



Kent Joint Strategic Needs Assessment (Kent JSNA)

Kent 'Housing and Homelessness' JSNA Chapter Summary Update '2013-14'

Contact: Kas.Hardy@kent.gov.uk

Website: www.kpho.org.uk

Housing and Homelessness JSNA – 2013/14

The following is a pdf version of the JSNA chapter summary found on the Kent JSNA website.

Introduction

The Kent and Medway Housing Strategy 'Better Homes: localism, aspiration and choice' is a county-wide housing strategy setting out the approaches which will deliver the right mix of homes in the right places, under pinned by a number of elements which are linked to these approaches. <https://shareweb.kent.gov.uk/Documents/community-and-living/Regeneration/KFHS%20Refresh%20FINAL.pdf>

Theme 5 within the Kent and Medway Housing Strategy is "**Housing Need**", an ambition by the Kent Forum to 'support vulnerable people in housing need to fulfil their potential and live a high quality life through the provision of excellent housing and support services'. Although each local authority in Kent and Medway will have their own strategies to address housing need and homelessness, there are common themes running through them all particularly with regard to homelessness::

- To provide a range of accommodation for homeless households
- To ensure that there is available and appropriate support to meet the needs of a variety of client groups
- To assist homeless households secure and retain a good quality housing
- To tackle youth homelessness
- To improve the access to private sector housing
- To build upon the effective partnership working examples in the County

One of the key messages from the Kent and Medway Housing Strategy is that good quality housing is a vital component to ensure a stable family life. The county of Kent is diverse in terms of housing need and the housing markets.

For many families access to housing is difficult, the demand for social housing is far outweighed by the current supply; to add to this is the difficulty for some to access affordable mortgages preventing those with the desire to own a home from doing so. Changes to the social housing regime, the funding of affordable homes, the planning framework and the welfare system have exacerbated existing challenges in a poor economic climate, making it harder for the public and private sector to respond to these issues.

In Kent the choice based lettings (CBL) partnership, Kent Homechoice, is a scheme that has been rolling out across Kent since July 2008 and is now operational in all districts and boroughs in Kent and Medway. This scheme provides a comprehensive and easy to use CBL service, allowing all housing applicants in Kent and Medway to register an interest in available social homes through a variety of methods. This scheme is a great showcase for partnership working for the benefit of Kent and Medway residents and continues to improve and use innovative working methods to open opportunities for users and providers.

Access to affordable good quality housing in the rural areas is another key driver for Kent and Medway, a vital component for those who wish to remain local to family or support networks, who would otherwise struggle if they had to move to another community.

The role of the private rented sector will expand further in the very near future; there is now an increasing pressure for this sector to provide good quality housing for those unable to access social or affordable home ownership accommodation. Kent and Medway look to ensure that the private sector landlords are engaged and understand the needs of their potential and current clients, the local economy and their role generally in improving the pre conceptions of this sector.

Key issues and gaps

There are a number of key issues regarding housing:

- Rising number of homeless individuals/households
- Changes to the welfare system - the cap on local housing allowance/housing benefit, spare room subsidy in the social sector, and the changes under Universal Credit resulting in people being forced to move into cheaper accommodation and migrating into areas with cheaper private rented properties
- Overall availability, provision, and access to, good quality affordable housing across all sectors and the type and mix.
- Hidden homelessness – linked to over crowding and ‘sofa surfing’
- Provision of good quality support services to assist vulnerable client groups to maintain a tenancy within the social and private rented sector
- Management of ex offenders when leaving an institution – again linked to support services and advice about housing options before and after leaving prison and the increasing scarcity of affordable accommodation
- Young people aged 16/17 who are homeless/at risk of being homeless who are often part of hidden homelessness/sofa surfing
- Lack of affordable move on accommodation for people in Supporting People supported accommodation
- Availability of public sector land, released at low cost to assist in the provision of new affordable housing
- The reduction in the Commissioned Services Supporting People budget – the impact upon vulnerable groups to sustain tenancies
- Poor quality housing = poor health and impacts upon children’s educational attainment
- Asset rich and cash poor households, particularly for older people which may lead to poorly maintained and cold housing and excess winter deaths due to fuel

poverty

- Costly adaptations in housing/delayed discharge from hospital/readmissions to hospital
- Overcrowding in homes due to the lack of affordable housing especially for younger people who now remain in the family home longer
- Under-occupation due to the number of single person households as a result of an increase in an ageing population
- Localism Act will influence social rented housing, e.g. length of tenure etc, leading to more people trying to access private rented accommodation

1) Who's at risk and why?

Rough sleepers – In terms of rough sleeping in Kent, local housing authorities estimated that on a single night in 2012, there were 108 people sleeping rough. However, the data from street outreach services is probably more useful in terms of identifying trends than the annual one night snapshot.

A lack of housing impacts significantly on health and wellbeing. Common health problems experienced by rough sleepers include higher rates of TB and hepatitis, hypothermia, pneumonia, poor condition of teeth and feet, respiratory problems, skin conditions, infections, digestion and dietary conditions, rheumatism or arthritis, and mental health problems. There is also health implications related to high rates of substance misuse, and injury and illness from assault.

Rough sleepers are 40 times more likely to be unregistered with a GP. Engaging rough sleepers with primary health care services early on will help them access preventative treatment for minor injuries and illnesses, thereby minimising the need for emergency health care later once the condition has become entrenched or severe. It is also more difficult to achieve a continuation of care once rough sleepers have been discharged from hospital. 70% of rough sleepers are discharged back onto the street without their housing or on-going care needs being properly addressed. Linking in with other services such as mental health, substance misuse and social care can prevent exacerbation in health conditions and prevent total isolation.

Households in temporary accommodation – For those who are homeless and living in temporary accommodation, moving from one address to another can lead to links with primary health care services, such as GP's, dentists, pharmacists and midwives, being broken. Children in particular are more likely to miss out on immunisations, which can have serious implications on their future health. Children are also at greater risk of infection, skin disorders, chest infections and accidents. They can also suffer mental health problems and have problems at school.

Single homeless people - Especially those who will only qualify for shared room rate under local housing allowance. This will impact on a large number of the population being unable to access appropriate accommodation particularly in areas where market rents are high. Single homeless also being at risk because of the 'silting up' of

Supporting People supported housing available because of lack of move –on accommodation

Offenders - Who will be even more restricted with regard to accommodation options for the same reasons.

Benefit recipients - Changes to, and caps on, local housing allowance may result in people moving away from their local area where they have health/support networks in order to access cheaper accommodation, which in turn may lead to areas of deprivation importing even more need placing a strain on services.

People with a Disability - Families with children with a disability/older people/disabled people who need adaptations but are having to wait up to 2 years or more in some areas due to a finite sum of money available for Disabled Facilities Grants.

Young people – Young people who are homeless, most commonly due to family relationship breakdown, are vulnerable to a range of poor health outcomes and are likely to be socially excluded later in life due to homelessness. They often lead chaotic lifestyles with the need for housing and employment being more pressing issues for them than seeing their health as a priority. Young homeless people may also not have developed the skills to look after themselves and take risks without fully understanding the consequences. Young people who become homeless are more likely to have poorer life outcomes such as lack of education, substance misuse problems, teenage pregnancy, offending, repeat homelessness and are in danger of becoming the Troubled Families of the future. Young people leaving care are also at risk of homelessness and not being able to access suitable accommodation.

People with long term limiting illness - Who may have an extended hospital stay/several readmissions due to cold/hazards in the home remaining unaddressed.

Older people who are ‘asset rich/cash poor’ - Whose homes may be cold/falling into disrepair which affects mental and general health.

People living in poor quality private housing - Hazards in the home increase the risk of accidents, such as a fall, and mainly affects older people. Levels of hip fractures in the over 65s in Kent, are significantly worse than the England average. Housing conditions that contribute to falls include slippery floors, poor lighting, trip hazards such as loose carpets, difficulty getting in and out of the bath, clutter, and excessive cold.

Health conditions linked to non-decent private sector housing can include cardiovascular diseases, respiratory diseases, rheumatoid arthritis, anxiety and depression, hypothermia, and physical injury from accidents.

Increases in fuel prices can lead to a choice whether to ‘heat or to eat’ for many lower income households, impacting on well being and good mental health.

Families who live in overcrowded homes - Who may suffer poor mental health due to a lack of space and privacy, which will also include those households moving to cheaper more inferior accommodation due to the changes to social housing tenure and the ‘spare

room subsidy' in the Localism Act and the welfare reforms.

2) The level of need in the population

Homelessness - The most visible form of homelessness is rough sleeping. But it can also be hidden from view in the form of sofa surfing or squatting, and there are also those who are homeless living in hostels, night shelters and temporary accommodation.

In Kent, there were 3,255 homeless applications made to local housing authorities in 2012, of which 1,262 applications were accepted as homeless and in priority need.

Excess winter deaths - Preventable through improving heating, insulation and addressing fuel poverty. The Kent Health and Affordable Warmth Strategy (KHAWS) (2013-15) is in place to work across partners in Kent to put in place programmes to reduce excess winter deaths; link affordable warmth measures to the falls prevention framework; increase awareness amongst households and professionals of the health risks associated with excess cold and the services available; and help disadvantaged groups access all the benefits and services available to them including ECO and Green Deal.

Shortage of affordable housing

A large proportion of young adults on low to average incomes are finding that entry into home ownership is out of reach for them. The requirement for large deposits and difficulty accessing mortgages means that the average age of a first time buyer is now 37 and rising. House prices vary considerably in Kent with the average price of a house in Thanet at £171,501 and in Sevenoaks £384,907 (2012/2013). *K&MHS dashboard of indicators*

The provision of affordable homes is therefore very important in order that people in their 20s and 30s are able to have sustainability in their lives and also to avoid 'hidden households' and overcrowding.

One of the impacts of the credit crunch and recession is a significant reduction in the number of new homes being completed and the impact this has on the delivery of affordable homes. Whilst the Government has made available additional funding to assist with maintaining delivery of new housing, the total number of new homes delivered has been falling and the public sector has had a growing reliance on the private sector for the supply of new affordable homes (through s.106 agreements). The total number of affordable home completions in Kent 2011/2012 was 1593 and in 2012/2013 this had dropped to 1154. *K&MHS dashboard of indicators*

Access to the private rented sector

Access to the private rented sector for those on limited incomes is also becoming increasingly difficult, as these properties are now being sought by those who would have traditionally looked to home ownership previously. Changes in the benefits system and the capping of local housing allowance have also had an impact on reducing the amount

of available affordable accommodation.

Shorter tenancies and insecurity of tenure can also impact on mental wellbeing, and can discourage tenants from taking up home improvement initiatives or reporting problems to a landlord, for fear of being evicted.

Welfare Reform

The extension of the 'single room rent' from under 25 year olds to under 35 year olds is expected to lead to a growth in the demand for shared housing as people under 35 will not be able to afford to rent a property on their own. This may lead to a growth of houses in multiple occupation, (HMOs). It is important that HMOs are brought up to the relevant standard and are managed properly so that they do not impact on the surrounding communities with regard to Anti-Social Behaviour.

The introduction of Universal Credit is likely to lead to some households having a further reduction in their income, especially those who have already had their benefits capped, which will impact on the affordability of accommodation and lead to choices such as overcrowding if forced to move to smaller properties or staying put by cutting down on other expenditure such as food and/ or fuel. This may also increase levels of homelessness, particularly among young people if families cannot afford to keep them and overcrowding leads to family tensions.

3) Current services in relation to need

- Housing, Health and Safety Rating System (HHSRS) to risk assess homes for hazards such as falls, fire, cold and poor quality – private sector housing officers have enforcement powers if needed to ensure that landlords comply with these standards
- Disabled Facilities Grants (DFG) for adaptations for disabled/and or elderly
- Home Improvement Agencies (HIA) for adaptations, handyman services, health trainers
- Housing Allocation Schemes – to facilitate a move
- Accreditation Schemes – They are designed to improve the quality of the private rented sector by recognising well maintained and managed properties through awarding accreditation
- Licensing – For Houses in Multiple Occupation. The licence sets out certain standards of management for this type of property with an aim to identify properties in poor physical condition lacking basic amenities. The local authority can take over the management of the property if it is unable to grant a licence
- Selective Licensing - Selective licensing schemes can also be put in place in areas which are experiencing low housing demand and/or suffering from anti-social behaviour. This covers all private rented housing in the selected area
- Local housing authority duty to prevent homelessness
- Housing related support (floating support) provided by KCC Commissioned

Services to enable tenancy sustainment

- Tenancy training- to ensure that prospective tenants know their rights and responsibilities
- Protocols between the twelve local housing authorities and other agencies to prevent/ deal with homelessness and to give support to vulnerable client groups available on www.kentippbhousing.org

4) Projected service use and outcomes in 3-5 years and 5-10 years

Ageing Population: The population of Kent and Medway is ageing and there will be a significant increase in the older population. By 2026 Kent will have significant rises in its population of over 85 year olds, but will see a slightly bigger rise in its 65-84 year olds than the national average. Overall, the population in Kent is growing older at a slightly slower rate than the England average but is ageing. *Kent & Medway Public Health Observatory*

As the population ages more people will be living with long term conditions, such as diabetes and COPD, which may affect quality of life leading to more health and social care services required to meet the increase in need.

Household Income Growth and inequality: Earnings in the UK fell by 3.8% in real terms in 2010/11 because of falls in state benefits and lower levels of employment. In the medium to long term there is likely to be a much greater effect as a result of deficit reduction plans and growing unemployment. *K&MHS*. This, together with the changes to income as a result of welfare reform and the growing market in part time employment and temporary contracts, rather than full time employment, will increase the inequality in income distribution in the future. This declining affordability will mean that an increasing proportion of households will be unable to meet their needs within the market.

The private rented sector will therefore continue to play an important part in addressing housing need, however, generally, it is those in employment and not receiving benefits who are more able to pay higher rents and therefore access better quality accommodation. Local authorities may need to rely more and more on temporary accommodation to house those in greatest need.

Rising fuel costs continue to erode the disposable income for lower paid households, which may lead to an increase in poor health, poor nutrition and ill mental health.

Collectively the housing needs assessments that have been undertaken across the County, suggest that there is an annual need for around 12000 additional affordable homes; given that the affordable home completions in 2012 was 1154, there is likely to be an increase in 'hidden households' or households in temporary accommodation or younger people living longer in the family home.

Homelessness: Statistics for the quarter ending March 2013 show that the number of homelessness decisions made in Kent has risen by 25% compared to the same time one year ago; a rise of 29% in households accepted as homeless and in priority need, and an increase of 22% of households placed in bed and breakfast (B&B) accommodation. *DCLG P1E returns*. This is the 10th consecutive quarter which has shown an increase in the use of B&B which may show an indication of the shrinking amount of accommodation available for local housing authorities to access for their clients.

The lack of housing, economic downturn, cuts to the welfare system, expected migration from London boroughs into Kent and cuts to public spending all indicate that things are expected to get worse still in the short term, leading to a heavier demand on already overstretched services.

5) Evidence of what works

Please refer to case studies in the Kent and Medway Housing Strategy 'Better Homes: localism, aspiration and choice' http://www.kenthousinggroup.org.uk/Menu_Text_3.aspx

6) User Views

7) Unmet needs and service gaps

- Lack of co-ordination between housing, health and social care services (e.g. more referral streams, including housing in the assessment of needs for care and support, integrating housing into care pathways)
- Need to Increase sharing of information with partner agencies to better predict those at risk of needing interventions so that assistance is more effectively targeted (e.g. use of risk stratification)
- Greater awareness raising amongst partner agencies of what housing services can do to assist in this agenda and how to access the services on offer to increase take up (e.g. information exchange and promotional campaigns)
- Households in temporary accommodation are not automatically linked in with GP services, social care and other support networks.
- Rough sleepers have little or no access to primary healthcare
- Demand for adaptations to properties to enable people with a disability to live independently, to reduce the need for hospital and institutional care admission and to address delayed discharge from hospitals, nursing homes, etc, far outstrips the levels of funding available for such works via Disabled Facility Grants and Housing Revenue Account funding.
- A rapid response service to ensure older people who have had falls/ or who are at risk of falling have their homes assessed for hazards by private sector housing officers and are then quickly adapted rather than waiting for long term solutions
- Lack of incentives to encourage older people to 'downsize'
- Lack of available, affordable accommodation in the private sector for local

population of Kent, which will be exacerbated by migration from areas of London due to the benefit cap.

- Lack of smaller social properties for people to move into due to the spare room subsidy
- Lack of affordable homes for first time buyers

8) Recommendations for Commissioning

- Pilot a mobile outreach health clinic for rough sleepers providing basic health assessments, first aid treatment, wound care, basic prescriptions and health advice
- Introduce a homeless hospital discharge protocol in every district.
- Continue provision of floating support services (specialist and generic) to enable clients to sustain tenancies
- Joint commissioning of schemes for young people at risk/on the edge of care and a positive accommodation and support pathway
- Development of a countywide model used for prevention of homelessness for 16/17 year olds including a variety of support and accommodation types
- Commissioning of a homeless education programme within schools
- Partnership working/liaison regarding strategy development for tackling homelessness with induction training for staff across all agencies in Kent on the homeless protocols
- Better/improved joint working between housing health and social care partners to ensure that homes are warm and safe ensuring prevention of falls/COPD/Heart problems and to encourage good mental health amongst all client groups
- Develop a resourced hospital to home referral protocol between health, social care and housing, for inpatients and those in intermediate care requiring a return home to a safe environment (i.e. a 'safe room') using minor adaptations
- Pilot a Rapid Response Team using a 'triage' approach between the Ambulance Service, district nurses and HIA agencies for people who have had falls. Preventing falls will enable older people to stay living independently in their homes for longer, increasing their quality of life, preventing hospital admissions and residential care, as well as providing substantial cost savings to health and social care budgets. This supports the Kent adult social care Transformation Programme that aims to deliver better outcomes for less
- Release/re-commission PCT land/buildings for affordable housing

9) Recommendations for needs assessment work

Please refer to the Kent And Medway Housing Strategy for more information about need and gaps – *Better Homes: localism, aspiration and choice*
http://www.kenthousinggroup.org.uk/Menu_Text_3.aspx together with individual Housing

and Homelessness Strategies produced by the Districts and Boroughs in Kent.
For data please refer to *Kent and Medway Housing Strategy Dashboard of Indicators*

Key contacts

For Kent Housing Group (incorporating all Kent Local Housing Authorities and Major Registered Providers in Kent) – contact Partnership Managers:

Rebecca.smith@ashford.gov.uk or Jill.pells@shepway.gov.uk

For Kent Joint Policy and Planning Board (Housing) – strategic partnership between health, housing and social care, contact Joint Planning Manager:

Lesley.clay@canterbury.gov.uk

For Kent Homechoice – Choice Based Lettings partnership for Kent and Medway, contact Partnership Manager: alan.white@kenthomechoice.org.uk