

Models for Referral and Assessment

A number of SP authorities have become dissatisfied with the way in which vulnerable people access SP services, in particular:

- The assessment of the housing and support needs is not standardised;
- Significant resources are used by the provider sector in carrying out the assessment function, but with variable quality;
- Access arrangements into short term services have relied on informal arrangements between referral agencies and providers, which mean that those that need the services the most do not access them;
- There is no monitoring of how service users move through services (their pathway through services) and the level of move on for short term services is not co-ordinated;
- There is no coherent approach to reconnecting homeless single people with the authorities from which they came and no process for receiving those that need to be reconnected back to the host authority.

As a result of this dissatisfaction authorities have developed new approaches for vulnerable people to access SP services. These approaches have tended to focus on services for homeless people and short term services. A number of approaches have been developed for creating more coherent systems for accessing Supporting People services, which are described in the table below (the terminology does vary between authorities).

Model	Description	Examples	Implications
Single Gateway	This involves a provider acting as a single gateway into services. There are multiple referral agencies which use a single referral form. The provider is usually commissioned to cover a specific geographical area. The provider is responsible for carrying out the assessment using a single assessment form.	Essex County Council re-commissioned its floating support services. The county was split into 3 geographical areas with each covered by one provider. Each provider acted as a gateway into services.	This option does not require setting up a new team to carry out the assessment process. The assessment process is embedded in the service provided by the provider and is a cost efficient process. Standard referral and assessment forms need to be produced. This approach works best where services are commissioned across a specific geographical e.g. floating support.
Hub	Some authorities have set up a hub or central point of referral and	The London Borough of Lewisham has an intervention and	The focus of Hub services has been on the prevention of homelessness and access to

	assessment. This involves the local authority itself, or an independent agency funded by the council, carrying out an individual assessment and making a referral to a provider, These hubs can also provide advice to prevent homelessness.	assessment service for single people who are homeless. Brighton and Hove has an assessment team for those that wish to access SP services (single homeless people and non elderly). Kensington and Chelsea has an assessment service for specialist accommodation based services.	specialist services (e.g. drug and alcohol). The examples shown have been based on developing existing services into a referral and assessment service. For example in Brighton an existing homelessness team that carried out assessments of vulnerable individuals was re-modelled into a referral and assessment team for SP. Direct access provision has been excluded from this process.
One stop shop referral agency	This option involves a single referral agency becoming a one stop shop for referral into SP services. The referral agency does not carry out a full assessment and only screens suitable referrals. The provider is responsible for carrying out the assessment.	There are a number of examples of designated referral agencies acting as a one stop shop for specific services, for instance in Torbay (this is know as a hub). Some of these arrangements may predate the introduction of SP.	This option is similar to the Hub but with a much greater emphasis on the provider being responsible for assessment. The one stop referral agency is based on designating an existing agency to become responsible for making all the referral to specific services.

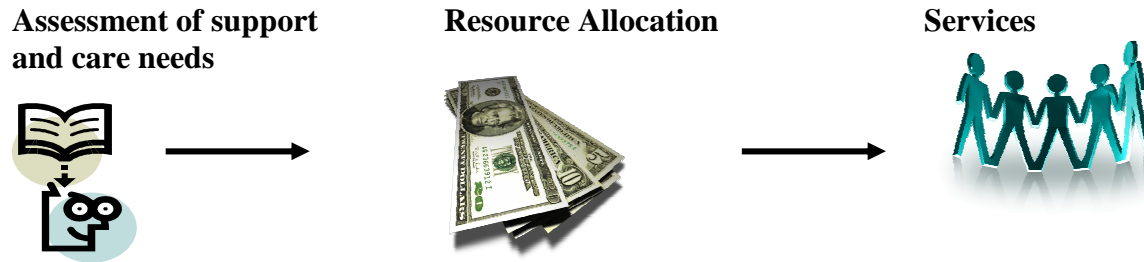
The outcomes for authorities can be described as follows:

- Vulnerable people can benefit from having a standardised needs assessment that provides a holistic assessment of their housing support care and health needs;
- There can be improved performance in homelessness prevention;
- There can be improved access arrangements so that hard to reach groups can access services;
- There can be improved outcomes for individuals as they go through a pathway to independent living.

A number of SP authorities participated in the Individual Budget (IB) Pilot, which has recently been evaluated. CLG carried out their own separate evaluation from an SP perspective.

The introduction of IBs does have implications for the way in which assessments are carried out. The IB pilots developed single assessment processes, which meant that they combined the assessment of social care needs with housing support needs. These assessments provided the information necessary to calculate an IB using a Resource Allocation Tool (RAS) (by awarding points for each area of need – with the points translated into a monetary value). The service user can either use the IB as a ‘virtual budget’ which is managed by the authority on their

behalf or be given the funding to directly purchase services. The purchasing process may require help from a broker or support agency. The process can be illustrated as follows:



The IB process is very different to the referral and assessment processes described above. The IB single assessment process needs to generate a more precise level of the input required and make a distinction between housing support and care. The RAS then translates this assessment into a single integrated budget. The assessment process needs to be managed by a care co-ordinator – where an individual is eligible for care services this would be a social worker who would be responsible for both the housing support as well as the care assessment. Where an individual is only eligible for housing support then an IB will need to be co-ordinated by an independent assessor (this could be a hub assessor if a hub has been established).

The CLG evaluation found that IBs are not appropriate for all types of services. For instance where an individual needs a fast response to a crisis then short term accommodation based services and floating support services should continue to be commissioned – these services could potentially increase their capacity by accepting services users with an IB. Furthermore, where an individual receives an IB, and is only eligible for SP services, then their support plan and IB will need to be reviewed by an independent assessor. The hubs that have been established only provide assessment at the entry point into services and do not provide an ongoing case management service. Therefore there is an issue about who can provide the ongoing review of IBs for those only in receipt of SP funding – unless of course IBs that are only SP funded are time limited.