Councillor Virginia Cleaver Chair, Adult Social Care Scrutiny Committee Leicester City Council Norton HOUSING &SUPPORT

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Dear Councillor Cleaver

Statement of case regarding Leicester City Council ILS supported housing consultation.

Norton Housing and Support (NH&S) is a registered charity and has provided a mental health specialist supported housing service in conjunction with Leicester City Council (LCC) for over 30 years. As an organisation we tendered again for this service contract last year and were informed in July 2017 that we had been successful. The contract had been advertised on a three-year basis, to March 2020, extendable until 31 March 2022. We viewed this as an important opportunity to provide some stability to NH&S and more importantly our service users. The contract commenced on 1st October 2017.

On 11th June 2018, at Caroline Ryan and Tracie Rees' request, I met with them to discuss the future funding of the contract. I was informed that LCC might have to terminate the contract early in March 2019 due to the deteriorating financial situation. I was advised that it was likely LCC would no longer be funding preventative services as there is no statutory requirement to do so. Funding would instead be transferred to statutory services.

Our informal discussion led me to believe that if Leicester City Council (LCC) went ahead with this proposal it would mean taking the service in-house, halving the funding envelope and drastically reducing staff working on the service. If so, NH&S staff working on the contract would TUPE over to the Local Authority. I was advised that the need for the service and its viability, would be reviewed again in 12 months' time.

Caroline and Tracie asked that NH&S come back to them with views on the proposal, including implications for both our service users and the organisation as a whole. Our Trustees requested appropriate time to fully consider the matter and we responded formally on 3rd August 2018 as agreed with Caroline and Tracie. Despite the concerns expressed, we were informed that LCC would be going ahead with a formal consultation on their proposal. This consultation subsequently started on 15th October 2018 and will end on 14th January 2019.





At my meeting on 11th June, Caroline and Tracie had requested that I keep the potential proposal confidential, to avoid causing distress to service users. We respected this request, meaning that as an organisation we did not approach anyone other than LCC regarding our concerns prior to the 15th October.

This proposal is particularly concerning at a time when there is an increase in national recognition of the need for effective mental health support and agenda around Parity of Esteem between mental and physical health. Nationally there have been well publicised increases in funding to meet these needs.

Indeed, the current Leicester JSNA states that mental illness is the largest single cause of disability in the UK and that Leicester has high rates of risk factors associated with mental illness, also that the rate of death from suicide and undetermined injury is higher in Leicester than the England average. Alongside this, the Leicester Mental Health Partnership Board is looking to commence consultation on its new Mental Health Strategy document in January 2019. Two out of the three main priority areas for mental health identified in this strategy are a) housing and b) prevention. This proposal will severely reduce services in both of these areas.

The Governments review into the funding of supported housing which lasted for almost three years concluded this Summer (2018) with the acceptance that the present arrangements are the most effective. Importantly, it seems to have reestablished a national understanding that supported housing is critical, not just for the people who live there but for communities as a whole. It seems inappropriate at this time then for LCC to now look to change this successfully recognised model.

Alongside the consultation process, to which we will of course be responding, there are a number of questions which NH&S Trustees and Management Team have regarding both the ILS supported housing consultation process, and the specific proposal. Please also note that there is another organisation (Creative Support) that delivers ILS supported housing as part of this contract who also share our concerns.

As the Scrutiny Committee responsible for Adult Social Care your consideration of the following questions would be appreciated. (Questions in bold type).

Budget and finance:

• If the proposals are a direct result of financial pressures in this area why did the Council award an inflationary increase of 3.6% from April 2018 on this contract, which we were only made aware of via a letter from LCC on 22nd May 2018?

This was an unexpected and indeed unrequested increase which became even more surprising after my meeting with Caroline Ryan and Tracie Rees on the 11th June 2018, a meeting which was requested as early as 1st June 2018.

- How much money will actually be saved by cutting the ILS contract?
- Does this saving take into account the TUPE process and resulting redundancy costs?

Prevention vs. Statutory Services

LCC state that this proposal takes money out of preventative services and moves it to statutory services, which must be provided by law.

- How does this proposal fit in with the Care Act 2014 requirements which clearly state that prevention is a statutory service?
- How does this new proposal take into account the fact that money invested in prevention saves money on statutory services? Ergo, money moved from preventative services will actually increase the pressure (social and financial) on statutory services?

Please note that evidence shows that for every £1 spent on the NH&S ILS contract, it saves between £8 and £12 elsewhere; source independent Social Return on Investment March 2017.

The potential new service and the consultation process

There has been no detailed outline of what the new LCC service will offer, not even on the consultation questionnaire.

The term used on the consultation questionnaire (including the LCC website) to identify current ILS service users is that they are 'non-local authority tenants'. There is no mention of the fact that the service users have mental health needs and/or a learning disability. We believe this lack of pertinent information is *at best* misleading.

- Why does the consultation questionnaire not mention the important and pertinent information that current users of the service have ongoing mental health needs and/or learning disabilities?
- What will the new service look like in terms of:
 - > Hours of support for each service user per week?
 - Skills and experience of staff members?
 - How will the service meet the ongoing needs of service users or will support be time limited?
 - What will be the expected outcomes of this service?
 - Will the service be provided on an ongoing basis?

- How can this be a robust and transparent consultation process when the public do not know the client group it will affect, nor the new service which is being offered?
- How will the new service meet the complex and fluctuating needs of the current service users, alongside any potential new service users?
- As this is classed as a public consultation how has it been brought to the attention of Leicester people?
- What engagement opportunities have been offered for stakeholder's/partner agencies who will be directly impacted by these proposals?

Whilst assessments were carried out for all service users by LCC in January 2018, neither NH&S or service users received any feedback from these assessments, despite many requests. LCC assured us that these assessments are not being used to inform the new service. This would indeed be inappropriate as the information from these assessments would now be not only out of date, but incapable of discussion or potential challenge.

 How will the fluctuating and often complex needs of service users be met by this new service?

We feel there is a significant lack of information and understanding by LCC in terms of service users' needs. Also, that without the support that NH&S provides, there is a real risk of service users falling through the net and ending up in a safeguarding/crisis situation, including; homelessness, rough sleeping, institutionalised, breaking the law, suicidal, exploited, hospitalised, socially isolated.

 How will LCC ensure current and new service users sustain their tenancies, especially as the exempt property status may be at risk with this new service? Service users currently receive specialist intensive housing management support to support them in this area. Has this been taken into account?

Finally, thank you for your time and if you need any further information then please do not hesitate to contact me.

I look forward to the response of the Scrutiny Committee.

Your sincerely

Sue Cowling, Chief Executive.