authorities had re-commissioned floating support services
Unitary Authorities	3	All these authorities had either re-commissioned floating support or were going through the process of doing so
London Boroughs	3	All these authorities had commissioned floating support, but with each adopting a different approach
Metropolitan Authorities	4	Two of these authorities had not carried out any thinking about floating support. One had developed a strategic framework and another had commissioned floating but within the context of prioritising accommodation based services

The sample of Administering Authorities selected was focused on those that had re-commissioned floating support, or were going through a process of doing so, and could therefore identify issues of good practice. To ensure a balance in terms of geographical spread we also added three authorities that had not been involved in significant re-commissioning of floating support. Although there is a reasonable spread of authorities in terms of geography and type, this sample is not intended to be representative. In particular there may be practice related to commissioning floating support that this review has been unable to identify.

Appendix 2

Action Points on Good Practice

These action points relate to good practice in the delivery of floating support services.

Assessment of needs

- The assessment process should be person centred.
- Floating support services should undertake a holistic assessment of need and identify other services that may be required.

Risk assessment and risk management

- Risk assessment should be undertaken of individuals to identify any patterns of behaviour that may lead to harm, either to the service user or others.
- Information should be shared between professionals to enable risk assessments to be well informed.

Support planning

- Every service user should have an individual support plan which is drawn up and regularly reviewed with the service user.
- It is essential that any goals agreed with the service user are recorded and the steps to achieving these goals.
- Where floating support services are provided to a service user who is under the CPA or the care management system there should be a clear agreement about who does what.
- Support workers need to balance their caseloads to ensure that they have the capacity to meet the support needs of service users.

Links with landlords

- The floating support service should make links with the landlord, where appropriate, to ensure that the tenancy is not put at risk.

Staff

- The personal qualities of the staff are just as important as any formal qualifications.
- Lone workers should have a structure within which they can discuss their work and have access to appropriate networks.
- Support workers need to create clear boundaries with service users.
- Floating support providers should explore all the options for ensuring the safety of support workers and to reduce the risk of violence.
- Staff need to become competent in a number of areas and should receive training to achieve these competencies.

Duration of support

- The duration of support should be needs led and not based on arbitrary time limits.

Level of support

- The level of support provided should be on the basis of an assessment of need and the individual person centred support plan.

Advocacy and brokerage

- Clear boundaries need to be established with other services to avoid duplication and to ensure that there are no service gaps.
- Floating support services should broker access to services on behalf of service users and support them in using these services.
- Floating support services should work together with other agencies, which could include formalising the relationship through a written protocol.
- Floating support services should support service users to create more social contacts, where this is required.

Floating support off

- Where floating support services develop targets for the duration of support they should not be rigidly applied as the services should be needs led.
- Floating support services should have a formal process for closing cases, but with the option for service users to re-engage with the services.
- There may be some service users who require long term support and floating support services should regularly review their needs.

Measuring outcomes

- Floating support services should collect monitoring information on the services provided to individuals including the level of contact and the outcomes of the support planning process.
- Floating support services should collect outcome information to demonstrate the impact of the service.
- Floating support should provide a high quality service and use the QAF to continuously improve the service.
- Floating support services should obtain feedback from service users on the quality and effectiveness of the service.

Appendix 3

Floating Support by Client Group and Region

Floating Support by Client Group and Region

Appendix 3

FLOATING SUPPORT	No No	No No	Average weekly
OFFENDERS	services	units	unit cost
East Midlands	13	243	144.7
East of England	7	42	37.2
London	15	176	101.4
North East	8	107	85.2
North West	26	331	148.6
South East	16	912	53.2
South West	13	84	70.5
West Midlands	22	237	76.5
Yorkshire and The Humber	26	354	135.3
	146	2,486	107.4

FLOATING SUPPORT	No No	No No	Average weekly
FRAIL ELDERLY	services	units	unit cost
East Midlands	1	56	5.2
East of England	1	45	-
London	3	100	11.8
North East	3	94	16.5
North West	2	106	13.4
South East	9	47	14.8
South West	6	1,260	36.0
West Midlands	10	187	-
Yorkshire and The Humber	1	2	13.6
	36	1,897	16.8

FLOATING SUPPORT	No No	No No	Average weekly
OLDER PEOPLE MH	services	units	unit cost
East Midlands	1	4	160.3
East of England	6	53	113.6
London	1	40	-
North East	1	10	31.4
North West	2	32	98.0
South East	3	59	34.6
South West	19	65	74.0
West Midlands	1	4	96.7
Yorkshire and The Humber	2	31	-
	36	298	85.3

FLOATING SUPPORT	No No	No No	Average weekly
GENERIC	services	units	unit cost
East Midlands	37	1,688	73.9
East of England	34	1,686	70.3
London	109	6,027	45.3
North East	35	17,721	59.9
North West	69	2,259	84.0
South East	109	4,538	79.9
South West	78	3,092	52.0
West Midlands	68	3,328	60.3
Yorkshire and The Humber	45	2,114	62.3
	584	42,453	65.9

FLOATING SUPPORT	No No	No No	Average weekly
OLDER PEOPLE	services	units	unit cost
East Midlands	20	7,045	28.8
East of England	9	807	5.8
London	60	4,142	41.6
North East	28	7,778	32.2
North West	42	4,516	43.7
South East	100	3,648	94.2
South West	86	3,150	31.6
West Midlands	104	16,287	32.9
Yorkshire and The Humber	31	9,643	18.3
	480	57,016	44.4

FLOATING SUPPORT	No No	No No	Average weekly
HOMELESS FAMILIES	services	units	unit cost
East Midlands	15	352	57.0
East of England	10	190	71.9
London	19	2,624	52.8
North East	3	53	20.5
North West	19	397	108.4
South East	26	593	59.0
South West	20	445	57.3
West Midlands	14	256	60.2
Yorkshire and The Humber	11	431	50.2
	137	5,341	66.0

FLOATING SUPPORT	No No	No No	Average weekly
PHYSICAL / SENSORY	services	units	unit cost
East Midlands	14	144	225.4
East of England	10	584	44.7
London	25	334	59.4
North East	12	536	120.1
North West	23	284	173.3
South East	81	3,829	117.3
South West	27	276	107.0
West Midlands	27	576	104.7
Yorkshire and The Humber	24	360	69.3
	243	6,923	120.7

FLOATING SUPPORT	No No	No No	Average weekly
MD OFFENDERS	services	units	unit cost
East Midlands	-	-	-
East of England	1	12	-
London	3	26	78.6
North East	1	5	92.1
North West	2	20	798.8
South East	1	11	62.9
South West	-	-	-
West Midlands	1	15	-
Yorkshire and The Humber	2	8	42.0
	11	97	214.9

FLOATING SUPPORT	No No	No No	Average weekly
ALCOHOL	services	units	unit cost
East Midlands	4	34	61.7
East of England	1	15	43.2
London	17	422	70.1
North East	3	56	96.4
North West	8	204	61.6
South East	12	574	58.9
South West	3	31	41.5
West Midlands	8	89	71.9
Yorkshire and The Humber	8	88	116.7
	64	1,513	71.6

FLOATING SUPPORT	No No	No No	Average weekly
AIDS / HIV	services	units	unit cost
East Midlands	1	17	78.4
East of England	-	-	-
London	11	175	55.5
North East	-	-	-
North West	7	19	-
South East	-	-	-
South West	3	24	231.8
West Midlands	5	42	96.0
Yorkshire and The Humber	-	-	-
	27	277	86.4

FLOATING SUPPORT	No No	No No	Average weekly unit cost
DRUGS	services	units	
East Midlands	13	355	124.8
East of England	7	149	63.6
London	14	219	72.4
North East	7	61	97.6
North West	23	286	114.4
South East	13	261	49.4
South West	19	296	44.9
West Midlands	8	236	104.5
Yorkshire and The Humber	14	247	81.4
	118	2,110	83.9

FLOATING SUPPORT	No No	No No	Average weekly unit cost
LEARNING DISABILITY	services	units	
East Midlands	43	384	408.2
East of England	36	226	161.4
London	95	789	129.9
North East	36	410	219.3
North West	155	566	453.8
South East	253	1,771	193.0
South West	106	695	149.5
West Midlands	68	798	173.1
Yorkshire and The Humber	69	550	147.7
	861	6,189	260.7

FLOATING SUPPORT	No No	No No	Average weekly unit cost
REFUGEES	services	units	
East Midlands	7	263	98.8
East of England	1	14	78.1
London	23	472	47.5
North East	6	210	78.7
North West	9	579	33.6
South East	1	30	58.1
South West	5	158	10.5
West Midlands	10	365	75.8
Yorkshire and The Humber	14	509	35.5
	76	2,600	56.4

FLOATING SUPPORT	No No	No No	Average weekly unit cost
SINGLE HOMELESS	services	units	
East Midlands	22	904	72.4
East of England	46	981	39.9
London	62	1,881	61.4
North East	21	517	73.1
North West	61	1,110	78.8
South East	70	1,854	52.6
South West	37	1,044	62.9
West Midlands	30	445	56.3
Yorkshire and The Humber	35	896	80.3
	384	9,632	62.9

FLOATING SUPPORT	No No	No No	Average weekly unit cost
TRAVELLERS	services	units	
East Midlands	3	77	20.3
East of England	4	54	6.4
London	-	-	-
North East	-	-	-
North West	1	9	218.6
South East	1	16	9.2
South West	-	-	-
West Midlands	2	38	-
Yorkshire and The Humber	-	-	-
	11	194	52.2

FLOATING SUPPORT	No No	No No	Average weekly unit cost
MENTAL HEALTH	services	units	
East Midlands	52	1,273	113.9
East of England	49	812	63.1
London	186	4,121	75.4
North East	29	481	111.0
North West	92	1,762	96.3
South East	118	3,138	77.1
South West	109	1,821	76.3
West Midlands	105	2,230	83.0
Yorkshire and The Humber	58	1,286	87.1
	798	16,924	83.7

FLOATING SUPPORT	No No	No No	Average weekly unit cost
ROUGH SLEEPERS	services	units	
East Midlands	-	-	-
East of England	-	-	-
London	8	18	90.8
North East	-	-	-
North West	-	-	-
South East	3	65	47.5
South West	1	14	-
West Midlands	-	-	-
Yorkshire and The Humber	3	51	77.9
	15	148	83.8

FLOATING SUPPORT	No No	No No	Average weekly unit cost
TEENAGE PARENTS	services	units	
East Midlands	9	174	91.5
East of England	3	28	127.7
London	25	285	143.2
North East	9	94	100.7
North West	17	211	52.0
South East	19	178	114.0
South West	14	121	73.1
West Midlands	23	240	81.8
Yorkshire and The Humber	16	233	134.6
	135	1,564	102.2

FLOATING SUPPORT	No No	No No	Average weekly unit cost
DOMESTIC VIOLENCE	services	units	
East Midlands	19	202	133.6
East of England	17	210	62.5
London	29	1,653	57.2
North East	11	102	79.9
North West	27	316	104.4
South East	26	409	98.9
South West	9	151	67.9
West Midlands	35	571	119.9
Yorkshire and The Humber	13	320	83.9
	186	3,934	93.1

FLOATING SUPPORT	No No	No No	Average weekly unit cost
YP LEAVING CARE	services	units	
East Midlands	1	33	160.6
East of England	1	6	20.5
London	33	445	74.2
North East	1	7	105.7
North West	8	83	69.3
South East	9	43	198.2
South West	3	22	258.8
West Midlands	6	31	266.9
Yorkshire and The Humber	10	68	135.0
	72	738	124.4

FLOATING SUPPORT	No No	No No	Average weekly
YOUNG PEOPLE AT RISK	services	units	unit cost
East Midlands	13	205	104.3
East of England	16	299	38.5
London	41	761	69.1
North East	22	386	88.5
North West	34	500	91.4
South East	33	517	88.3
South West	37	397	62.1
West Midlands	35	618	83.3
Yorkshire and The Humber	28	593	80.5
	259	4,276	78.1

Appendix 4

Comparison of Platinum Cut data and SPLS extract

Comparison of Platinum Cut data and SPLS extract**Appendix 3****Accommodation Based Services**

	Platinum Cut	SPLS Extract
Older people with support needs	0	42,643
Older people with mental health problems	0	651
Frail Elderly	13,343	2,484
Generic	5,212	3,346
Homeless Families with Support Needs	9,443	8,397
Mentally disordered offenders	268	266
Offenders or People at risk of Offending	4,462	4,755
People with a Physical or Sensory Disability	5,682	5,514
People with Alcohol Problems	2,365	2,299
People with Drug Problems	1,838	1,908
People with HIV / AIDS	735	694
People with Learning Disabilities	29,029	29,905
People with Mental Health Problems	24,928	25,692
Refugees	2,439	2,225
Rough Sleeper	1468	2,499
Single Homeless with Support Needs	37,546	33,837
Teenage Parents	1,241	1,677
Traveller	863	809
Women at Risk of Domestic Violence	3,523	3,393
Young People at Risk	9,321	11,202
Young People Leaving Care	1,716	1,551
Unknown	5,137	0
Total	160,559	185,747
Sheltered/very sheltered housing	619,762	556,981
Community alarms and HIAs	345,676	285,183
Accommodation based with floating/resettlement support	0	21,270

Floating Support Services

	Platinum Cut	SPLS Extract
Older people with support needs	0	57,016
Older people with mental health problems	0	298
Frail Elderly	1,414	1,897
Generic	29,250	42,453
Homeless Families with Support Needs	7,291	5,341
Mentally disordered offenders	106	298
Offenders or People at risk of Offending	2,568	2,486
People with a Physical or Sensory Disability	22,863	6,923
People with Alcohol Problems	1,014	1,513
People with Drug Problems	1,768	2110
People with HIV / AIDS	246	277
People with Learning Disabilities	5,233	6,189
People with Mental Health Problems	14,158	16,924
Refugees	1,866	2,600
Rough Sleeper	138	148
Single Homeless with Support Needs	9,280	9,632
Teenage Parents	1,350	1,564
Traveller	172	194
Women at Risk of Domestic Violence	2,304	3,934
Young People at Risk	4,269	4,276
Young People Leaving Care	876	738
Unknown	726	0
Total	106,892	166,811
Resettlement support	0	6,827
Outreach	0	3,803

Grand total	1,232,889	1,226,622
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Appendix 5

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Appendix 6

Glossary of Terms

Administering Authorities	There are 150 Supporting People Administering Authorities with the responsibility to administer the programme.
Assertive outreach	An active form of service delivery where care and support is offered in the service user's home at times suited to the service user. Workers are involved with providing practical support, care co-ordination and advocacy as well as more traditional therapeutic input. The aim is to maintain contact with the service and comply with effective treatment.
Capital funding	The money spent to purchase, convert and rehabilitate buildings or to purchase a piece of land or site and build a new housing scheme on it.
Care Package	A combination of services designed to meet the assessed needs of a person requiring care in the community.
Care Programme Approach (CPA)	A care plan that is drawn up for people with mental health problems who are either discharged from hospital or in receipt of specialist psychiatric services.
CMHT	Community Mental Health Teams are multi disciplinary team offering specialist treatment and care to people in their own homes and in the community.
CRS	Client Record System which collects information on each new service users that accesses a Supporting People service which is completed by providers using a Client Record Form.
Designated Housing	Housing that is designated for a particular client group or need e.g. housing for older people
DCLG	Department of Communities and Local Government. This is the government department with responsibility for the Supporting People programme.

Host	Host referrals are those referrals, who immediately prior to receiving a Supporting People service, have been living in the authority area where the service is located.
Housing Corporation	The main government agency for supporting housing associations in England. It makes loan finance available to housing associations, supervises and regulates the work of housing associations and generally promotes the aims of the housing association movement.
Legacy Funding	Pre-2003 funding that was available to provide support services that was transferred to Supporting People Administering Authorities on 1st April 2003.
Move-on	Rehousing a service user from a short term accommodation based service (or a long term accommodation based service that is no longer required) into permanent independent accommodation.
Non-Host	Non-Host referrals are referrals, which immediately prior to receiving a Supporting People service, have been living in another authority area to that where the service is located.
NIMHE	National Institute for Mental Health in England.
Platinum Cut	The final reconciliation of supply and cost of Supporting People services at the point the programme commenced on 1st April 2003.
QAF	The Quality Assessment Framework for the Supporting People programme which sets out the quality standards required for support services.
Re-modelling	Changing an accommodation based service both in terms of the physical structure of the building and/or the support service.
Re-provision	Replacement of an existing accommodation based service with a new accommodation based service.
SCIE	Social Care Institute for Excellence.
SHMG	Supported Housing Management Grant is a revenue grant that is available from the Housing Corporation until March 2003 for housing related support.

SPLS	Supporting People Local System which is a database for the Supporting People information collected locally on the supply of services and on quality and monitoring. The information is collected in a standard format and is extracted by Communities and Local Government to provide a national picture.
Visiting Support	Where the support worker visits service users who are living in an accommodation based service, rather than staff being based on site.