

Greater London Authority Mental Health Specialist and Supported Housing Research

Case Studies

January 2025

Contents

1	Homes in Mind.....	3
2	LB Hounslow/ NWL Integrated Mental Health Placements Team	4
3	Lambeth Living Well Alliance	5
4	London Borough of Lewisham: a blended commissioned and non-commissioned pathway.....	7
5	LB Newham/ ELFT/ Look Ahead: Transforming the Mental Health Pathway.....	9
6	Look Ahead – Capital development using GLA grant	10

1 Homes in Mind

Homes in Mind has been developed by local mental health charity [Mind in Harrow](#), who became aware of the huge impact of housing instability on people using their services. They partnered with [Zigzag](#) (which supports voluntary and community sector organisations with asset management and delivery) and [Gollings Architects](#) to form a new charity, Homes in Mind. The charity aims to empower people with experience of mental health issues in defining mutually supportive housing.

Tackling the links between poor housing and mental health is also a priority for LB Harrow, and the council had identified half a dozen small and awkward sites dotted across the borough which did not meet the criteria for general development due to their size, shape and location. These included a garage site on the edge of a residential estate (the garages were either empty or leased by a person living outside of the borough), and a central, off-road plot encircled by residential properties which had been used by the council for storage. Such sites become a focus for anti-social behaviour, so there is broad community support in principle for their re-development.

A group of people identified through Mind in Harrow have been working with the architect from the very outset, to explore what they want from housing and to co-produce design decisions. The aim of this was to find common ground and build ownership through the process of engagement, not design for individuals' needs. Each site has a very different context, history and set of practical parameters, so the design (although co-produced with the same group) has evolved quite differently on each. The focus has been on how to achieve space and light, and a combination of privacy and shared space which promotes social interaction. These features reflect good universal design principles – they are not specific to people with mental health needs; though mental health can be particularly impacted where they are – or are not – in place.

The project sits on the edge of existing definitions and funding streams: it is community-led, however – unlike typical co-housing projects, the 'community' is not a pre-determined group of individuals who will personally fund and own the properties. All parties were clear that they did not want this to be a traditional supported housing project – the council because it did not want to commit to ongoing revenue funding or assume a duty of care for anyone moving on from the scheme; and Homes in Mind because it wanted to create an alternative, community-led, preventative model.

The model is one of a small (5-6 one-bed properties), mutually supportive intentional community, with referrals and additional support to be provided by Mind in Harrow, hopefully using grant funding. Assured Shorthold Tenancies will be given, with an expectation that these will be long-term but not permanent homes. Move-on decisions will be made by the community, based on individual circumstances – the expectation is that people will live here for around three years, but this will be applied flexibly.

Despite the availability of land, and careful work to engage and reassure existing residents, the project has encountered many barriers, becoming (in the words of the project team) 'a marathon, when it should have been a sprint'. These have included:

- Significant delays with the council signing the transfer of the land – solicitors questioning why they would give the land up for free, requiring evidence of social and financial value from the project.

- Accessing early-stage revenue funding to cover the design, co-production, planning and funding applications, etc. On the GLA’s recommendation, this was provided by Community-Led Housing, but they could only afford to cover 2 of the 6 original sites identified by the council, which then creates challenges with economy of scale, both for development and support delivery.
- Identifying Registered Providers who are willing to develop at this scale.

Homes in Mind is developing a toolkit to share its learning from the process to inspire and supporting partnership between local authorities and VCSO organisations in other areas to roll out a similar approach.

They hope to gain planning consent by the end of 2024 on the first two sites in Harrow.

2 LB Hounslow/ NWL Integrated Mental Health Placements Team

In Hounslow, there is an integrated team, hosted by the council in partnership with North West London ICB, to oversee all mental health placements and provide a joined up hospital discharge service. The team includes housing and social care professionals, and specialist mental health nurses who can assess and support inpatient rehabilitation and S.117 placements. The team also covers all the relevant office functions and partnership communications associated with brokerage, market development, ongoing management of the sector, placement administration and quality assurance. In many other London boroughs, these functions are distributed across different departments or agencies which creates inefficiencies and delays. Toni Camp, Senior Joint Commissioning Manager for Mental Health explains,

“It’s a coordinated team, so we are commissioning based on live knowledge of our patients. When services are not doing what they should be doing, we can share and act on that information”.

The integrated team manages all community and specialist inpatient placements for Hounslow clients (around 300 at any given time, both in and out of borough) and ensures the right pathway for Hounslow patients being discharged from mental health inpatient services (acute, forensic and specialist). They also work closely with the council’s Tenancy Sustainment and Homelessness teams to identify people for whom mainstream housing can work with the right support and those needing to move to a staffed setting.

Placements are almost all commissioned through spot purchasing arrangements. Whilst there is a recognition that unit costs are marginally higher when spot purchasing from private sector providers, the integrated team values the agility and responsiveness of the sector, which will develop new schemes in response to their requests, without requiring capital or revenue commitments. The integrated infrastructure enables the team to ensure the safety and quality of these services and with the major providers, arrangements also include regular monitoring and liaison meetings.

At the team’s fortnightly meetings, there is a strong emphasis on maximising flow through the pathway and preventing placement breakdown where possible – for example by offering advice

and support to providers when a resident is becoming unwell or obtaining urgent clinical input when needed. Where there are safeguarding concerns or other issues necessitating an urgent move, the team will generate options to ensure the individual is rapidly relocated to another suitable service.

The relationships built with independent providers mean that the team has been able to organically grow its move-on pathways. By monitoring needs, flows and ‘bulges’ in the pathway, they have been able to encourage some providers to develop their own move-on options and it is hoped that more will follow. In addition, a larger block of over 30 bedspaces, previously operating as a high support service on two sites, is being repurposed to cater primarily to move-on needs.

The team is also in discussion with local hoteliers about developing a new hotel-style model for people who are unwilling to accept supported housing but have complex needs including co-occurring substance misuse issues, history of aggression/anti-social behaviour and risk of self-neglect. The vision includes: 24/7 security/ concierge, cleaning and laundry services, access to hot meals and in-reach from community support and specialist providers; however, there is also a recognition that wraparound clinical support is essential, and arrangements for this have yet to be agreed.

3 Lambeth Living Well Alliance

[Lambeth Together](#) is a partnership of the voluntary and community sector, the NHS, Lambeth Council, and others, focused on improving health and wellbeing and reducing inequalities for people in Lambeth through an integrated health and care system. Formed in 2021, the partnership became part of the [South East London Integrated Care System](#) in 2022. Lambeth Together aims to work as a single team with a single budget, across primary and secondary healthcare and community services. This alliance structure enables more collaborative decision-making at both strategic and operational levels and makes it easier to invest jointly in innovative pilots.

The [Living Well Alliance \(LWNA\)](#) is one of the partnership’s eight delivery programmes; it supports people in Lambeth who are experiencing mental illness or distress. [Priorities](#) include increasing the number of people able to live independently and the number of people living in stable and appropriate accommodation. To achieve this vision, the LWNA has recognised the need for an integrated offer made up of health, social care and voluntary sector agencies. The core LWNA integrated services are:

Single Point of Access (SPA) – introduction (referral) service

The SPA acts as the access and triage point for mental health and related social care, voluntary sector and supported housing support.

Living Well Centres (LWC) – community mental health teams

The borough’s three LWCs act as a base in the community for multi-disciplinary teams, including psychiatrists, therapists, nurses, social workers, voluntary and community workers and people with lived experience.

Community Liaison & Support Service (CLaSS) – hospital flow/ discharge service

The Alliance has also streamlined the hospital discharge process so that people can move straight into supported accommodation without needing a further assessment.

The Alliance Rehabilitation Team (ART) – high needs placement support team

This multi-disciplinary team of voluntary sector staff, social workers, nurses, occupational therapists and consultant psychiatrists combine social care assessment with support and clinical care co-ordination. They provide wraparound support to people whether they are living in supported living/ housing, residential care, hostels or their own/ family homes. They work very closely with keyworkers in supported housing to provide support both to workers and the people they support.

The model grew out of Lambeth’s Integrated Personalised Support Alliance (IPSA), which successfully moved people with long-term mental health issues out of institutions and into more independent settings. The approach also aims to support and share responsibility with supported housing providers: “where mental health supported housing models can fail is where they are based on the idea that you can take a person with very limited knowledge, give them 5 days training and pay them very little money, and expect them to support very complex people” (Former Team Manager, now managing Staying Well).

The Living Well Alliance is responsible for commissioning supported housing services in Lambeth and does this via an alliance contract with providers which is overseen by Integrated Commissioning-Mental Health; NHS SE London ICB (Lambeth) and Lambeth Council. These supported housing services come under the umbrella of the Mental Health Pathway and have a Co-ordinator role attached to manage referrals and flow in and out and through the different support housing services.

Mental Health Pathway (MHP)

The Alliance also runs a Mental Health Pathway including a supported housing offer which it commissions. This includes 24 hour, daytime and visiting support models (enabling individuals to progress to lower levels of support), and specialist provision including forensic, long-term schemes, schemes which enable hospital stepdown, and schemes specialising in dual diagnosis. Referrals are received from the alliance’s integrated services, and a Multi-Disciplinary Team approach is used to identify an individual’s support needs. The aim is to use commissioned options first and stay in borough wherever possible.

Commissioners are conscious of rising demand for and cost of housing-related support. Meanwhile, traditional step-down pathways of supported housing can de-stabilise people by forcing them to move because their needs have changed; they also quickly become blocked where there is insufficient suitable housing to move on to. Although Lambeth still block and spot commissions a significant amount of supported housing, the aspiration is to transition to a ‘Home First’ approach wherever possible, in which multi-disciplinary support wraps around the individual to support recovery alongside a housing offer, or a return to a previous home.

Lambeth’s preferred option is to support people to live independently and have developed a range of commissioned community services to support this including:

Independent Living & Medication Service

Look Ahead are commissioned to provide floating support and/or assistance to manage medication to 140 people in the borough.

Staying Well Team

Local GP practices (usually GP-based Mental Health Practitioners) refer people whose mental health is deteriorating to this team of four specialist support workers. Some have psychiatric diagnoses – they might, for example, have been stepped down from community mental health services – but this is not a requirement. Living alone and experiencing psychosis are common risk factors. The team receives clinical supervision from a psychiatrist, and works flexibly and holistically with people, linking them into community support, helping them with prescriptions, etc. Around 10-20% of the team's caseload (currently 80, with potential to increase to 100) are struggling with housing issues and the team provides practical assistance to sustain or find alternative tenancies. This model can reduce crises which result in inpatient treatment (and often loss of tenancy) and facilitate flow through pathways, enabling people to move back to independent living from hospital and/or supported accommodation.

Brokerage and Resettlement Flats (BRiL)

17 BRiL flats have been purchased using social finance and are let at affordable rents to people who are ready to move on from supported housing or residential care. Supported by Personal Assistants to adjust to independent living, people typically stay for over two years.

Reablement Service

A responsive & flexible service provided to people in their own home which is able to offer a diverse range of social, well being and practical support with a level of support that is based on the individual needs.

4 London Borough of Lewisham: a blended commissioned and non-commissioned pathway

LB Lewisham provides supported housing via three pathways: mental health, single adults with complex needs, and young people. The mental health pathway focuses on people with serious and enduring mental health conditions and contains a total of 677 beds, of which 122 are funded (i.e. via a block contract): the mental health trust (SLAM) contributes just under a third of this funding. Around half of those in the single adults' pathway are also either current or past clients of the Community Mental Health Team.

There is a high level of need for mental health supported housing in the borough, with SLAM and LB Lewisham Housing both referring in. A waiting list of 50 people is typical, though there is excellent move-on through the pathway, including into independent social housing where appropriate. This is facilitated by a combination of council-owned stock, an allocations policy and system ('IMO') which places those ready to move on from supported housing in Band 2 (high priority) with no fixed limit of numbers, and oversight from a dedicated Pathway Manager. The Pathway Manager is based in the Commissioning Team and can therefore act as an intermediary between the placement provider and the Housing team, prioritising and advocating for move-on.

The council – in partnership with SLAM and SEL ICB - carried out a review of the mental health pathway between 2019 and 2024. There was a recognition that a lack of 24-hour supported accommodation was impacting on SLAM’s ability to facilitate timely discharge from inpatient units. Meanwhile, the council was under increasing financial pressure and was concerned about the safeguarding and financial risks from a burgeoning market of provider-led supported housing, attracted both by housing market factors and high demand. It was agreed that the number of 24-hour supported units would be increased, at the expense of the overall number of funded units, to meet the Trust’s priorities. This would be achieved by consolidating contracts and pooling public funding; whilst the overall loss of block contracted units would be mitigated by developing a new model with high-performing non-commissioned providers.

There are now three tiers of provision within the pathway:

1. Commissioned providers who tender to deliver services and whose performance is monitored closely through a combination of quarterly visits, data and incident reporting. They provide 122 bedspaces.

There are then a total of 555 bedspaces in the mental health pathway which receive no support funding from the council or SLAM. Exempt from Local Housing Allowance, they can charge higher rates of rent to provide services. This includes the following two groups of providers:

2. Three non-commissioned providers (QVT, Dinardos and Apax) with whom the council has developed a relationship of trust over time. These providers only gain access to the benefits of the pathway (including access to move-on, verification with Housing Benefit and access to other statutory partners), and in return offer 100% nomination rights to the pathway (overseen by the Pathway Manager), and provide lighter-touch performance data (e.g., serious incidents, voids and an annual self-assessment). The Pathway Manager can utilise the full resource of this tier of provision in just the same way as the commissioned bedspaces.
3. There is a third group of non-commissioned providers who have established themselves in the borough without consultation with the Council or SLAM. The council has recently appointed an officer to work with Housing Benefit and enforcement colleagues to better regulate this part of the market. Where these providers are assessed as good quality, the council encourages them to provide basic data and accept referrals from Lewisham Housing. Where these providers are assessed as poor quality, the council will work with the provider on improvements and in some cases look to close the service. A feature of the pathway model is that the relationship described in tier 2 is restricted to a very limited number of partners only.

LB Lewisham argues that the critical success factors of this approach are:

- Having a single pathway
- Joined up partnerships, including Commissioners, SLAM, Community Mental Health Team, Adult Social Care, Housing Options, Housing Benefit, Commissioned and Non-Commissioned Providers and Social Landlords.
- Prioritising support budgets (to meet higher levels of need, to facilitate discharge from inpatient units).

- Understanding the local system and promoting good practice.
- Offering preferred providers access to the pathway and its resources.

5 LB Newham/ ELFT/ Look Ahead: Transforming the Mental Health Pathway

A primary driver for a partnership review of supported housing provision for adults with mental health needs in Newham came from pressures facing the mental health trust (ELFT).

For example:

- 24% of people on mental health inpatient wards were ‘clinically ready for discharge’ – this was leading to delays admitting people, with 31 people in one month waiting in A&E for longer than 12 hours to be admitted.
- In February 2024, 58% of those clinically ready for discharge were delayed due to ‘housing’ issues.
- To manage this level of demand, in the first 6 months of 2024, the Newham directorate of ELFT was spending:
 - Over £376K per month on private inpatient beds
 - Over £8.6K per month on Bed and Breakfast/ hotel accommodation for those clinically ready for discharge with no ongoing care needs.

LB Newham was already accommodating around 300 adults with mental health needs in supported living, with an annual cost of around £10 million. 120-130 of these supported living placements were out of borough.

The response to this context was for the council, the trust and Look Ahead – a large specialist provider of care, support and housing – to work together to re-model existing mental health specialist supported housing provision to create a pathway. The pathway provides a range of models from residential care, through to independent living. A key part of the remodelling was to turn Newark Knok from a low-level support scheme into a medium-to-high needs scheme with 5 ward diversion beds, using joint investment by both NHS and council commissioners.

The pathway includes:

- **IBIS House** – a stepdown and crisis service commissioned jointly by ELFT and LB Newham, which supports people who are medically fit for discharge from mental health inpatient stays but have other barriers to discharge.
- **Magpie Close** – a high mental health supported living space with 16 bedspaces and 24-hour double staffing cover,
- **Newark Knok** – a 17-unit joint commissioned service with ELFT commissioning 5 units for crisis support; LB Newham funds the remaining bedspaces, for Newham residents with medium to high support needs
- **Liberty House** – a scheme with 10 bedspaces, currently an all-female cohort, benefitting from support staff on site between 8am and 8pm daily.
- **Jacamar House** – a 6 bed scheme for people who are largely able to live independently with minimal support; staff are on site Monday-Friday 8am to 8pm.

- **The Flying Angel** – provides 38 units of supported accommodation for people with complex needs related to mental health and/or learning disability, in a re-modelled seaman’s mission building, which also includes 10 artists’ studios on the ground floor. Look Ahead’s Newham Mental Health Team is based in the building, operating Monday to Friday, 9am to 5pm, supporting residents and a further 27 people living in the wider community at any given time. Housing-related support is spot purchased by LB Newham, based on individuals’ needs.
- **A new floating support offer**, developed to support residents to maintain or settle into independent tenancies in the community.

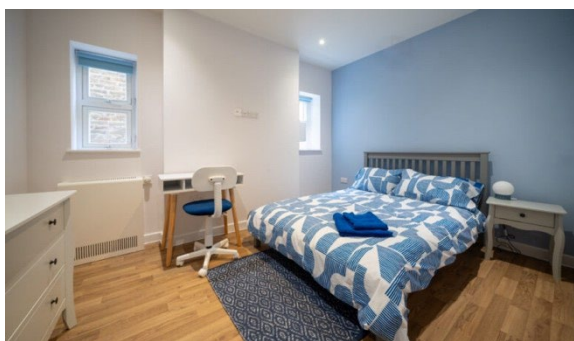
Interim evaluation findings suggest that this pathway configuration – especially the stepdown/ crisis service and the collaboration between the NHS Trust, the council and the specialist housing and support provider - has been a contributory factor in ELFT being able to reduce its monthly spend on private inpatient beds and Bed & Breakfast to zero.

The three partners are continuing to work together to consider how they might use the wider Look Ahead portfolio and make additional investments. Look Ahead is exploring the feasibility of developing new revenue and capital projects, for example for children and young people with mental health needs that offers services for multi borough placements.

6 Look Ahead – Capital development using GLA grant

Look Ahead is a registered provider of social housing, specialising in supported housing for adults and young people with support needs arising from mental health, learning disability and/or experiences of homelessness. They support nearly 4000 people in 121 services across London and the South East, own over 2000+ units of property, and employ around 1200 staff, mostly in support roles.

In September 2024, Look Ahead opened an innovative supported housing scheme providing specialist support to up to 12 young people, aged 18-25, with mental health needs in West London. Oaklands and St Kilda’s in Ealing comprise of two newly refurbished Victorian townhouses, each with generous communal spaces, landscaped gardens and separate garden annexes which can be used for therapeutic activities.



The scheme offers bespoke community-based rehabilitation to young people at risk of homelessness, increasing the capacity for supporting young people away from inpatient settings and reducing pressures on A&E departments.

The service is staffed by a highly trained, specialist staff team, offering 24/7 support.

Residents also benefit from expert support from NHS psychologists and specialist mental health charities. To develop a bespoke support framework, staff training and support package for the service, Look Ahead partnered with MAC-UK, a psychology-led organisation specialising in community support for young people, and KLIP, a consultancy led by the psychiatrist, Dr Sri Kalidindi CBE.

The project was supported by capital funding from the Greater London Authority, along with support from property industry charity LandAid, SEGRO, the UK Real Estate Investment Trust, Property Race Day, and The Story of Christmas Appeal. In total external partners provided over £1 million in funding.