26th September 2019

Kingsfund Homes and Health: how housing and health can work together.

Working Differently in Mental Health: Partnerships to make good housing everyone's business
Presenters:
Deborah Partington Executive Director of Operations GMMH
Shirley Wheeler Operational Support Lead GMMH
Rachael Byrne CEO New Care Models Homegroup
Charlie Norman CEO Mosscare St Vincents
Overview of the presentation
• Context of Greater Manchester and GMMH
• What we did and why
• Our partnership approach
• GMMH Housing and Mental Health Strategy
• Examples of good practice
Greater Manchester Health and Social Care Devolution

In Nov 2014 GM settled a historic devolution agreement which gives local representatives control over decisions previously taken at a national level.

GM has an ambition to become a self sustaining city region supporting growth and connecting GM residents to the benefits growth brings.

In February 2015 the 37 NHS organisations and local authorities in Greater Manchester signed a landmark devolution agreement with the Government to take charge of health and social care spending and decisions in our city region.

“Taking Charge of our Health and Social Care” describes how clinical and financial sustainability will be achieved in GM, aligned to the Five Year Forward View.

GM is committed to achieving parity of esteem for people with mental health issues, tackling access and waiting time standards and breaking down barriers to how care is provided.
Greater Manchester and GMMH District localities

Over 143 Sites
£319.3m Total Annual income
£9.975m 2018/19 Capital Expenditure

Living Wage
Employer 10,600 Members
22 Elected Governors
'Good' CQC Rating
Our Trust GMMH in numbers

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
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</thead>
<tbody>
<tr>
<td>Number of staff (headcount)</td>
<td>5,400</td>
</tr>
<tr>
<td>Approx. Number of Service Users</td>
<td>53,000</td>
</tr>
<tr>
<td>Over 143 Sites</td>
<td></td>
</tr>
<tr>
<td>£319.3m Total Annual income</td>
<td></td>
</tr>
<tr>
<td>£9.975m 2018/19 Capital Expenditure</td>
<td></td>
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<tr>
<td>£7.428m 2018/19 Normal operating Surplus</td>
<td></td>
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<tr>
<td>Living Wage Employer</td>
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<td>10,600 Members</td>
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<tr>
<td>‘Good’ CQC Rating</td>
<td></td>
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<tr>
<td>‘Outstanding’ CQC Well-led Rating</td>
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Improving Lives
Why Housing and Mental Health

Safe, secure and affordable housing is critical in enabling people to live well, work and take part in community life.

Having settled housing and accommodation is known to have a positive impact on our mental health.

It provides the basis for individuals to recover, receive support and help in the least restrictive environment possible.
GMMH Challenges

Housing is becoming increasingly important as part of our pathways as demand rises:

- long lengths of stay
- the use of out of area placements for both our acute and rehabilitation services
- mental ill health is reason for tenancy breakdown
- Issues with housing can be a reason for admission or readmission
- impact on delayed transfers of care across all care pathways
- National and local shortage of housing especially single occupancy
- Homelessness and mental health
The estimated cost of poor housing to the NHS in England is £1.4 billion per annum.
A partnership between Health and Housing
Working with GMHP and other partners for example Homegroup
**Actions taken**

**Developed a GMMH Housing and Mental Health Strategy**

In August 2018 GMMH commissioned Housing Associations Charitable Trust to lead a piece of work.

Involved interviewing key stakeholders from GMMH and wider health and social care economy.

In October 2018 we hosted a Mental Health and Housing Summit bringing together Housing partners and other key stakeholders from across GM.

The summit provided an opportunity to explore the issues GMMH were facing and the potential options available to help us address the needs.
Aims of the Strategy

We recognised the need to better engage with housing providers who can work alongside us in the community and address the pressures we face.

To Increase the supply of alternatives to high cost inpatient rehabilitation and clinical placements where these may be unnecessary.

To identify ways in which housing services can contribute to reducing pressures in acute mental health services, and within all parts of the care pathway.

To lay the foundations for a longer-term transformation of our inpatient services, with supported housing playing a more prominent role.
Five Key Priorities of the Strategy:

Priority 1
Integrate housing into our Acute Care Pathway, to improve pathway flow, reduce length of stay and reduce the need for out of area acute placements as well as improving health and social care outcomes, promoting recovery for service users

Priority 2
Work with commissioners and housing partners to identify new development opportunities for new models of service delivery and potential funding streams.
**Priority 3**
Reconfigure our Rehabilitation Pathway with a core role for supported housing that extends our services further into the community

**Priority 4**
Continue working alongside partners to address the mental health needs of people who experience homelessness and develop a GMMH Strategy to support this

**Priority 5**
To further develop the Trust Housing Strategy with internal and external stakeholders and ensure effective delivery across all pathways
Progress on implementation of the strategy so far:

- Shared our strategy with internal and external partners
- Established Steering group with representatives from local commissioners, GM Housing Providers and GM Health and Social Care Partnership
- Agreed key actions for the next 12 month to deliver on priority areas
- Developed and implemented good practice models including stepdown and specialist housing worker roles
Achievements to date

Housing Options advisors based in our Inpatient Services

A fairly inexpensive initiative was put in place for Manchester funded primarily through winter resilience monies which involved the secondment of two housing options advisers.

The posts are part of a pilot and involved the secondment to GMMH from Northwards Housing, who are the organisation responsible for 13,000 council homes in North Manchester and also manage the day to day Manchester Move operation.

The priority objective was to provide proactive support for patients delayed on acute mental health wards to navigate their way through the complex housing application processes.
Roles and responsibilities of housing options advisors include:

- Navigated the online application process and getting rehousing applications live.
- Facilitated service users to bid and view a property
- Liaised with housing and the NRPF team
- Challenged homeless decisions e.g. intentionally homeless decision
- Supported our statutory duty to refer applications for homeless
- Ensured the correct level of priority is allocated to service users applications
- Improved transition between ward and homelessness team to reduce risk of breakdown of move on.
- Offered opinions to ward team re best options available for move on
- Addressed barriers to discharge e.g. deep clean
Housing options advisors activity over a 7 month period

Table 1 Housing Options workers referral activity

<table>
<thead>
<tr>
<th>Manchester</th>
<th>Quarter 1</th>
<th>Quarter 2</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Referrals</td>
<td>87</td>
<td>124</td>
<td>211</td>
</tr>
</tbody>
</table>

Table 2 Destination at discharge

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Rehoused</th>
<th>Supported Housing</th>
<th>Returned home</th>
<th>Support with Homeless assessment and follow up</th>
<th>Temporary return to family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quarter 1 Dec - Mar 4 months</td>
<td>4</td>
<td>4</td>
<td>1</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>Quarter 2</td>
<td>13</td>
<td>23</td>
<td>5</td>
<td>56</td>
<td>20</td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>27</td>
<td>6</td>
<td>71</td>
<td></td>
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</tbody>
</table>
Housing options advisor case study

Female service users D had been struggling with her mental health for a number of years. As a result of her mental health problems, her children were accommodated by LA. D then lost her home due affordability as a result of loss of benefits. D was known to the town hall homelessness service, however was not able to stay in temporary accommodation due to not wanting to leave her dog. Instead D slept with her dog in a tent in the grounds of her previous tenancy. This led to numerous complaints and safeguarding concerns being raised by her neighbours.

D was admitted to a GMMH Manchester acute bed under a section of the mental health act. D wanted to live in her own accommodation, to have her dog returned to her care. D was supported by the housing options advisor to register on Manchester Move ensuring that the application was thoroughly completed and D received the correct level for priority. D was supported to bid regularly and in a timely way in order to have the best chance of securing a property.

D has now been rehoused and her dog has been rehoused with her into the property.
Achievements to date

Step Down Service
GMMH commissioned Homegroup a housing provider to develop a pilot step down 8 bedded house, Beech Range in Manchester central.

The aim of model was to provide a community based short stay of up to 12-weeks providing an alternative and less restrictive environment for service users who were medically optimised but not yet able to go home.

The facility was intended to form a critical part of the acute care pathway whilst increasing capacity and flow within Manchester’s acute wards and reducing the need for an OAP. As such the service was funded from the income allocated from Manchester OAP budget.
Over 143 Sites £319.3m Total Annual income

Living Wage Employer 10,600 Members

'Good' CQC Rating 'Outstanding' CQC Well-led Rating

https://youtu.be/WQI26_qADyY

https://wetransfer.com/downloads/8475a21235518bb036e0a2195777d0d420190924102756/c08c50351d7f423a57fd4917b4f3d8d020190924102756/7402bd
What makes Beech Range work

It was a welcome addition of 8 beds into the Manchester acute care pathway. Making access guaranteed

In the first 7 months of the pilot Home Group we were able to admit 24 service users to create capacity on the wards and were able to resettle 16 service users.

The service provides excellent value for money when compared to the cost of an independent sector bed and a NHS bed.

The service is CQC registered with a dedicated housing and support team on site 24 hours a day.

Home Group’s service provides a less restrictive option to support bed management and in turn improved service user experience and outcomes as a result.

Beech Range has demonstrated that “Step down” plays an important part in the measures taken by GMMH to achieve a reduction in the number of reportable OAPs.
Housing vulnerable groups – Beech Range
Any questions/Comments?

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