May 2014

Briefing:

The Care Act

Contact: Patrick Murray

Tel: 07824383213

Email: patrick.murray@housing.org.uk

Date: May 2014

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

1. Introduction and summary

The Care Act overhauls the social care system in England, reforming and streamlining much of the legislation on access to, administration of, and responsibilities for care services.

The Act introduces:

- A cap on care costs an individual will pay over their lifetime of £72,000
- National eligibility criteria to ensure that everyone across England is eligible for the same level of social care wherever they live
- Formal recognition of the rights of carers and support for those eligible

Alongside these reforms, the Care Act requires local authorities to introduce a deferred payments system with the aim that individuals will not be forced to sell their homes to pay for care in their lifetime. Currently local authorities have been able to offer this service, but not all have done so. Following the Act all local authorities will now need to do so from April 2015.

The Care Act also gives local authorities a new legal responsibility to provide a care and support plan (or a support plan in the case of a carer). For the first time, the Act provides people with a legal entitlement to a personal budget, which is an important part of the care and support plan. This adds to a person's right to ask for a direct payment to meet some or all of their needs. A personal budget is a sum of money allocated, usually by a local authority, for meeting an individual's eligible care needs which enables them to have some choice over how their care is delivered. The budget can be managed by a local authority, on behalf of the individual by someone else, or by the individual themselves. When a person receiving care chooses to manage the personal budget themselves, this is called a direct payment. Previously, despite the growing use of personal budgets in social care, only direct payments had a basis in legislation.

This briefing set outs what the Care Act's new duties for local authorities mean for housing associations. This briefing will cover the key principles of the Act which are relevant to housing providers, and the important new duties on local government:

- The well-being principle
- Duty to provide preventative services
- Duty to provide information and advice service
- Market-shaping duty
- Duty to integrate

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

- Asset-based approaches to social care

The Care Act makes a number of significant new reforms to social care. However it is important to note that it does not, as an Act, provide any new investment to tackle the persistent underfunding of the social care system. While the title of the Act refers to 'care and support', it does not seek to re-draw the boundaries between health, social care and non-statutory support services.

2. Federation lobbying

The Federation has been actively involved in lobbying on the Care Act as part of the Care & Support Alliance (CSA), a group of 70 charities and not-for-profit organisations representing many of the stakeholders in the social care system. As a result of this Federation lobbying, housing has been put at the heart of the Act. Key wins include:

- The suitability of living accommodation is now explicitly listed as part of the definition of well-being, which sets the tone for the whole Act.
- Housing is now explicitly referenced as part of local authorities' new duty to promote the integration of health and care.
- Registered providers of social housing are now explicitly listed as one of the partners a local authority must co-operate with when considering and planning a person's need for care and support
- We secured a commitment from the Care Minister, Norman Lamb, that housing will feature prominently in the Act's guidance and we continue to work with the Department of Health to shape it

3. Clause 1:– the well-being principle

The Care Act replaces existing Acts, such as the National Assistance Act 1948, and sets in place a new social care system that is based on the core principle of the well-being of the individual. Following lobbying by the Federation the suitability of living accommodation is listed in the definition in Clause 1 of the Care Act.

The practical impact of this principle being enshrined in legislation is that future court cases and judgements on social care issues will be required to adjudicate on what would improve a person's wellbeing, including the suitability of living accommodation, in achieving this.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

Furthermore, the challenges inherent in providing social care to a growing number of people mean that the social care system will need to change to provide more services in the community and in people's homes where this will maximise people's well-being, alongside residential care homes. The fact that for the first time the suitability of someone's living accommodation is a key consideration within the social care system means that housing providers are potentially well placed to help improve the well-being of more people through their services.

The definition of well-being (Clause 1)

In relation to an individual, means that individual's well-being
so far as relating to any of the following—

1. personal dignity (including treatment of the individual with respect);
2. physical and mental health and emotional well-being;
3. protection from abuse and neglect;
4. control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
5. participation in work, education, training or recreation;
6. social and economic well-being;
7. domestic, family and personal relationships;
8. suitability of living accommodation;
9. the individual's contribution to society.

4. Funding and key duties

Whilst the Care Act is an important part of reforming the Social Care system, it does not solve the large and persistent underfunding of care. Changing demographics combined with reducing local authority budgets mean that funding for social care is diminishing at the same time as demand is rising. The Kings Fund state that local authority social care budgets have been reduced by £2.68bn over the last 3 years and that the number of older people receiving care since 2009/10 has reduced by 26%[1]. The Act aims to create a more preventative, integrated system in order to drive efficiency savings but the scale of the funding challenge is stark.

There are, however, several major reforms related to funding which change the way costs are shared between an individual, the family and the state with the aim of protecting people from facing catastrophic care costs, as outlined below.

[1] http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/briefing-care-bill-house-of-commons-second-reading-kingsfund-dec13.pdf

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

Cap on individual care costs

The Government commissioned the economist Andrew Dilnot to recommend how to achieve an affordable and sustainable funding system for care and support, for all adults in England. Many of the proposals put forwards by Dilnot have been taken forwards by the Government.

The Dilnot review set out the challenges for the social care system posed by an ageing population, citing that 1 in 10 will pay more than £100,000 in care costs over their lifetime. As a result one of the proposals the Commission recommended was the implementation of a lifetime cap to guard against these high costs. The cap limits the open-ended risk that some people will face. The Government has set this cap at £72,000. There will be a lower cap for working age adults which has yet to be set out, whilst those turning 18 with existing social care needs will be entitled to free social care.

The cap on care costs introduced through the Care Act will come in from April 2016 and will work as follows:

- All individuals with care needs are entitled for an assessment by their local authority.
- If the local authority finds that an individual has eligible social care needs but they are not eligible for financial assistance, a care account will be set up which will monitor how much they have spent on their care.
- The costs that count against this cap are only those which the local authority would meet if the individual was eligible for financial support, and only those needs that meet the social care eligibility criteria. Costs above that which the individual chooses to pay, for example for a more expensive care home placement, will not be counted in the care account and therefore will not contribute to meeting the cap.
- All eligible costs will count towards the cap, even if they are shared between the local authority and individual in the event the individual qualifies for some financial assistance from the local authority as set out in the section on the means test threshold below
- When this account reaches £72,000 local authorities will then be required to fund social care costs beyond that.
- People will still be expected to meet up to £12,000 of general living costs if they are in a residential care home, unless their assets are below £17,000. This is in order to maintain consistency between those in residential care, and those receiving care at home who pay general living costs such as rent and utilities.

Means test threshold

The Government is also raising the means test upper threshold for assistance with the costs of a care home placement from the existing £23,250 to £118,000. This means that more people will be eligible for some social care costs to be met if they have to go in to a care home.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

Currently individuals in residential care only receive financial support if they have less than £23,250 in assets. If they have assets greater than £14,250 then they are expected to make a contribution of £1 from every £250 in assets they own from £14,250 to £23,250 every week towards the costs of their care. From 2016 these limits will be extended to £17,000 and £118,000. People will still need to contribute some costs from any income they receive. For housing associations who run care homes as part of their business this means more people will be eligible for some state assistance with the cost of their care.

The value of an individual's home is not considered in the means test if a partner is occupying the home. This is an existing policy and will not be changed by the Care Act.

People will still need to pay towards general living costs as set out above.

Deferred payments

The Act introduces a deferred payments mechanism to reduce the risk that people will have to sell their homes urgently to meet care costs . Instead the cost of an individual's social care will be met by the local authority who will then be repaid from the individual's estate. This will come into force in April 2015.

People will be able to defer the full costs of their residential care and accommodation, up to the equity in their home (plus other assets). The deferred payment will cover the cost of any registered care home the person chooses.

To qualify for deferred payments people will need to meet the following 3 criteria:

- They must be assessed by the local authority as needing residential care
- They must have less than £23,250 in assets not including the value of their home
- Their home must not be occupied by a spouse or dependent relative as if the home is occupied it is not taken into account when assessing someone's ability to pay for care, and therefore is not an asset which can be sold to pay for care

Local authorities will have some discretion to provide deferred payments to people in residential care who do not necessarily meet all of the criteria.

The House of Commons Library has produced a useful summary of FAQs on funding reform.

Assessments

As a result of the cap on individual care costs, local authorities will now be required to assess anyone who may have a social care need in their area. This new right for anyone with a social care need to request an assessment will be a major task for local authorities as they will have to assess many more people in their areas than previously was the case.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

For those individuals eligible for financial support who have social care needs, the local authority will be required to provide a personal budget for their eligible care needs.

Carers will also be eligible for assessment, and for the first time those who meet the threshold will be eligible for support from the local authority in carrying out their caring duties.

National eligibility criteria

The Care Act will create a national eligibility framework, to ensure that there is consistency across the country on who is eligible for social care. At present 87% of local authorities set their eligibility criteria at substantial or critical level of FACS. It is likely that the Government's new eligibility criteria will meet these needs at the level of substantial and above. This will mean that in some areas where moderate needs are currently met this will no longer be the case and some people will no longer be entitled to social care.

5. Prevention

The Care Act aims to create a new system of social care based on the principle of prevention. With rising demand and limited budgets the social care system needs to be recast to prevent demand escalating. As a result one of the most important new duties for local authorities is the duty to provide preventative services. Local authorities will need to consider what services, facilities and resources are available in their areas that people may benefit from, identify people who may have care and support needs in their areas that are not already being met, and identify carers who may have needs that are not being met. Local authorities may consider wider responsibilities outside social care when fulfilling this duty.

The duty to prevent needs for care and support is set out in Clause 2 of the Care Act, which identifies three main strands of prevention – preventing the need for care and support, delaying needs for care and support, and reducing the needs for care and support.

Preventing needs

This strand of prevention relates to the promotion of well-being in the broader population. In order to prevent the development of social care needs local authorities may look to provide high quality information and advice about services that operate in the community, or commission universal services that seek to promote well-being and improve people's independence. To achieve meaningful preventative services it will be important for local authorities to go beyond traditional public health programmes, or just providing basic information.

There is clear intent in the Act that the care system should help people maintain their independence and improve their well-being. This is evident throughout the new duties on local

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

government and the focus on creating a social care system which looks beyond a needs-based system. However the practical challenge posed by austerity means the precise impact of these aims on the market development of care services remains to be seen.

Delaying needs

This strand of prevention focuses on individuals who may have developed lower level social care needs, or may be in danger of doing so. Early intervention is crucial to delaying needs from escalating and ensuring people maintain their independence.

Local authorities will need to identify who may benefit from services aimed at delaying the onset of social care needs, including those who may not be in receipt of any care and support services. Preventative services that delay needs may include supporting carers to develop their skills and knowledge, adaptations to people homes, and good quality advice about specific services that may help people to maintain their independence.

Reducing needs

For those people who have developed social care needs it is important that prevention focuses on reducing those needs wherever possible, maintaining their independence and promoting their wellbeing. Preventative services which may be applicable here are those that aim to rehabilitate people or manage their conditions effectively, such as dementia cafes and adaptations or re-ablement services, helping people to improve their ability to live in their homes or return home from hospital to an environment which maximises their independence.

The duty of prevention links across strongly to the duty to provide information and advice, and the market-shaping duty. Ensuring people have access to good quality, timely advice can help build community resilience, and local authorities that use their duty to ensure a good quality choice of services effectively will look to create and safeguard services that prevent, delay or reduce the development of social care needs.

6. Information and advice

Clause 4 of the Care Act sets out the duty for local authorities to provide a comprehensive information and advice service for care. This is a particularly important duty as one of the key principles of the Care Act is to create a system in which people make informed choices about the services they access to improve or maintain their well-being. Information and advice are crucial in providing people with choice when they make decisions about their care. If people know the local services on offer, they can plan how to manage their illness or long-term condition and live independently for longer.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

The Act expects this service to cover a range of areas, including independent financial advice, but of particular relevance to housing providers, it must cover what types of care and support are available, for example: specialised dementia care, befriending services, re-ablement and personal assistance, residential care. The Federation has lobbied to ensure this service includes relevant housing related services, and a ministerial commitment was given that this would be addressed through the statutory guidance to the Care Act.

Statutory guidance will need to set out clear quality criteria for information and advice services. It is important that information and advice is relevant for and accessible to its audience. For example, a website or signposting service alone will not guarantee accessibility or a sufficient range of information. The CSA has also made clear that advice is an active duty, and people need to be assisted to access relevant advice and information.

The Federation is concerned about the extent to which people will be able to quickly access the range of information they need in a way that suits them, particularly in two-tier areas where for instance the housing authority might provide information on housing options entirely separately from advice on options for meeting care needs. The Federation believes that information and advice on suitable and specialised housing options should be part and parcel of supporting people on how best to meet their care need.

Local authorities, however, do not have to provide all the advice services directly themselves. There may be opportunities for housing providers to develop services that help people to maintain their independence. An example of the commissioning of a high quality information and advice service that supports the preventative agenda is the service provided by the YOU Trust, set out in Advice UK's report Commissioning Advice Services in Portsmouth. This detailed case study highlights how the service was developed through a close analysis of client's route through and between services. A central principle was that people were given the right advice first time, rather than being asked to come back to see a different advisor, as it was found that a significant number of people did not return. Importantly commissioners saw this information and advice service as a key support intervention, helping people to resolve their issues and self-manage wherever possible and therefore reducing pressure on higher cost services.

Given the scale of change proposed by the Act, the changes in initiatives in funding, commissioning, eligibility, assessment and advice-giving, housing providers could have an important role in ensuring their own tenants and residents understand the new social care system and what it means for them, whether or not they are a care provider themselves.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

7. Market shaping

Clause 5 of the Care Act puts a new duty on local authorities to promote diversity and quality in the provision of services. This market-shaping duty will be an important part of developing the new social care infrastructure on the ground. Local authorities will need to issue a "market position statement" identifying care and support needs across the population and how the local authority intends to buy those services. They will need to ensure a choice of high quality services that promote well-being and are focused on outcomes, and ensure services they buy in do not negatively impact on an individual's well-being, such as inappropriate short care visits.

In discharging this duty, local authorities will need to identify services in their areas across the broad spectrum of care and support services, including housing related support, and engage with providers, local communities and people needing care. When delivered effectively, local authorities should clearly communicate to providers on a range of areas, for example what need for specialist accommodation they envisage in their areas. Birmingham City Council's Market Position Statement is an example of a statement that sets out clearly the needs of the population, identifies the existing provision, and highlights potential gaps.

Where a market position statement sets out clear needs and genuine priorities, this offers an opportunity for providers to develop conversations with local authorities on the types and shape of services in their local areas. Given the linkages between preventative services and market shaping there may be potential opportunities for housing providers to develop partnerships that extend beyond the traditional social care market.

The Association of Directors of Adult Social Services and the Care Provider Alliance have produced a useful report on commissioning and market shaping: Finding Common Purpose. It sets out how providers and local authorities can use market position statements and other changes to market-shaping responsibilities could be used to create a more positive and strategic approach to local commissioning.

8. Integration

The Care Act puts in law a duty for local authorities to integrate services. Delivering a functioning social care system in the context of changing demographics and increasing financial pressure can only be achieved through integrating services and delivering more social care in the community and people's homes. The duty to integrate calls on commissioners to integrate services where they consider it will improve people's well-being.

The right for everyone to be given a personal budget as enshrined in the Act is another change attempting to drive integration. The theory is that personalisation gives people a choice over the

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

services they buy, and people will exercise that choice to buy services which meet all their needs in a holistic and integrated manner. Essentially this is a two pronged approach utilising market demand and the duty on commissioners to push greater integration in services.

The duty set out by Clause 3 states that local authorities must look to integrate with health services and health-related provision where local authorities consider integration will promote well-being, prevent or delay needs, or improve the quality of care and support available. This mirrors the corresponding duty in the Health Act 2012 which places responsibilities on the NHS to integrate services. Following Federation lobbying, housing is now recognised explicitly as "health related provision".

This duty to integrate acts as a useful lever for housing providers to pull on in local discussions to encourage local authorities to integrate health, social care and housing to support the development of services which improve the wellbeing of individuals. Housing associations can emphasise that their ability to provide access to people's homes, and deliver services in the home, is how to make integration meaningful to clients and carers.

The Better Care Fund and the Integration Pioneers

The £3.8bn Better Care Fund aims to drive integration between health and social care and expand the provision of community based services at scale and pace. It is a pooled fund is a transfer of money from the NHS to support and develop social care services that deliver health outcomes. The aims of the fund include reducing emergency admissions and supporting hospital discharge. Spending plans must be agreed by Health and Well-being boards (HWBs), Clinical Commissioning Groups (CCGs) and the local authority.

Fourteen areas have also been selected as "integration pioneers". The 14 areas consist of local NHS organisations, such as CCGs and NHS Trusts as well as other local bodies such as HWBs, who are working with different partners and client groups to break down local barriers to integration and highlight potential national issues. The Social Care Institute for Excellence provides a summary of what each integration pioneer area is focusing on.

On the wider subject of integrating health, social care and housing, providers may wish to look at the Housing Learning and Improvement Network website and the LGA's portal on integration.

9. Asset-based approach: – taking a community based approach to social care

Running through the Care Act is the principle that the system should look to build on individual's strengths, rather than just focusing on their needs. This is a major cultural change in many areas of the social care system, which has traditionally been based on a person's care needs first and foremost. Emphasising existing support networks, such as friends and families,

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

a range of formal and informal services, and what carers and individuals with care needs can do themselves is a crucial part of the new social care system. For example, this asset based approach underpins the thinking on preventative services in which the aim is to help carers and individuals with care needs develop the skills necessary to maintain independence and improve well-being. The approach of the Care Act more broadly is to develop social care legislation based around wellbeing, in the place of a complex system of different entitlements and needs criteria accumulated through several decades of legislation.

Seeking to develop community resilience by building on networks and strengths offers both a challenge and an opportunity for housing providers. The sector will need to consider carefully if some of the services currently in operation reflect this asset based model of social care. At the same time the focus on community investment potentially offers a strategic fit for housing providers. For those in the sector interested in this potential opportunity it will be important to consider how the networks and community assets housing associations have can be used to build connections and resilience in the population.

Further information on asset-based approaches is available from this RSA pamphlet, The Future of Social Care

10. Better protection for social care service users

The Care Act covers a number of other crucial areas. In particular there are two that are important for housing providers interested in, or already working in, the social care market.

Safeguarding

In the context of the Care Act safeguarding specifically relates to adults who have care and support needs.

The Care Act puts Safeguarding Adults Boards (SAB) on a statutory footing for the first time and requires every local area to have one. SABs must include the local authority, NHS and the police.

The role of the SAB is to ensure the protection of vulnerable people from abuse or neglect by co-ordinating and enabling the effectiveness of what each of its members does. They must produce published plans, and an annual update on progress must also be publicly reported. SABs are also responsible for arranging Safeguarding Adult Reviews in some circumstances where there has been a failure in safeguarding, such as a death of a vulnerable person due to abuse or neglect and there are concerns about the actions of an organisation represented on the SAB.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

NATIONAL HOUSING FEDERATION

Market oversight

The Care Act outlines the legal responsibilities on local authorities where a provider of care services fails. The case involving the care provider Southern Cross illustrates the potential impact of a large care provider ceasing to be able to carry out its functions for vulnerable residents. Southern Cross owned 752 care homes across the country, serving 31,000 residents but ran into financial difficulties and could no longer afford to keep their homes running. Local authorities had to step in at short notice to enable services to existing residents to continue.

The Government has recognised market oversight as a potentially increasingly important area of concern as some providers may struggle in the current financial climate, especially with reduced payments from local authorities.

Local authorities will need to ensure continuity of care for everyone in their area if a provider fails. They will have a temporary responsibility for anyone receiving care in their area, whether in a residential care home or in their own home. This includes people paying for their own care from the provider as well as those for whom the local authority may fund part or all of their care.

Central to the changes is an enhanced role for the CQC which will have more active oversight of the financial health of the largest care providers. The Care Act places a duty on the CQC to assess the financial sustainability of those providers local authorities would find difficult to replace should they financially fail. The Federation has been actively lobbying since these responsibilities were proposed in 2013 to ensure that organisations already regulated by the HCA are considered in a proportionate and reasonable manner.

The DH has confirmed that the CQC will take a proportionate approach to regulating providers that are also regulated by HCA to avoid the risk of duplicate or over-burdensome regulation where a provider is already regulated for financial viability as a housing provider by the HCA.

A proportionate approach will be vital as the new market oversight provisions will give the CQC significant new powers, including the power to request information from providers that they consider may be in danger and then share that with the relevant local authority to ensure continuity of care to individuals whose provider may fail. The Federation is continuing to work with the Government to ensure that the explicit ambition of a proportionate approach is realised. This is a potentially significant regulatory change for housing associations who provide care on a large scale. The market oversight provisions will be addressed as part of the 10 week public consultation on regulations and guidance to start at the end of May. The CQC will be consulting on their operating procedures in the Autumn.

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk

11. Next steps

The Act has almost completed its passage through Parliament. The key upcoming milestones are as follows:

- Consultation on draft regulations and statutory guidance from **May 2014.**
- Finalise regulations and guidance by **October 2014.**
- New statute will come into force from **April 2015**.
- Funding reforms come into effect from **April 2016**

12. Further reading

There are several resources that housing providers may find useful beyond this briefing on the Care Act more generally.

The Act itself is available on the UK Parliament website.

The Government has published a number of factsheets, offering 2-3 pages on core provisions within the Act.

The Kings Fund briefing, Paying for Social Care: Beyond Dilnot offers a good overview of the wider issues around eligibility and the challenges of funding social care

Contact name: Patrick Murray
Job title: Policy Officer
Direct line: 07824383213
Email: Patrick.Murray@housing.org.uk

Lion Court
25 Procter Street
London WC1V 6NY
info@housing.org.uk
www.housing.org.uk