

## **Appendix 3**

# **Evidencing the value of housing related support in mental health services**

## **National policy initiatives**

The Coalition Government is in the process of developing its strategies in a number of key policy areas. There are a number of national strategies the government developed that housing related support services contribute to delivering. In some cases central government will pass legislation or issue statutory guidance to compel local authorities and Health Authorities/Trusts to perform certain functions. Housing related support providers perform an important function in supporting the local authority and primary and secondary statutory health services in meeting the health, social care and support needs of people with mental ill health.

For mental health services the key pieces of legislation are the **Mental Health Act 1983** and the **Mental Health Act 2007**. These acts cover the care and treatment of people with mental ill health including detention in hospital and treatment against their wishes.

Following the Prime Minister announcement on measuring the wellbeing of the nation the current mental health strategy **No health without mental health** was launched in February 2011 and is a cross government outcomes strategy that covers people of all ages including infants, children and older people. The approach is based on the principles the Government has laid down for its health reforms

- No decision about me putting people who use services at the heart of everything done
- Focus on measurable outcomes and National Institute for Health and Clinical Excellence (NICE) quality standards
- Empowering local organisations and practioners to have the freedom to innovate and drive improvements in services that deliver high quality support to all

The strategy aims at improving the mental health of the population, keep people well and improve outcomes for people with mental health problems through the provision of high quality accessible services. It has 6 objectives

More people

- Will have good mental health
- With mental health problems will recover
- With mental health problems will have better physical health
- Will have a positive experience of care and support

Less people will

- Suffer avoidable harm
- Experience stigma and discrimination

The strategy is being overseen by the Cabinet sub-committee on Public Health and makes mental health a key priority for the new national public health service Public Health England. At a local level the government wants the new health and wellbeing boards and directors of public health will treat mental health as a priority. The strategy includes prioritising early intervention, investing £400 million to enable choice of psychological therapies, by 2014 improving access to mental health services for those in contact with the criminal justice system, launching a set of recovery pilots, advising and supporting GP consortia to commission effective mental health services which include the most disadvantaged and excluded and working with the Department of Work and Pensions to support providers help people enter into and return to work. The strategy recognises the interconnectedness of housing, employment and mental health stating that both health and the Joint Strategic Needs Assessment (see below for explanation of JSNA) will take into account wider outcomes such as housing and the need for joint commissioning and pooled budgets by health and wellbeing boards,

health needing to integrate with other local services including housing. It also identifies that if mental health and housing are not properly integrated this could cause further treatment being required including readmission to hospital. The document also advocates new ways of commissioning to improve quality e.g. payment by results. There is also specific reference to homelessness services as the Government recognise that improvements in mental health are necessary to their plans in tackling homelessness.

The strategy is accompanied by a number of supporting documents

*Delivering better mental health outcomes for people of all ages*

Within this document the Government recognises the importance of stable housing and the need for the JSNA to include housing needs data from sources including Supporting People and housing and support providers.

*The economic case for improving efficiency and quality in mental health*

*Talking therapies a 4 year plan of action*

The Coalition Government have produced the following White Papers which set out their proposals for Health and Adult Social Care which also impact on the delivery of services for people experiencing ill mental health.

*Equality and excellence: Liberating the NHS* July 2010

*A vision for Adult Social Care: Capable and Active Citizens* November 2010

*Healthy lives, Health People: Our strategy for public health in England* November 2010

The Government has also consulted on:

*Transparency in Outcomes: a framework for the NHS* July 2010 (consultancy closed on the 11<sup>th</sup> October 2010) this set out 5 domains which included enhancing the quality of life for people with long- term conditions, helping people recover from episodes of ill health and treating and caring for people in a safe environment and protecting them from avoidable harm. The outcomes measures include those long term conditions feeling supported to manage their condition and their health, emergency hospital admissions for schizophrenia, unplanned hospital readmissions for schizophrenia and bipolar disorder, those in contact with secondary mental health services in employment, health of the nations outcomes scale for people with mental illness mortality from suicide and mental health inpatient suicides. The Government's response to the consultation was published in December 2010.

*Transparency in outcomes: a framework for adult social care* November 2010 (consultancy closed on 9th February 2011) which includes promoting personalisation and enhancing quality of life for people with care and support needs, preventing deterioration, delaying dependency and supporting recovery, ensuring a positive experience of care and support and protecting from avoidable harm and caring in a safe environment. The outcomes measures suggested for 2011-12 include measures drawn from the NHS and other non-council data sources. These include a number of measures that are applicable to services for people with mental illness, for example, proportion of adults with mental illness in employment and those in settled accommodation, number of people with long term conditions feeling supported to live independently and manage their condition, admissions to residential homes and emergency readmissions to hospital, delivering efficient services that prevent dependency i.e. the proportion of council spend on residential care and improving access to information on care and support, and proportion of adults who are repeat referrals to adult safeguarding services. The Government will be developing new measures for the future it is anticipated these will be non-compulsory but their function will be to support localities in measuring the effectiveness of the services they commission and provide.

The Government is currently consulting on

*Health Lives, Healthy People: Transparency In Outcomes Framework* December 2010 (closing date 31<sup>st</sup> March 2011) which sets out proposed public health indicators including the proportion of people

with mental illness in settled accommodation and in employment, smoking rate of people with serious mental illness, mortality rates of people with mental illness, suicide rate, proportion of council spend on residential care and hospital readmissions. The document Delivering better mental health outcomes for people of all ages outlines in greater details the outcomes that relate to mental health.

The DH is working to improve the outcomes of vulnerable groups through the *Inclusion Health Programme*, a National Inclusion Health Board is being established, whose key role is to champion the needs of the most vulnerable and to address health inequalities among the most disadvantaged.

### **Further information can be found below:**

Mental Health Act 1983

[http://www.direct.gov.uk/en/DisabledPeople/HealthAndSupport/YourRightsInHealth/DG\\_4014771](http://www.direct.gov.uk/en/DisabledPeople/HealthAndSupport/YourRightsInHealth/DG_4014771)

Mental Health Act 2007

[http://www.dh.gov.uk/en/Healthcare/Mentalhealth/DH\\_078743](http://www.dh.gov.uk/en/Healthcare/Mentalhealth/DH_078743)

No Health without mental health

[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_124058.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_124058.pdf)

Delivering better mental health outcomes for people of all ages

[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_124057.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_124057.pdf)

The economic case for improving efficiency and quality in mental health

[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_123993.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_123993.pdf)

Talking therapies a 4 year plan of action

[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_123985.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_123985.pdf)

Equality and excellence: Liberating the NHS July 2010

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_117353](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_117353)

Transparency in Outcomes: a framework for the NHS July 2010

[http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH\\_117583](http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_117583)

A vision for Adult Social Care: Capable and Active Citizens November 2010

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_121508](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_121508)

Healthy lives, Healthy People: Our strategy for public health in England November 2010

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_121941](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_121941)

Healthy Lives, Healthy People: Transparency In Outcomes Framework December 2010

[http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH\\_122962](http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_122962)

Transparency in outcomes - a framework for the NHS: Government response to the consultation

December 2010 [http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH\\_122947](http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH_122947)

Sitra's response to consultations can be found at [http://www.sitra.org/consultations\\_and\\_responses/](http://www.sitra.org/consultations_and_responses/)

### **Joint Strategic Needs Assessment**

The Coalition Government has indicated that Joint Strategic Needs Assessments (JSNA) will not only have an ongoing role but will be central to local commissioning decisions. Local authorities' and Primary Care Trusts have been under a statutory duty to produce a wide ranging and comprehensive JSNA since April 2008. In the Coalition Government's Health and Social Care Bill it is proposed that the JSNA will become the responsibility of the local authority convened Health and Wellbeing Boards which are being placed on a statutory footing. It's role is to become very significant with a statutory obligation that all commissioning Local Authority and NHS will be driven by the JSNA. The JSNA is defined by the Department of Health (DH) guidance as "a process that identifies current and future health and wellbeing needs in light of existing services, and informs future service planning taking into account evidence of effectiveness".

The purpose of the JSNA is to provide an evidence base that covers all aspects of the local population including health, **mental health**, housing, education, deprivation, economy etc, which will allow decision makers to see the current areas of highest need, and how these are likely to change in the future. By identifying these diverse needs in a single resource the JSNA enables local partners to work together and coordinate their planning so that their services are better placed to meet these current and future needs. The Health and Wellbeing Boards responsibility for the JSNA signifies a 'step change' the Boards will include GP consortia and in order to achieve better health and wellbeing and reduce inequality it is anticipated that it will require a broader range of contributors than some localities have previously involved.

The National Mental Health Development Unit has produced a JSNA tool kit for commissioners, partnership managers and third sector as a part of the Mental Health Commissioning Programme. The tool kit can be found at:

<http://www.nmhd.org.uk/silo/files/joint-strategic-needs-assessment-and-mental-health-commissioning-toolkit-2009.doc>

### **National Indicators 149 and 150**

Under the previous Government Local Authorities had to report performance on 189 indicators, although the Coalition Government has dispensed with this requirement, these indicators have informed the local priorities set and some of these indicators are included in the proposed health and social care outcomes frameworks (see earlier). Indicators that mental health services contribute to **NI 149** and **NI 150** are specifically looking at improving the employment and settled housing outcomes of adults with mental health problems as they are considered to be a key group at risk of social exclusion. This includes those aged 18 to 69 who are receiving secondary mental health services and who are on the Care Programme Approach. Settled accommodation includes supported accommodation and the employment Indicator identifies those in employment, looking for work and those seeking work as they are for example a student, long term sick or looking after family.

<b>NI</b>	<b>Description</b>	<b>Significant contribution</b>	<b>Partial contribution</b>
NI 51	Effectiveness of child and adolescent mental health (CAMHS) services	✓	
NI 119	Self-reported measure of people's overall health and wellbeing	✓	
NI 120	All-age all cause mortality rate		✓
NI 121	Mortality rate from all circulatory diseases at ages under 75		✓
NI 122	Mortality from all cancers at ages under 75		✓
NI 123	Stopping smoking		✓
NI 124	People with a long-term condition supported to be independent and in control	✓	

	of their condition		
NI 136	People supported to live independently through social services (all adults)	✓	
NI 149	Adults in contact with secondary mental health services in settled accommodation	✓	
NI 150	Adults in contact with secondary mental health services in employment	✓	

The full list of national Indicators and guidance as to their rationale and definitions can be found at: <http://www.communities.gov.uk/publications/localgovernment/finalnationalindicators>

A comprehensive list of all Local Area Agreements (LAAs) by region, up to and including the 2010 refresh can be found at:

<http://www.idea.gov.uk/idk/core/page.do?pagelId=8399555>

ROCC has an on line tool which is a guide to the NIs chosen by local areas in the South East. The tool enables providers to see which Nis specific client group services contribute to:

<http://www.rocc.org.uk/static/documents/Local%20Area%20Agreements%20Indicators%20Tool.xls>

### Resources evidencing the value of mental health services

- The **CLG** have commissioned a tool to enable local authorities to evidence the **financial benefits** of housing related support. National research has demonstrated considerable savings as the provision of housing related support services can prevent the use of most intensive costly public services. The national net financial benefit of the Supporting People Programme for people with mental health problems is £559.7 million. The tool can be found at: <http://www.communities.gov.uk/publications/housing/financialbenefitsguide?view=Standard>
- The **Office of the Third Sector** has developed a **Social Return on Investment (SROI)** programme that enables commissioners and providers to calculate the social return that investing in services providers. Forth sector Restart services which provides supportive employment opportunities for people with mental health problems demonstrated that every £1 invested in the project realised a social value of £1.57. Information on the programme and tool can be found at: [http://www.sroi-uk.org/component/option,com\\_frontpage/Itemid,65/](http://www.sroi-uk.org/component/option,com_frontpage/Itemid,65/)
- The **Department of Health** in its **Care Services Efficiency Delivery** programme has produced case studies demonstrating savings made by investing in support related housing services. The Manchester Methodist Housing Association next step project is a resettlement project for men with enduring mental illness. The project demonstrated an annual saving of £445,000. Case studies are available from: <http://www.dhcarenetworks.org.uk/csed/Solutions/supportRelatedHousing/?parent=5322&child=5324>

**Any report utilising the above tools will be more compelling if real life case studies are included, where it has been demonstrated that individual's outcomes have been enhanced due to their personal receipt of housing related support services.**