

Cornwall Homechoice
Move On Policy
(Appendix 5 Allocations Policy)

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CORNWALL HOMECHOICE MOVE-ON POLICY

POLICY AND PROCEDURES FOR AWARDING ADDITIONAL PRIORITY FOR MOVE-ON FROM ACCOMMODATION BASED SUPPORTED HOUSING PROJECTS

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1.0 INTRODUCTION

- 1.1 This document outlines Cornwall Council's Allocations Policy with regard to move on from accommodation based supported housing projects.
- 1.2 Accommodation based supported housing provides support and accommodation for vulnerable clients normally for a period of up to two years. The project aims to support and encourage residents to achieve a level of independence whereby they are enabled to progress to general needs housing and to sustain a tenancy with minimal or no support.
- 1.3 Whilst all residents of supported housing projects are eligible to apply for re-housing through the Cornwall Council's Homechoice scheme, this policy aims to define a route whereby additional priority can be granted to some clients of specific accommodation based supported housing schemes, who are ready to move on to achieve greater independence in general needs housing.
- 1.4 The Council recognises that there are other vulnerable people in society who are not residing in supported housing. This policy therefore sits alongside other statutory duties that the Council has towards vulnerable groups who are given reasonable preference for housing under the allocations policy.

2.0 AIMS

The aims of this policy are:

- 2.1 To help make the best use of the available accommodation based supported housing stock in Cornwall.
- 2.2 To develop closer and more effective partnership working between accommodation based supported housing providers, Supporting People team and the Cornwall Homechoice Partnership.
- 2.3 To help address the housing needs of a vulnerable section of the community.
- 2.4 To assist with accessing social housing for those clients where alternative housing options are not viable.

3.0 QUALIFICATION CRITERIA

- 3.1 In order to be eligible to be included as a qualifying scheme under this policy, the supported housing project must:
 - Be in receipt of funding from Cornwall Supporting People;
 - Have achieved QAF level C or above;
 - Have achieved QAF level B in Protection From Abuse
 - Provide accommodation based support for a period of up to two years;
 - Operate in accordance with current legislation and with particular regard to the Protection from Eviction Act 1977 (as amended);

- Operate in accordance with current equality and diversity legislation. Projects that have achieved QAF level C and above are acknowledged to have the required equality policies in place.
- 3.2 The support provider will be expected to:
- Accept the criteria and conditions of this policy and;
 - Complete the Projects Registration form (Appendix A).
- 3.3 The purpose of the Project Registration Form (Appendix A) is to collect detailed information about the operation of the supported housing project. It will provide evidence of the need of the project for move-on accommodation for clients who are ready to live independently. Where the landlord of the scheme is different from the support provider at the scheme, it is the support provider which should complete the project registration form.
- 3.4 Cornwall Council as Homechoice service provider will decide which schemes are accepted as qualifying under this policy. Notification will be made in writing by Cornwall Council. Where a scheme is not accepted, reasons will be provided to the project in writing and there will be a right of appeal. The project may wish to provide evidence from Supporting People as to its suitability to be included in this scheme. The appeal will be referred to the Homechoice Partnership Management Group for consideration. This decision will be final.

4.0 REFERRAL AND DECISION-MAKING PROCESS

- 4.1 Prior to making a referral from the project the provider must show that they have:
- Arranged with the consent of the client to share relevant information with Cornwall Council's Housing Needs team;
 - Actively explored and documented all possible housing options prior to making a referral;
 - Arranged for a relevant support package to be in place for any successful applicant at the point of a formal offer of accommodation
- 4.2 Qualifying schemes may refer applicants for additional priority using the referral form (Appendix C) and must attach a copy of the applicant's current support plan and risk assessment information (both less than three months old). Referral forms should be sent to the Housing Needs Manager at (insert addressxxx)
- 4.3 Applicants referred under this policy must:
- Complete a Cornwall Homechoice Application form;
 - Be resident in a qualifying project in Cornwall, or have been referred by the Council to supported accommodation outside the county, and have been resident there for at least six months before the referral is made;
 - Be willing to accept and engage with any support package which is agreed with them for their move-on tenancy.
- 4.4 Applicants may be interviewed by a member of the Housing Needs team, together with their project support worker, as part of the assessment process.

- 4.5 Once the above tasks have been completed, the referral will be reviewed and a decision made by the relevant Housing Needs Manager taking into account all information provided.
- 4.6 Both the applicant and their support worker will be notified in writing of the outcome of the referral and reasons for decision. Where an applicant is not accepted a housing options interview will be offered and arranged as appropriate.
- 4.7 Where a referral has been refused, the referring Project Manager may request a review of the decision, which will be considered by an Area Manager, whose decision will be final.
- 4.8 Where an applicant has been accepted, the support provider will ensure that the Housing Needs Team is provided with the following:
 - An up to date support plan;
 - An up to date risk assessment;
 - Details of a provisional support package for sustaining permanent accommodation.
- 4.9 All applicants are notified of their priority banding under the Cornwall Homechoice Allocations scheme and details of the Cornwall Homechoice scheme and the Cornwall Council Allocations policy are available to all applicants. All applicants to Cornwall Homechoice are provided with guidance on how the process operates and how they can access assistance with the bidding process if required.

5.0 CRITERION TO BE APPLIED WHEN CONSIDERING APPLICANTS FOR ADDITIONAL PRIORITY FOR MOVE-ON

- 5.1 An applicant referred under this policy for additional priority may be awarded Band B priority for Move-on where evidence is provided that shows that housing options other than a social rented home would not be suitable for that person based on his or her individual needs.
- 5.2 In making the assessment, the Housing Needs Manager will review the support needs and risk assessment and consider whether the applicant would be unable to sustain a tenancy without:
 - Security of tenure;
 - Sub-market rents and;
 - A housing management service.
- 5.3 Applicants accepted as part of this policy will have their housing needs assessment re-banded to Band B and effective from the date of acceptance under this priority scheme. There will be no automatic increase of the banding to Band A under the multiple needs criteria. Each case will be considered on its own merits.

6.0 BIDDING

- 6.1 **Support:** Support workers may complete an assisted bidding form and/or bid on behalf of their referred applicants where appropriate.
- 6.2 **Applicants:** Applicants accepted under this policy may request further housing options advice and support, to help them to re-consider all their housing options.
- 6.3 **Monitoring:** Where applicants are awarded Band B priority under this policy but fail to bid or repeatedly refuse offers of suitable accommodation, the referral will be reviewed by the relevant Housing Needs Manager and support worker. This may result in the referral acceptance being withdrawn and/or other advice and assistance being offered.

7.0 VERIFICATION AND RE-HOUSING PROCESS

- 7.1 Should a bid be successful, the client's application will be verified by the housing provider who will require:
 - A copy of the Homechoice application form;
 - The applicants most recent support plan;
 - The applicant's most recent risk assessment;
 - Details of the ongoing support package;
 - A further commitment from the applicant to accept and engage with the support package;
 - A commitment from a support provider to provide the required support package.

In the absence of any of the above, the Housing Provider may refuse the applicant.

- 7.2 Should all of the above requirements be met, the applicant should be able to view the property with their support worker, and have a minimum of three working days to consider a formal offer before the tenancy commences, to ensure that the property is suitable for their needs. This time period may be extended at the discretion of the individual social landlord and in consideration of the needs of the client.

8.0 LIAISON AND CO-ORDINATION PROCESS

- 8.1 Cornwall Homechoice works in partnership with a number of different social housing providers across Cornwall. The accommodation offered to a successful applicant under this policy may be provided by any one of a number of partner landlords. Therefore, in order to ensure a smooth process and good liaison, each supported housing project will be required to nominate a contact person to make referrals and to ensure that the following tasks are undertaken:
 - **Making a referral:** Working closely with the client's support worker, the contact person should complete a referral form and a risk and support needs assessment with the applicant, and explain the conditions for referral;

- **Working with the Landlord's Housing Officer:** Once a property has been accepted, the contact person should liaise with the client's support worker and the landlord's housing officer to discuss the tenancy agreement and the agreed support plan;
- **Moving in:** The contact person will be expected to confirm that residents are prepared for moving in and that practical resettlement support (such as furnishing and benefits) have been set up as necessary;
- **Resettlement support:** The referring project must secure resettlement support for the resident moving on, in his or her new home, which extends for at least three months. This support may be provided by the referring agency as continuing support or by a floating support provider. During this period, the support provider will support and advocate where necessary between the client and the housing provider over any changes in circumstances or problems that may arise with the tenancy.
- The support provider will provide support according to a plan agreed before the start of the new tenancy. At the end of an agreed period (eight weeks after the tenancy commencement date), the tenant's continuing support needs will be reviewed by the support provider in consultation with the housing provider and any further support requirements identified.
- Where re-settlement support is provided by the referring agency the tenant, the support worker and the housing provider's housing officer will liaise to agree a hand-over to a floating support provider (where appropriate).

9.0 MONITORING THE MOVE-ON POLICY

- 9.1 Monitoring of the move-on policy scheme will be the responsibility of the Housing Needs team, who will monitor:
- Lettings statistics;
 - Scheme registration;
 - Referral requests and outcomes;
 - Tenancy sustainment data;
 - Diversity statistics;
 - Complaints/reviews;
 - Appeals
- 9.2 The Move-on Policy will be reviewed by the Cornwall Homechoice Partnership Management Group. The review will also include co-optees from relevant agencies.

APPENDIX A

Project Registration Form

Part I: General Information

1. Name of organisation
2. Contact Address.....
.....
3. Telephone number
4. Contact Person.....
5. Referral Year.....

Part II: Policy Information – Scheme Related

1. Aims and objectives of project.....
2. Management Structure.....
3. Client Group(s).....
4. Age Range.....
5. No of Units.....
6. Access Process (eg referral, direct access).....
7. Referral agencies use.....
8. Referral Process (method and duration of assessment).....
9. Criteria for admission (including reasons for any exclusions)
.....
10. Support provided to residents in project.....
11. Resettlement support available to residents.....
12. Type of occupancy agreement used (eg Licence, Assured
Shorthold Tenancy).....

Please enclose a copy of your tenancy agreement and house rules.

13. Maximum length of stay (if any).....
14. Do you receive Supporting People funds for this project? Yes/No
15. What is your project's percentage occupancy level each year?%
16. Please indicate the prospective number of move-on places required this year.....
17. Has the project achieved QAF level C or above; Yes/No
18. Has the project achieved QAF level B in Protection From Abuse Yes/No
19. Does the project operate in accordance with current legislation and with particular regard to the Protection from Eviction Act 1977 (as amended); Yes/No
20. Does the project operate in accordance with current equality and diversity legislation. Projects that have achieved QAF level C and above are acknowledged to have the required equality policies in place.

I have read and accept the Criteria and Conditions of the **Move-on Priority Scheme for Accommodation Based Supported Projects**, and wish to register under the Scheme for the year commencing April 2010/2011.

Signed:

Date:

Position in Organisation:.....

APPENDIX B

REFERRAL FORM GUIDANCE NOTES

This form should be completed by the project's named support worker in consultation with the person being referred.

Section I: Agency Details

The agency contact person would normally be the support worker who would complete the referral form and provide support during and after the referral process.

Section II: Referral Information

In answering question 9, projects should take into account any behavioural problems of the referred person and how this may affect neighbours or others in the locality. Special Needs may determine specific locality or non communal areas. Mobility difficulties may require ground floor accommodation/level access etc.

Section III: Support needs and resettlement

Projects should take a fairly broad view of support needs. This assessment could include areas such as budgeting and life skills, any physical or mental health problems, social relationships, or any other factors which may affect suitability of accommodation and ability to successfully maintain a tenancy.

Question 1: attach the referred client's current support plan and risk assessment information (both less than three months old)

Question 2: in order to explain which agencies are involved in meeting the referred client's needs as assessed, and to ensure there is joined-up working between these agencies.

Question 3: why must the referred client leave by this particular date? If the client has not received any housing options advice, then a referral will be made to the Council's Housing Options Team once this referral is received.

Question 4: What evidence is there to demonstrate that other housing options, other than a social rented home, would not be suitable for this client.

Question 5: Projects should list what assistance will be available to the applicant during the moving process from the project to the allocated accommodation. This could include preparation for move, help with obtaining furniture and equipment, removals, assistance with welfare benefits and connection and supply of power services.

Question 6: Refers to the resettlement support package provided by the project and any other support that will be provided to the applicant after re-housing.

Question 7: Should be used for any other comments about the referral. This could include information on employment, training or education plans, any comments the referrer wishes to make or any other personal details.

Section IV: Ability to function as a Tenant

To be completed with the applicant in order to assist in making a good allocation and entering into a sustainable tenancy.

Section V: Risk Assessment

To be completed so that all staff involved with the referral are aware of any potential risks. This information will also greatly assist in obtaining adequate support and an appropriate allocation of accommodation for the referral.

APPENDIX C

PROJECT REFERRAL FORM

To be completed by the project support worker with the applicant

Section I: PROVIDER details

- 1. Name of Provider:
- 2. Project/Scheme Address:
- 3. Provider Contact Person Details:

Address:.....

Telephone:.....

Section II: Referral Information

- 1. Client's Name:
- 2. Date of Birth:
- 3. Address:
- 4. When did the client move to this address?
- 5. How long has the client been known to your agency?
.....
- 6. Who referred this client to your supported accommodation?
.....
- 7. Please list all previous addresses held by the client during the last five years,
with dates:

Address:	From:	To:
i.		
ii.		
iii.		
iv.		

- 8. Client's telephone number:
- 9. Please list any ill health, disability or special needs and indicate how these
would affect their housing requirements:
.....
.....
.....
.....

Section III: Support needs and resettlement

1. Please provide a summary of the referred client’s identified support needs:

.....
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.....
.....
.....

2. Please give details of any other agencies involved:

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.....
.....
.....

3. From what date does the referred client require re-housing and why?

.....
.....

4. What housing options have been considered for the referred client?

.....
.....

5. What resettlement support will be offered to the referred client to assist them with moving into independent accommodation?

.....
.....
.....

6. What longer term resettlement support will be offered after move in? (This should include support offered by the referral agency and other agencies)

.....
.....

.....
.....

7. Any other relevant information of supporting comments:

.....
.....
.....
.....

Signed:
Applicant

Signed:
Referring Support Officer

Project:

APPENDIX D

DISCLOSURE AUTHORISATION

I understand that this information must be passed on to Cornwall Council's Housing Needs Team and relevant Housing Provider as appropriate if I require their assistance in finding accommodation.

I hereby authorise the disclosure of any personal details to Cornwall Council's Housing Needs Team and relevant Housing Provider as appropriate.

Signature: Date:
Applicant

Signature: Date:
Referring Support Officer

APPENDIX E

Referral Outcome

Part I: Referral Information

1. Client's Name:
2. Date of Birth:
3. Address:
-
4. When did the client move to this address?
.....
5. Name of Organisation:
6. Contact Address:
-
7. Telephone Number:
8. Contact Person:
9. Referral Year:

Part II: Referral Information Received

Decision:

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.....
.....

Reason for decision:

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.....
.....
.....
.....

Date decision letter sent to Applicant/Project Support Worker:

.....

Signed:

Housing Needs Manager

Date: