

Public Document Pack

To: **Members of the Supporting People Commissioning Body**

Notice of a Meeting of the Supporting People Commissioning Body

Friday, 17 June 2011 at 10.00 am

County Hall, New Road, Oxford



Peter G. Clark
County Solicitor

June 2011

Contact Officer: **Sue Whitehead**
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Membership

Chairman – Councillor Debbie Pickford – Cherwell District Council

Councillors

Councillor Dorothy Brown	- South Oxfordshire district Council
Councillor Roger Cox	- Vale of White Horse District Council
Councillor Arash Fatemian	- Oxfordshire County Council
Councillor Verena Hunt	- West Oxfordshire District Council
Stephen Czajewski	- Thames Probation Service
Graham Stratford	- Oxford City Council
Fenella Trevillion	- Oxfordshire

Notes:

- **Date of next meeting: 16 September 2011**

The agenda is attached

AGENDA

1. **Apologies for Absence and Substitutions (if applicable)**
2. **Declarations of Interest (all members of the Body shall be responsible for deciding whether they have a declarable interest, in accordance with the Codes of Conduct of their own organisation , if applicable)**
3. **Petitions and Public Address**

Members of the public may speak on a matter included on the agenda by giving notice to the Contact Officer by the deadline of 9.00 am on the morning before the meeting.

Advice on addressing a meeting can be found on the Council's website.

4. **Minutes (Pages 1 - 4)**

To approve the minutes of the meeting held on 25 March 2011 (**SP4**) and to receive information arising from them.

For Decision

5. **Supporting People Strategy 2011-16 (Pages 5 - 70)**

Forward Plan Ref: 2011/087

Contact: Natalia Lachkou, Supporting People Programme Manager Tel: (01865) 894858

Report by Supporting People Programme Manager (**SP5a-c**).

The partnership reviewed Oxfordshire Supporting People Strategy in 2010-11 and set strategic and financial objectives for the programme in 2011-2016. Outcomes of this review were presented in the draft Supporting People strategy for 2011-16 which was discussed at the last meeting.

This draft strategy was subsequently used to inform further discussions with key stakeholders. Feedback generated by these discussions is summarised in a report attached at **SP5a**.

The Core Strategy Group at its meeting on 1 June discussed this feedback and agreed to revise the draft strategy as per recommendations set out in the report. Final draft of the strategy is attached at **SP5b**. This strategy is accompanied by a programme delivery report which is attached at **SP5c** for reference.

The officers have also recommended that future reviews of the strategy take place annually, starting from 2012-13. It is suggested that format for these annual reviews is considered further and formalised during the programme review taking place this year. It is also suggested that other recommendations set out in the report are taken forward by the programme review.

The Core Strategy Group RECOMMENDS that the Commissioning Body approves the Supporting People strategy 2011-16.

For Information

6. Supporting People Budget 2010-11 Final Report (Pages 71 - 72)

A smaller than originally planned surplus was achieved in 2010-11, as part of managing the impact of 5% annual reductions in Oxfordshire's Supporting People Grant.

The budget monitoring report attached at **SP6a** shows the Administering Authority achieved a surplus of £383 compared with the surplus of £29,047k forecast in November 2010.

This smaller surplus is the net result of various changes in the budget, some of which reflect the inherent uncertainty relating to forecasting the results of means-tests for long term chargeable services; others reflecting additional pressures that presented during the year in some service areas. Further explanation of these changes is given in the report.

The report shows the overall picture by client-group. The same picture broken down both by client-group and district for the benefit of individual partners is being produced. This report would be tabled at the meeting.

7. Supporting People Budget 2011-12 (Pages 73 - 76)

Oxfordshire County Council starts budget monitoring from May spend in each financial year.

The first budget monitoring report for 2011-12 is attached at **SP7a**.

This report shows the budget for the year and expenditure incurred in the first two months of the year. The administering authority is also working on designing a new report for showing expenditure by district area.

Report attached at **SP7b** is the first report showing progress made with delivering the efficiency savings programme. Meetings with providers commenced in May and will continue in June. To date providers have responded in a constructive and positive manner to these requirements, which is welcome. These discussions generated a number of proposals which identified a third of the required efficiency target. Further progress reports would be provided at future meetings.

8. Supporting People Programme Review 2011-12 (Pages 77 - 100)

Report attached at **SP8a** provides the first progress update on this review. Further information is provided in papers **SP8b-f**.

Members of the Commissioning Body are requested to comment on this report and provide a steer for the next stages of the review.

9. Taking Personalisation Forward (Pages 101 - 112)

Papers attached at **SP9a-c** provide information to start a discussion about how Supporting People programme could respond to the personalisation agenda as a whole. Similar discussions took place at the Core Strategy Group and Provider Forum meetings in June. Comments and suggestions received would be used to inform further work but the 'Benchmarking and Best Practice' working group, which has been tasked to lead on this aspect of the programme review.

Members of the Commissioning Body are requested to comment on issues raised in these papers and provide a steer for the next stages of this work.

10. Annual Plan 2011-12 - Progress Report (Pages 113 - 116)

A report attached at **SP10a** gives information about any items in the Annual Plan which the administering authority is not on track to deliver and a table is attached at **SP10b** showing progress against the Annual Plan.

11. Date of Next Meeting

The next meeting will be held in Meeting Room 3, County Hall on 16 September 2011.

SUPPORTING PEOPLE COMMISSIONING BODY

MINUTES of the meeting held on Friday, 25 March 2011 commencing at 10.00 am and finishing at 11.40 am

Present:

Voting Members of Commissioning Body:

Councillor Dorothy Brown	South Oxfordshire District Council
Councillor Arash Fatemian	Oxfordshire County Council
Councillor Angela Lawrence	Vale of White Horse District Council
Councillor Michael Gibbard (in the Chair)	Cherwell District Council
Graham McCartney	Thames Valley Probation Service
Graham Stratford	Oxford City Council
Fenella Trevillion)	representative for Oxfordshire Primary Care Trust

Supporting Officers and Members:

Oxfordshire County Council	
Legal & Democratic Services	– Sue Whitehead
Social & Community Services	– Simon Kearey Natalia Lachkou
Cherwell District Council	– Gillian Greaves
South and Vale of White Horse District Councils	Paul Staines
West Oxfordshire District Council	– Lesley Sherratt

The Committee considered the matters, reports and recommendations contained or referred to in the agenda for the meeting, together with a schedule of addenda tabled at the meeting, and decided as set out below. Except insofar as otherwise specified, the reasons for the decisions are contained in the agenda, reports and schedule, copies of which are attached to the signed Minutes.

8/11 COUNCILLOR VERENA HUNT

The Chairman advised that Councillor Verena Hunt had replaced Councillor Hibbert-Biles as the West Oxfordshire representative on the Commissioning Body.

9/11 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS (IF APPLICABLE)

(Agenda No. 1)

Apologies for absence were received from Councillor Verena Hunt – West Oxfordshire District Council.

10/11 MINUTES

(Agenda No. 4)

The Minutes of the meeting held on 20 January 2011 were approved and signed.

In relation to minute 4/11 following assurances that the timescale for the review of services for people with physical disability was achievable it was **AGREED** that the timetable considered by the Core Strategy Group, together with more detailed information where available, be circulated to Commissioning Body members.

11/11 SUPPORTING PEOPLE STRATEGY 2011-16 AND ANNUAL PLAN FOR 2011-12

(Agenda No. 5)

During discussion of the Strategy members expressed the view that the document was rather long and could focus more on positioning for the future.

It was suggested that there needed to be some statement in the Strategy of the relationship of the Supporting People Programme to the Health & Wellbeing Board. Some concern was expressed at future arrangements for supporting people and the fear that the role of District Councils could be reduced or phased out. It was noted that any statement on governance would also need to take account of the changes to the NHS and the introduction of GP Commissioning and need to engage with GP Consortia.

In revising the Strategy in the light of comments it was suggested that it would be useful to keep firmly in mind the role and purpose of the Strategy. It needed to focus on the delivery of vital services at a time of very reduced funding. It needed to set out priorities and the delivery of those priorities by the resources available. It was therefore suggested that a shorter tighter document focussing on the battleplan and direction of travel was needed. Celebration of achievements should be dealt with separately. There should be a section on future governance.

The Commissioning Body considered the implications of delaying approval of the Strategy and agreed that the current Strategy be used as an indication of direction of travel until the new Strategy was agreed.

During discussion of the Annual Plan various views were expressed over the way in which the changes necessary to the programme budgets should be set. The Options set out were considered and following lengthy debate support was given to the principle of a 2% reduction from each service but amended taking into account the ability of individual services to achieve the saving. Negotiation of the figures should be based on 3 principles – transparency, efficiencies (not translating into reduction of services) and support for the strategic direction of travel. There was an understanding that where more can be gained that this be reinvested in the priorities (identified as mental health, generic and floating services.) Offender services were also mentioned.

It was **RESOLVED**:- that

(a) the Supporting People Strategy 2011-16 be redrafted taking account of the comments today and that there be further informal discussion with a view to the Strategy being submitted to the meeting on 17 June for formal approval; (b) in the meantime the existing Strategy continue to be applied as the direction of travel for the Supporting People Programme;

(c) consideration be given to the appropriate method of celebrating the achievements of the existing Strategy,

(d) approval be given to the budget for the Annual Plan 2011-12 as set out in Annex 2 on the understanding that the individual budget headings were indicative and that movement was expected based on continuing work by officers based on the principles and priorities identified by the Supporting People Commissioning Body;

(e) that a position update be submitted to the next meeting.

12/11 SUPPORTING PEOPLE BUDGET REPORT 2010-11

(Agenda No. 6)

The Commissioning Body considered the detailed budget monitoring reports and noted that the underspend was projected to be just £7,000.

It was suggested that consideration be given to adding a comments column to the tables in future reports to explain the true position in terms of areas shown as receiving no funding for particular programme areas.

13/11 ANNUAL PLAN 2010-11 - PROGRESS REPORT

(Agenda No. 7)

The Commissioning Body noted the progress report.

14/11 DATE OF NEXT MEETING

(Agenda No. 8)

The Commissioning Body confirmed that the next meeting be held in Meeting Room 1, County Hall on 17 June 2011 at 10.00 am.

It was **AGREED** that future meetings start at 10.00 am.

15/11 MINUTES OF CORE STRATEGY GROUP

It was **AGREED** that in future Commissioning Board members receive a copy of the minutes of the Core Strategy Group.

16/11 GRAHAM MCCARTNEY

The Chairman noted that it was Graham McCartney's last meeting and expressed the Commissioning Body's congratulations on his new role and their regret that he was leaving together with their thanks for his input during his time as a member on the Commissioning Body.

..... in the Chair

Date of signing 2011

.....

SUPPORTING PEOPLE COMMISSIONING BODY – 17 JUNE 2011

Supporting People Strategy 2011-16 – Feedback report

Progress update

1. We requested formal feedback on the latest draft of the strategy. This document had been revised following comments from the March meeting of the Commissioning Body and split into two separate documents.
2. We sought comment on the direction of travel for the programme.
3. We received seven formal replies by Friday 20th May – 3 provider, 1 service user group and 3 commissioning partners. We have also received three further replies, all from commissioning partners, by 1st June. We believe that this number reflected the fact that the draft strategy has been co-produced and had already gone through a number of revisions in the light of discussions at CSG, CB and provider forum in the last year.
4. The responses were greatly received and the comments appreciated. Thank you.
5. The full record of submissions is available on request.

Feedback

6. *Context*: The first few of sections of the draft strategy (1. Introduction; 2. Oxfordshire context in 2009-11; and 2.1 Key facts and figures) were generally accepted.
7. *Strategic priorities*: We received quite a few responses concerning the next few sections (3. Taking the programme forward in 2011-16; 3.1 Vision and values; and 3.2 Strategic objectives). They can be characterised into the following three groups: changes; requests; observations, questions and concerns (see below).
8. *Delivery*: The remainder of the responses concerned the delivery aspects of the commissioning plan and were related to the strategic priorities.

Overall Summary of Responses

9. *Changes*

- **Outcomes**: (Not) in Education Employment or Training (NEETS) – there needs to be a stronger statement of how this is to be tackled- strategically and then in planning and partnerships

- **Accommodation:** How accommodation based services are de and re-commissioned and their relative importance to floating support services
- **Partnership:** Need to get working together right. Peer/service user input needs to be developed. There needs to be more structured linking up of associated services (CAB) and group efficiencies

10. Requests

- **Strategy:** more detail on process and timings of review. General formatting issues
- **Savings:** Open book accounting – how efficient are providers?
- **Clusters:** Definitions and implications – will they improve things or make some groups invisible? Need strong buy-in by statutory commissioners

11. Observations, questions and concerns

- **Housing related support:** Concern over perceived/potential prioritisation of statutory services over non-statutory. Is housing related support becoming a preventative but secondary function?
- **Funding:** Concern over how reduced budget will affect services. Also how changes (e.g. HB rules) will affect services. Local(ism) impact
- **Personalisation:** Concern around personalisation developments, how to do it and safeguarding

Analysis of responses

12. The observations, questions and concerns reflect the uncertainty of the current political and financial situation. There are also a number of potential national policy developments on the horizon. The worries are real and are being felt across the sector. The perception that housing related support might be less important should be seen in the light of the increased co-commissioning using diverse funding streams. This demonstrates an ongoing commitment to retaining housing related support from within the partnership.

13. With regard to the requests, a number have already been addressed.

- More information has now been provided to the Core Strategy Group on the detail of the review process
- We already have the contractual facility to gain more budgetary information from providers and will be looking at taking this forward more often in future

14. The definitions and implications of the “clusters” are more difficult to ground as it can be seen as both useful and potentially confusing depending on your perspective. It is an important observation and may need to be revisited. The “clusters” should be seen in light of their relationship to the care pathways that lead through them, rather than as barriers; also to the preventative effect that they have to various funding streams.
15. The outcomes, accommodation and partnership issues are quite clear and are subjects that we all have been struggling with for some time.
16. There is a synergy between the need for more defined outcomes, the personalisation agenda and partnership working. This is reflected in our vision and values and is covered by the current strategic objectives.
17. However the well being and aspirations of our service users should to become more of a focus for commissioners and providers. The responsibility and engagement that service users share in return for the support they receive needs to be translated into how we do business. Do the strategic objectives finesse and highlight this clearly enough though?
18. The links between the Supporting People Programme and related community and education fields need to be strengthened. The partnerships we currently have could be wider and deeper.

Recommendations

- An additional strategic objective is adopted reflecting the compact that we have with service users.

“Work in partnership with service users to engage them in developing self reliance, respect and social connection”

This additional objective has been inserted after the first strategic objective (see revised section 3.2 Strategic objectives).

- The capital development programme for supported accommodation services should be included in the review process in order to make sure that we co-ordinate this work in future
- More formal arrangements and partnerships need to be developed between the Supporting People Programme, providers and the wider social, educational and training sectors (voluntary and statutory). This can be achieved through performance/outcome targets via contracts and can be picked up as part of the strategy review process
- The table of content for the document has been revised (see revised Table of content) to indicate more clearly the purpose of each section. This would also facilitate the process of refreshing the strategy in

SP5a

future, for example by updating local context and/or adding delivery plans for future years, once these have been produced.



Oxfordshire Supporting People Strategy 2011-2016

**How we will increase and sustain
positive impact made by
Oxfordshire's housing related
support services**

Final draft

June 2011

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Final draft

1. Introduction

Key facts

Oxfordshire Supporting People programme commissions essential preventative services for 11,500 vulnerable people who need support to secure and sustain a stable home and lead independent lives for as long as possible.

It funds more than 100 services and nearly 1,000 direct payments for older people, with a budget of just over £16 million.

It is being overseen by the Commissioning Body, members of which represent six local authorities, local Primary Care Trust and the Thames Valley Probation service and benefits from a strong and mature partnership between these organisations. In 2010-11 it started to formally report on its business to the Oxfordshire Health and Well Being Board.

The programme is administered by a team of 8 officers, employed by the county council as the administering authority, who among other duties lead on service user involvement, purchase services on behalf of the partnership and manage 40 contracts with 30 provider organisations.

At the point of writing, the programme is about to enter its ninth year of existence which gives us a great opportunity to look back, reflect on key achievements to date and, most of all, plan for the future.

Role of housing related support

In 2008 the Oxfordshire Partnership published a Sustainable Community Strategy which contained a set of pledges which the Oxfordshire Partnership made to deliver the things the people of Oxfordshire wanted.

The Supporting People partnership's work relates to the pledge "Improve support and opportunities for independent living"¹.

The focus of the Supporting People partnership remains on delivering housing related support services, which help people to live independently either by helping them to sustain their independence if it is under threat or to recover it if they have lost their home for one of many reasons.

Housing related support is a distinct set of activities, different from health care and social care, different too from routine housing management carried out by social landlords for their tenants.

But housing related support is important in many ways: it helps to meet health, housing, social care and community safety goals.

For this very reason the work of the Supporting People partnership overlaps with other partnerships such as the Oxfordshire Health and Wellbeing Partnership and assists local housing authorities in meeting their statutory housing and prevention of homelessness duties.

In the current fast changing social policy landscape, it remains more important than ever that our plans for the future are closely linked to the new emerging strategic and commissioning structures, such as statutory Health and Wellbeing Boards and GP consortia.

More specifically, Oxfordshire Supporting People programme contributes to the successful delivery of strategic priorities set out in the Oxfordshire 2030:

- breaking the cycle of deprivation and reducing inequalities
- improving physical and mental health outcomes
- improving social mobility and economic outcomes

Access to a stable home and support to sustain it has been proven to enable vulnerable people to:

- reduce homelessness
- achieve better educational outcomes
- reduce rates of teenage pregnancy
- improve mental health
- reduce rates of offending behaviour

These services are preventative at their heart and assist people to regain their independence and become active contributors to society. In doing so, they avoid significant costs to statutory health and social care services, associated with greater dependency.

Key achievements since 2008

The record of the Oxfordshire Supporting People partnership to date has been a good one.

- The partnership has re-commissioned all of its original services, apart from a small group of services for people with physical disabilities, in what has proved to be an ambitious and demanding programme of work for everyone involved.
- We have done so in close consultation with service users, carers, service providers and a wider range of stakeholders, ensuring that their voice has been heard and informed the shape of future services.
- We have made sure that service users have been involved at all stages of each procurement project we have carried out over the last four years.
- The partnership has worked remarkably well to cope with big cuts in central government funding for housing related support services in Oxfordshire and has found savings while in most cases retaining and even improving services.
- We have commissioned new innovative services in key areas of the programme and in doing so put Oxfordshire on the national map, in terms of being recognised for our innovation, joint working and ability to manage our resources well.

Financial context

The financial and governance arrangements for commissioning Oxfordshire's housing related support services have changed significantly during the last three years, as was expected when we produced the 2008-11 strategy.

The money which Oxfordshire received from central government to pay for local housing related support services has transferred from central government to the Public Services Board, which could be described as the Executive of the Oxfordshire Partnership, and then most recently to Oxfordshire County Council as part of its general funding.

This funding also moved from being ring fenced for a specific named programme (i.e. Supporting People) to being first un-ring fenced and then ultimately not linked to a specific programme.

Comprehensive spending review announced that national allocation for the programme would be relatively protected for the next four years (2011-15). This is good news for the programme, the people and communities it supports, and the provider sector.

At local level the change in funding allocation described above means that some local authorities are getting more funding, whilst others are getting less.

The latter is the case in Oxfordshire, with central government formula giving the county a budget of £9 million, which represents a 44% cut from £16 million.

Under the previous government we have been planning for a reduction of 5% per year, which is a 20% cut over four years. New government's settlement was £4 million short of this allocation.

Oxfordshire County Council has decided to pick up the shortfall and set the destination budget at £13 million in 2014-15. This keeps the reduction to the planned level and allows the programme to proceed with implementing its commissioning priorities.

It is a testament to the programme's strong status and track record to date that Oxfordshire plans to retain its investment into the programme over the next four years.

Key challenges

The financial context and fast-shifting policy environment present significant challenge for us all. Nationally it is predicted that the economic downturn, planned changes to housing benefit and the homelessness duty would affect socially excluded people the most and may lead to growing local demand for housing related support².

Key challenges for the programme locally are:

- We need to meet priority need in the context of increasing demand and less money
- We need to continue to commission housing related support together with other and often new partners, while not losing focus on its key purpose
- We need to deliver effective early intervention and prevention measures that make most impact

- We need to bring services closer to service users and local communities they live in
- We need to shift focus to delivering sustainable outcomes which would help vulnerable people to become more independent and self-resilient

What is this document about?

In the last strategy we set out our plans for the programme for 2008-11: what we planned to do, when we planned to do it and how we will show we were delivering our plans.

In this document and the accompanying reference documents we report back on how well we have done against these objectives.

We are also discussing key issues and challenges facing the programme in 2011-12 onwards and how we plan to address these challenges to make sure that the programme's contribution is sustained in the future.

Final draft

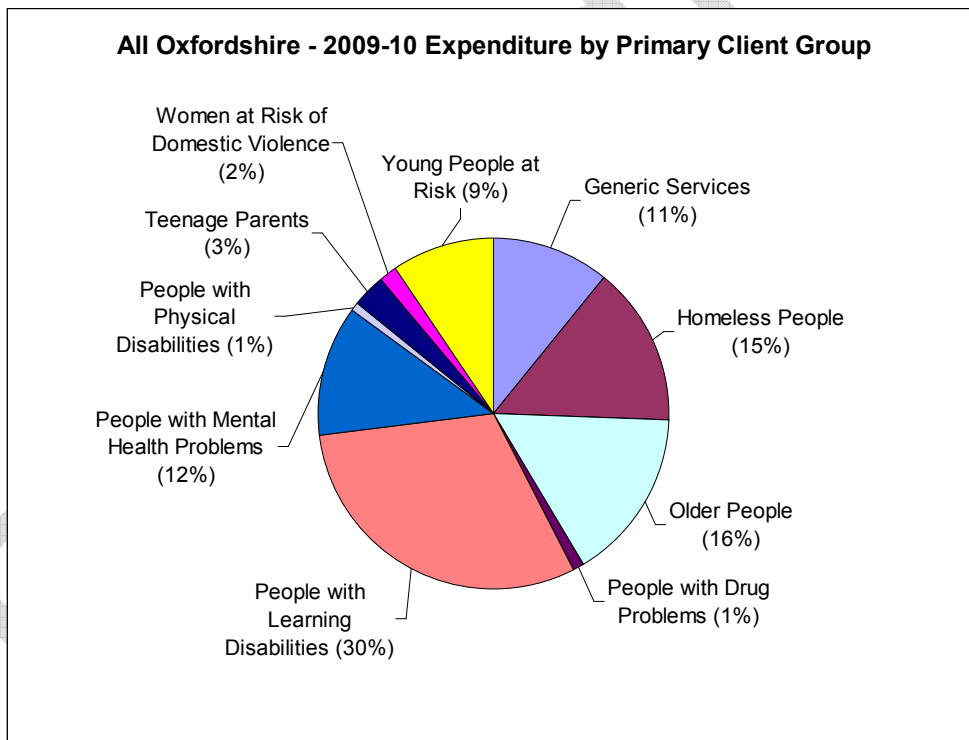
2. Oxfordshire context

In this section we present key facts and figures about the programme’s achievements in 2008-11. Further information is contained in a separate document titled ‘Oxfordshire Supporting People - Programme delivery report 2008-11’, which accompanies this strategy.

2.1. Key facts and figures

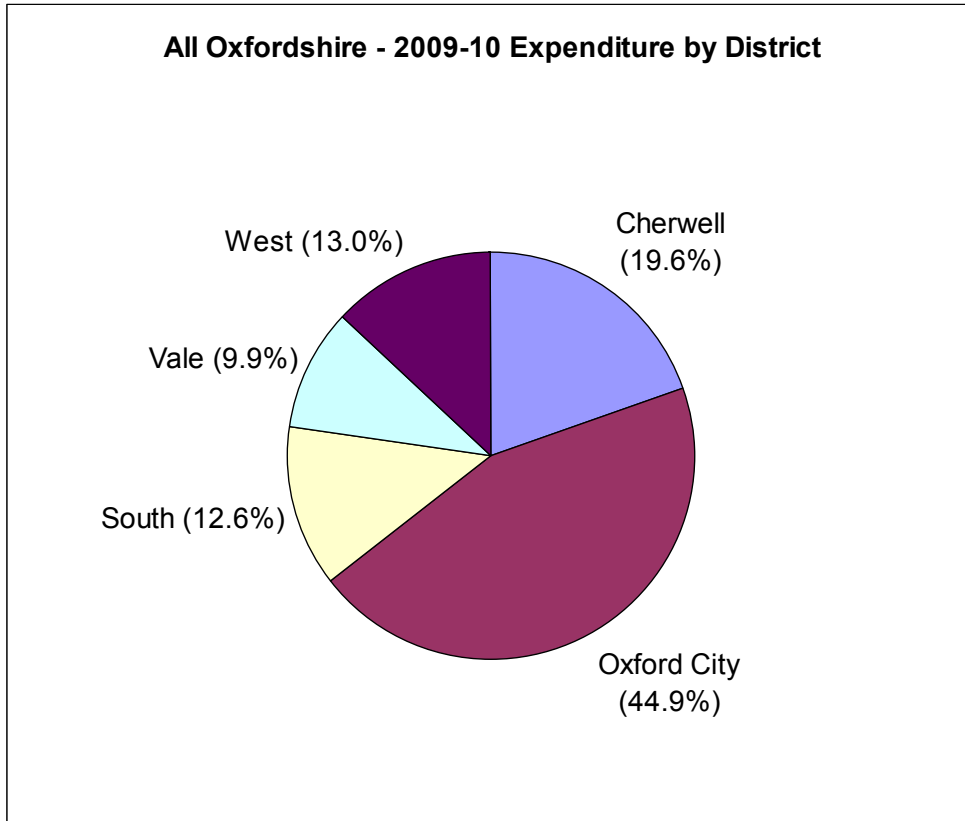
How we spend Supporting People funding

- In 2009-10 the programme’s expenditure reached £17.6 million.
- The programme supported over 11,400 people; with the majority of service users being older people.
- The biggest proportion of expenditure is on people with learning disabilities followed by older people and homeless people.
- Compared to similar areas Oxfordshire has a higher proportion of spend on people with learning disabilities and teenage parents. Oxfordshire has a lower proportion of spend on older people and women at risk of domestic violence.



- By geographical area, Oxford City continues to have the largest proportion of Supporting People spend followed by Cherwell, West Oxfordshire, South Oxfordshire and Vale of White Horse district.
- Compared to other districts:
 - Cherwell has a higher proportion of spend on teenage parents, women at risk of domestic violence and people with physical disabilities
 - Oxford has a higher proportion of spend on homeless people, people with mental health problems and people with drug problems

- South has a higher proportion of spend on people with learning disabilities
- Vale has a higher proportion spent on older people.



Achievements in key performance areas

Performance in 2009-10

Performance of Supporting People funded services is measured against the following two key national targets:

National Indicator 141 which measures the number of people moving on in a planned way from short term services. In 2009-10 our Local Area Agreement target was to reach 60%. We have surpassed this target by achieving 66.5%.

To achieve this target we worked together with service users, providers and partners to improve the number of planned moves from Oxford based services for single homeless people, who make up the largest group of people considered under this indicator. We are pleased with this joint achievement.

We also remain confident that local services have great potential to improve their performance even further in this area, especially if we are to join other better performing areas of the country.

National Indicator 142 which measures the number of service users who are supported to establish and maintain independent living. This indicator measures performance of long term and floating support services. In 2009-10 our target was to reach 98.9%, which we have done. There is little variation in performance in this area

nationally, which raises questions about whether this is the most robust performance measure to use in the future.

Outcomes for service users in 2007-10

We collect data about individuals who are supported by the programme at the point they enter support services (i.e. client records data) and when they leave these services (i.e. outcomes data). This data is now available over the last three years.

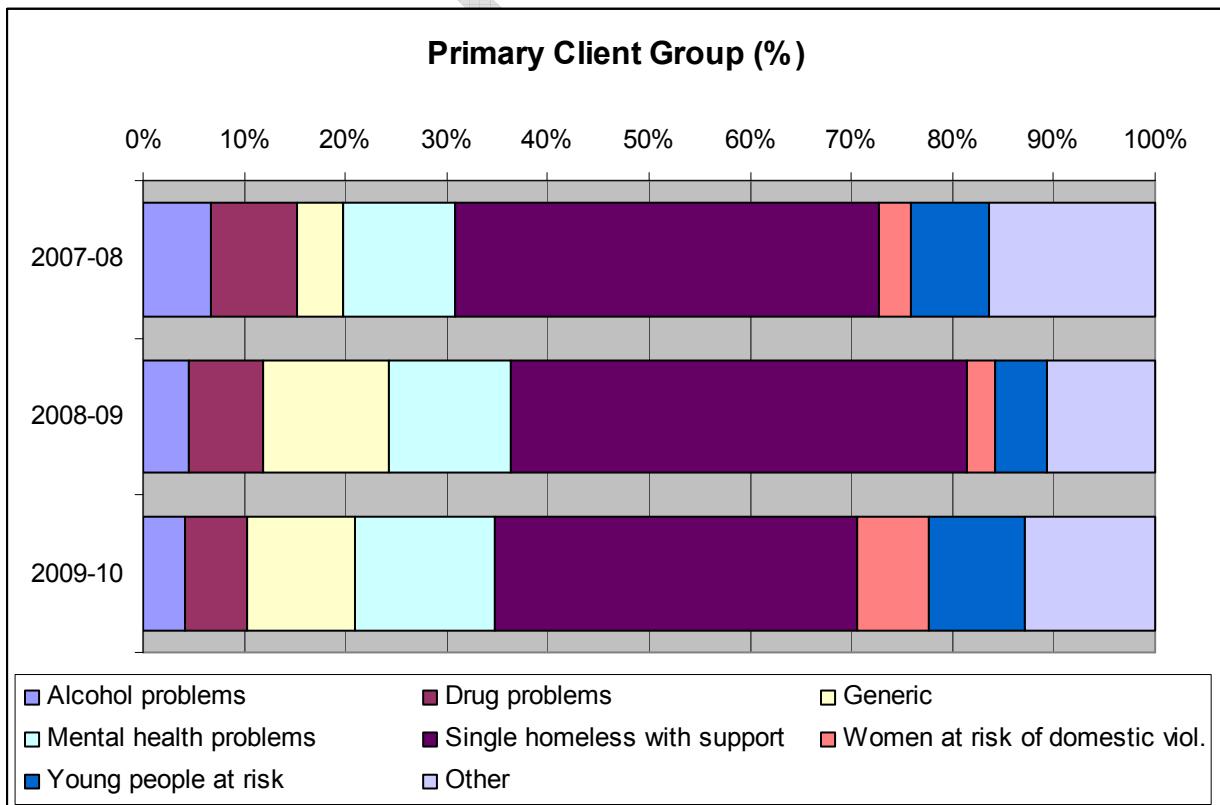
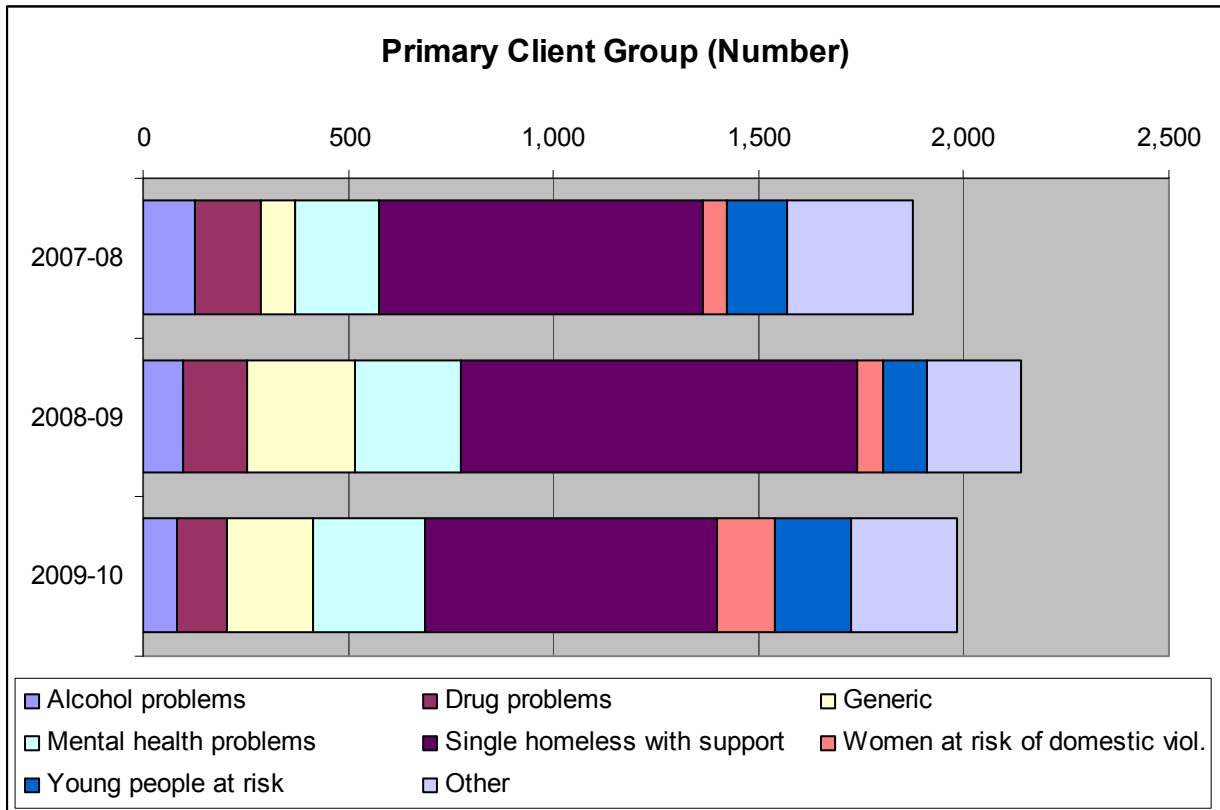
Client record data shows that support services work with a high proportion of males, although the proportion of females has increased over the last three years, a high proportion of single homeless people and a high proportion of people from Oxford City district. This data is presented in the tables below:

Table 1: The proportion of females / males using Supporting People services in 2007-10

Gender %	2007-08	2008-09	2009-10
Female	33.1%	33.9%	41.8%
Male	66.9%	66.1%	58.2%
Total	100.0%	100.0%	100.0%

The main client groups are single homeless, mental health and generic. Oxfordshire trends in this area of the programme are similar to those reported nationally.³ The number of people within the mental health and women at risk of domestic violence primary client groups have increased over the last 3 years.

Tables 2 and 3: The number of people using Supporting People services by primary client group (number and proportion)



Outcomes data shows that for people using support services provided on a short term basis (i.e. for less than two years) across all areas in which outcomes are measured the need was met in two out of every three cases.

Table 4 data shows that over three years the five highest needs met are income welfare (2,307), confidence (2,208), contact with external services (1,864), maintain accommodation (1,704) and mental health (1,352). Oxfordshire trends on the top two types of need are similar to those reported nationally.⁴

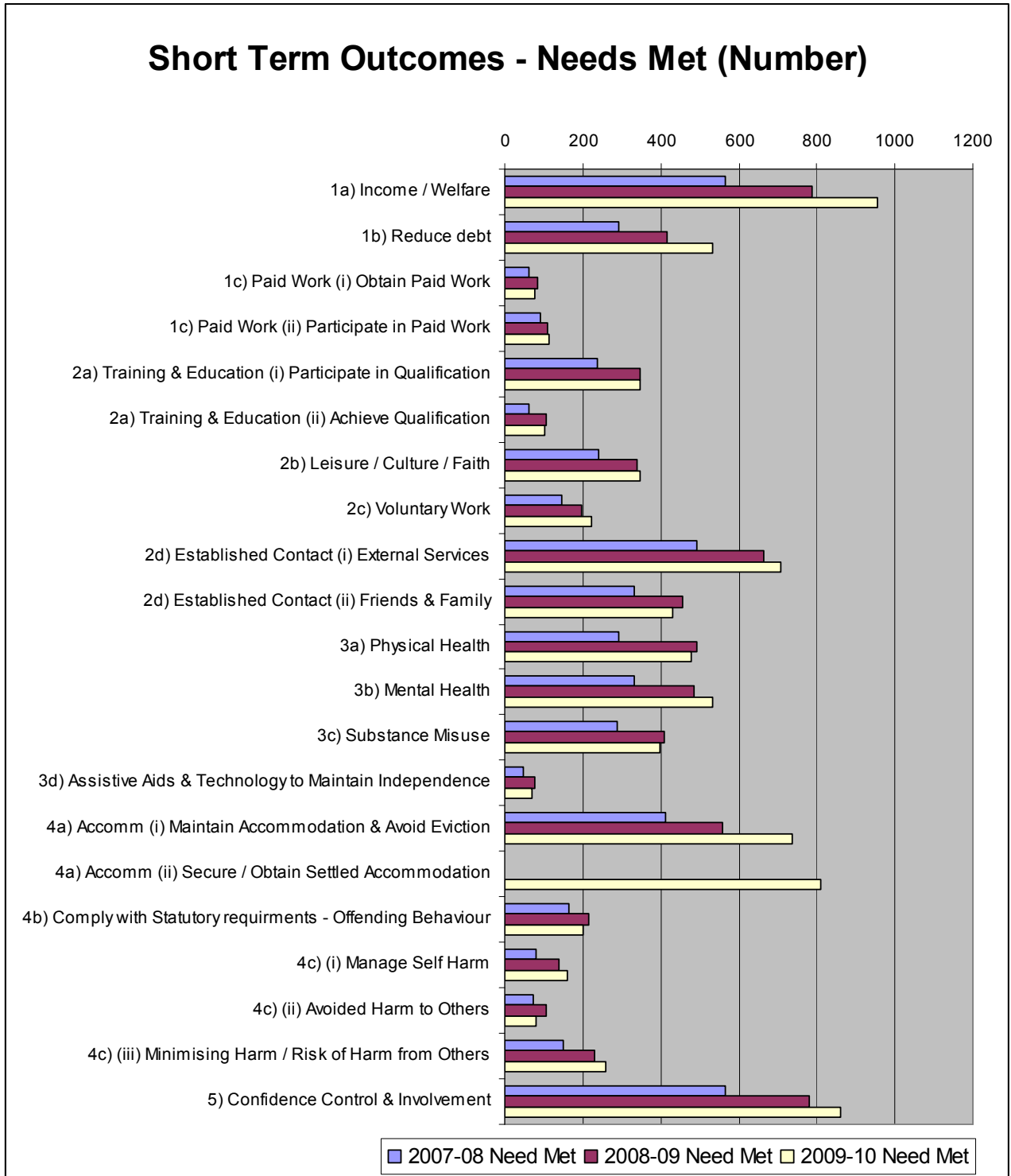
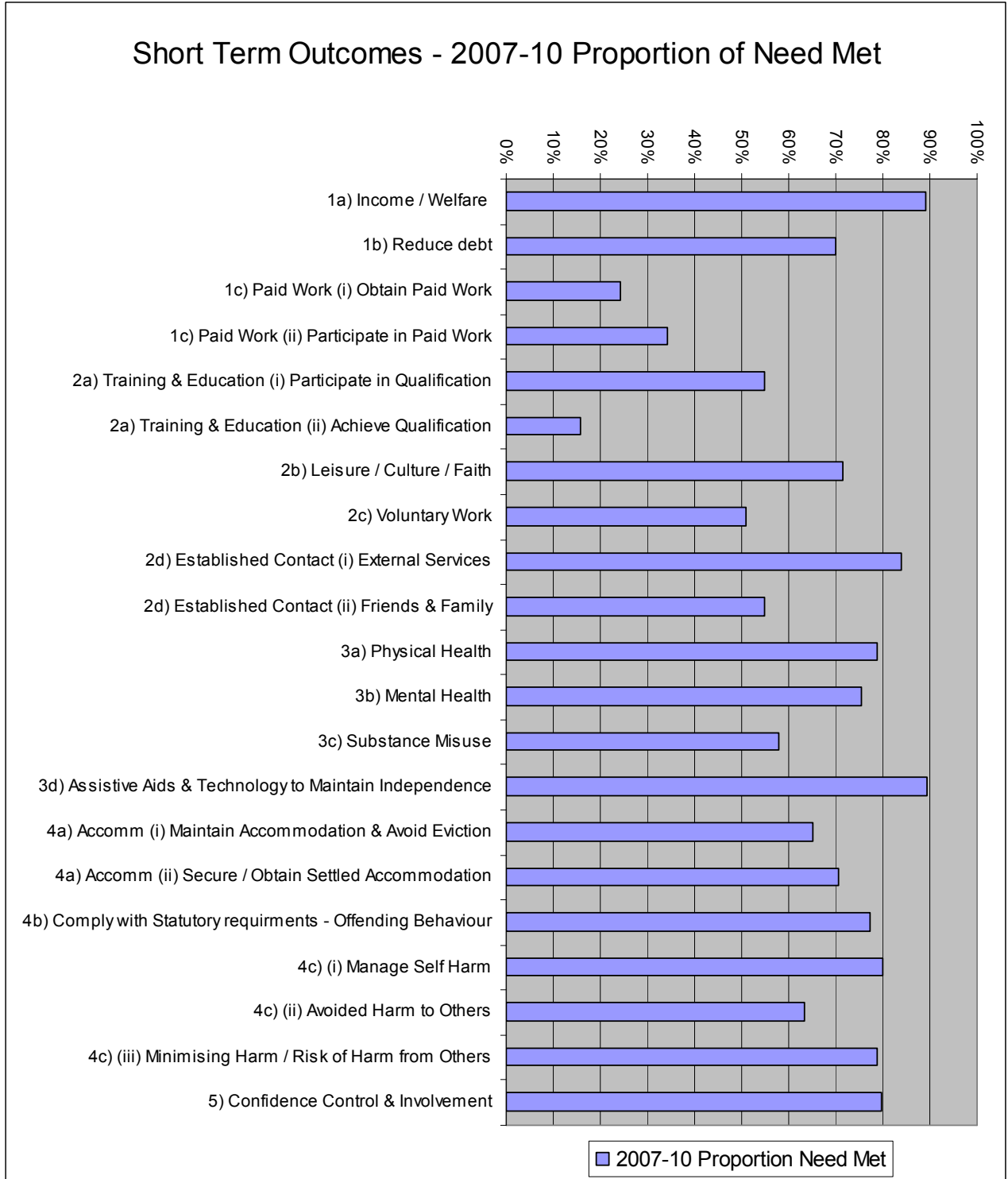


Table 5 data shows that the three areas with the highest proportion of short term needs met are assistive aids (89.3%), income welfare (89.1%) and contact with external services (83.9%).



For people using long term support (i.e. for more than two years) across all areas in which outcomes are measured the need was met in six out of every seven cases.

Table 6 data shows that over three years the five highest needs met are maintain accommodation (743), income welfare (689), physical health (665), contact with external services (544) and contact with friends and family (532).

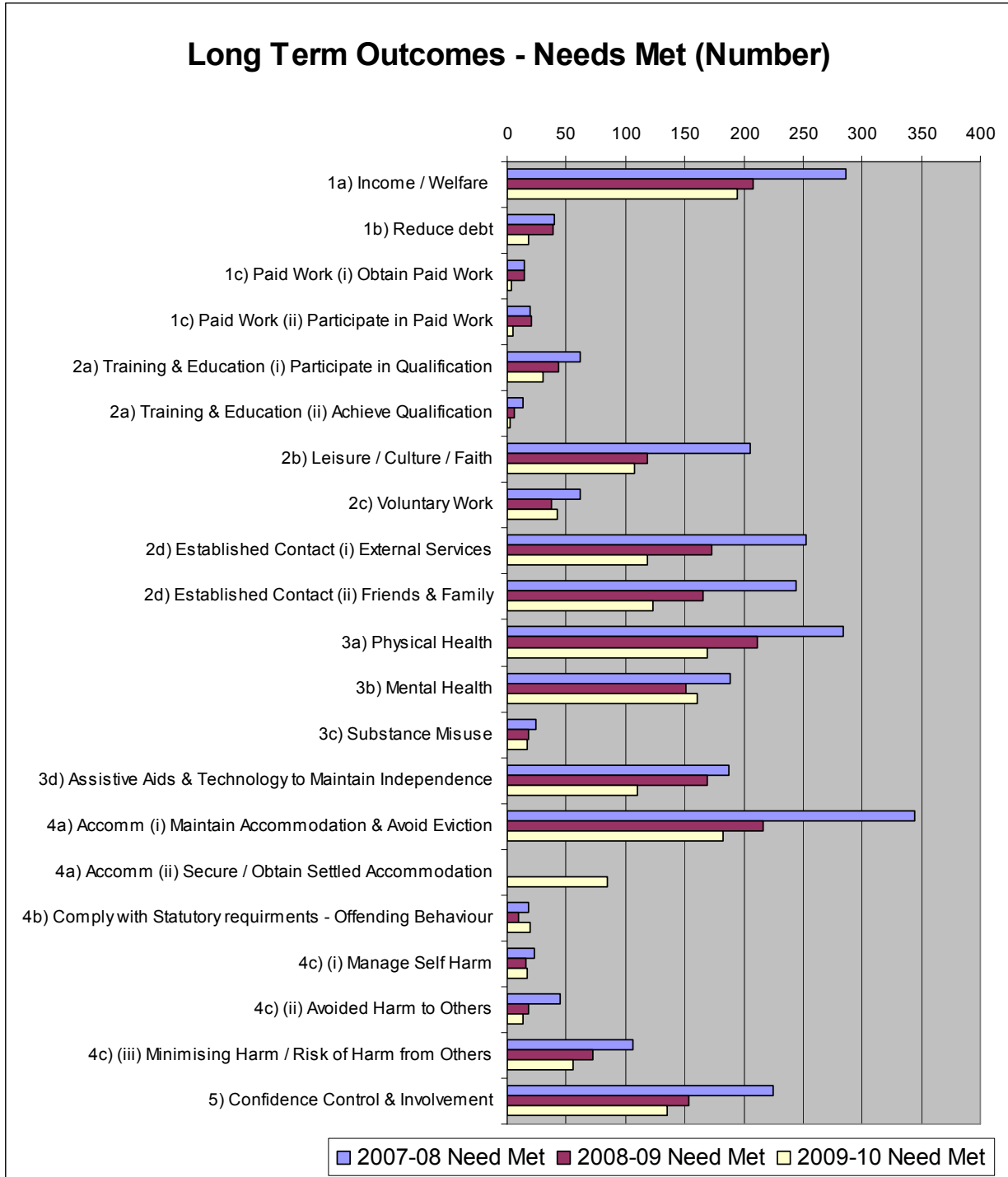
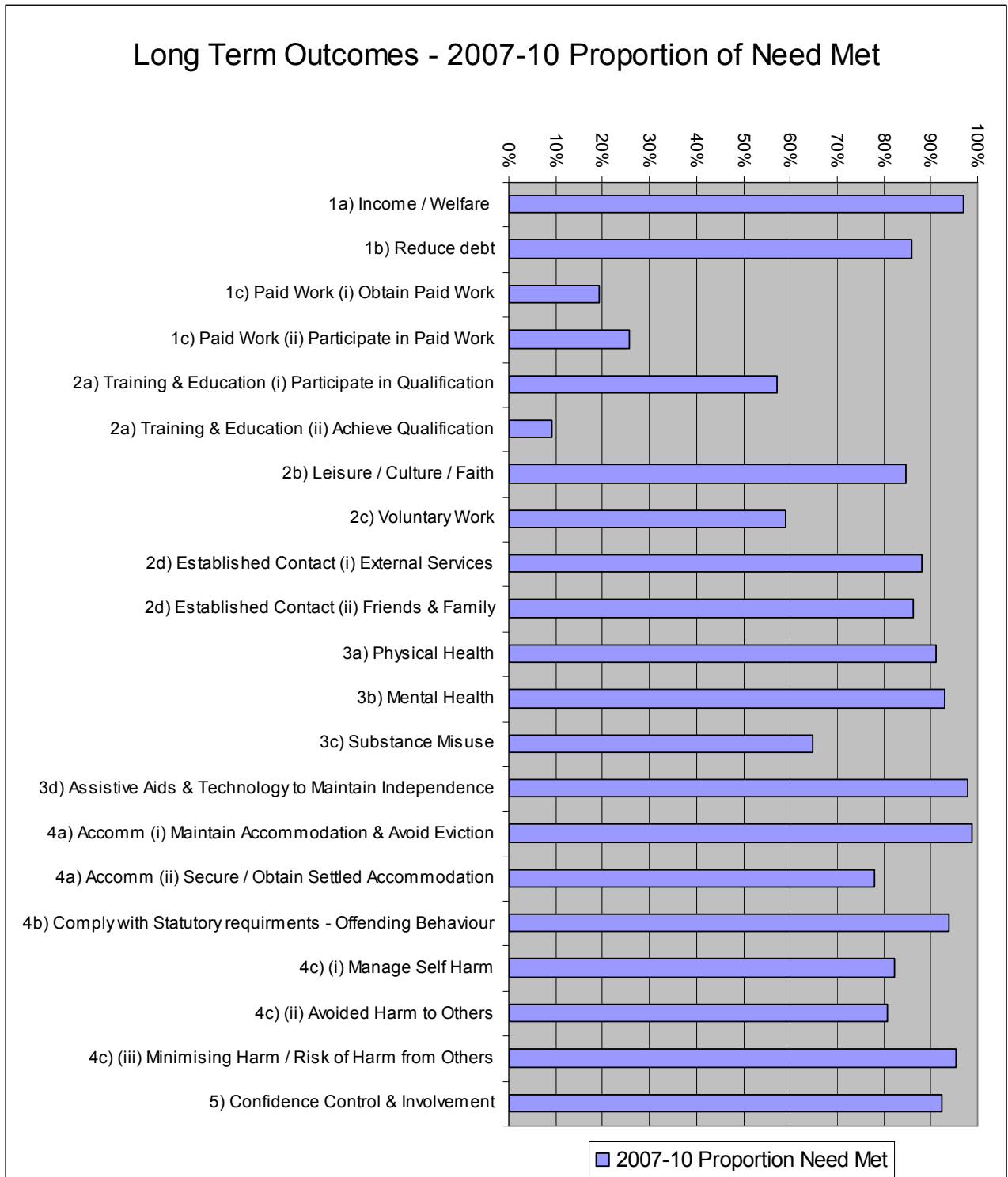


Table 7 data shows that the three areas with the highest proportion of long term needs met for 2007-10 are maintain accommodation (98.7%), assistive aids (97.9%) and income welfare (97.0%).



2.2. Progress with delivering strategic objectives

In delivering our vision, values and strategic objectives we have fully met most of the following main objectives of the Supporting People programme in Oxfordshire in 2008-11.

Joint commissioning and value for money

We have commissioned new services across all areas of the programme, apart from a small set of services for people with physical disabilities⁵. We have done so well and on time in most cases.

We have created and utilised exciting new opportunities to commission services together with other partners in order to deliver joint objectives and maximise use of limited resources. In doing so we are leading the sector in bringing together housing and support with health and social care objectives.

Overall seventy percent of Supporting People funding in Oxfordshire is spent on services we have commissioned jointly and in an integrated way with other agencies⁶. Benchmarking information for the sector indicates that this represents a significantly larger proportion of spend than in other areas of the country⁷.

Our strategic approach to joint commissioning not only brought additional resources to the table but also provided better opportunities to increase our collective buying power and secure better value for money through procurement. This approach has been fundamental to our ability to manage the reducing budget without having to reduce front line services on a large scale. We were also able to attract innovative and forward looking bids from a range of local and national organisations services and commissioned better quality services for local people.

We have also improved value for money by working with providers to improve the performance of local services and by encouraging them to continuously look at new ways of delivering better outcomes for service users. This is illustrated by a number of key services achieving higher, level A and B ratings under the Quality Assessment Framework (i.e. floating support services) or achieving significant improvements in their performance against priority targets (i.e. services for homeless people).

Our work on joint commissioning to date is illustrated further in the *Programme delivery report: section 2) Learning disability, section 3) Older people, section 6) Mental health, and section 7) Young people and teenage parents.*

Meeting priority need and delivering positive outcomes

We have strengthened our focus on commissioning services based on clearly evidenced support need for all vulnerable people living in Oxfordshire's diverse communities. We have done so by involving service users, carers and a wide range of partners in bringing together their knowledge and expertise in identifying unmet and priority need before deciding which services to commission.

For example, in 2008-09 together with local housing authorities we have identified the need to increase our investment in outreach support for men and women at risk of domestic abuse in Cherwell and West Oxfordshire and have done so by commissioning a new service aimed at this population group⁸.

Oxfordshire new housing and support pathway for young people and teenage parents is another example of our improved ability to commission services for people with the highest need.

We have also worked on improving the targeting of all support services to ensure funded services are delivered to people who have identified needs for those services. For example, we have identified the need for older people living across all types of tenure to have access to telecare equipment to enable them to remain independent in the community. We designed and commissioned a new preventative service that combined telecare with low level support and last resort personal care in an emergency, which is now being equally taken up by older people living in a variety of accommodation, such as privately owned or rented dwellings, and a caravan park.

Overall we have taken further steps to refocus existing accommodation based services to either cater for those with high support needs who require long term support to live independently, as in the case of supported living schemes for people with learning disability. Or to provide short term rehabilitative support to enable people to move into accommodation in the normal housing stock, as in the case of young people, single homeless people or those being supported by floating support.

When new services are in place, we monitor how accessible they are to people they have been designed for by analysing profile of people using these services. This work is further illustrated in client group sections and the annual report that accompanies this strategy.

Over the last two years we have started to shift our focus on measuring outcomes delivered for service users. We have identified outcomes most relevant to users of each service and have analysed this information for the last three years to see how well local services were performing.

This information is considered in more detail in the *Programme delivery report, sections 2-12*.

Choice

We have enabled a larger number of vulnerable people to access appropriate support services that focus on enabling them to achieve their individual goals.

For example, before designing the new preventative service for older people we have extensively consulted with current and future users of the service. We have listened to their views, which indicated that some people would prefer to remain with their existing provider of support and not transfer to the new service. We have also discussed these issues with providers to make sure that they were able to meet this request.

As the result, during 2010-11 we have set up direct payments for more than 800 older people that have chosen to remain with their provider of choice and have supported them throughout the implementation of these changes. For comparison prior to 2010 we operated direct payments for less than 100 people, mainly to older people receiving a community alarm service or living in leasehold accommodation.

In doing so we have enabled people to have choice about the way their housing related support needs are met and to receive and use Supporting People funding for themselves to meet their assessed needs.

Easy access and diversity

We have taken specific steps to enable a larger number of service users and agencies who refer them to say that support services are easy to access. We have done so by continuing to publish at regular intervals up to date information about the services we provide and by linking this information to other sources of information and advice used by local people⁹.

We have prioritised this work despite of diminishing administrative resources, because we recognise that a programme of re-commissioning implies significant change and it is crucial that people have clear information about services on offer at any point in time.

We have also worked with providers of mental health services in Oxfordshire to establish a common referral form. This made it easier for service users and their carers to contact support services on offer and for providers to offer appropriate support more speedily and without unnecessary bureaucracy.

We believe that housing related support should be available to all who need it, regardless of gender, disability or race, while recognising that the Supporting People programme does not fund services for children under the age of 16.

In order to make sure that local services are accessible to a diverse range of people we worked with providers to promote good practice in making services available and effective for all. We have looked at whether this work made any difference by analysing local and national performance trends across key characteristics of service users such as gender, ethnic origin, religion, disability and economic status.

This information tells us the following about people accessing the Supporting People services:

- The majority are male, but the proportion of females is increasing¹⁰
- The majority are White British, but the proportion of BME cases (Asian / Black / Mixed / Other) is increasing.¹¹
- In those cases where people have told us about their religious beliefs, the majority are Christian followed by Muslim¹²
- In those cases where people have told us about their disability, the most common recorded disabilities are “mental” followed by “mobility” and “learning”¹³
- The majority have described themselves as falling into one of the following three economic groups “long-term sick”, “job seeker” and “not seeking work”. These account for just over two thirds of Supporting People client cases over the last 3 years¹⁴

We use this information when we review our services and decide what future services may look like. We plan to make further use of this valuable information in our work on the programme in 2011-12.

Service user involvement

We have enabled service users and carers to have more say about what services we commission and how they are delivered from start to finish.

Starting with the first ever Supporting People tender of floating support services we completed in 2007, service users have been involved in each procurement exercise we have done. They have told us about how current services can be improved, helped us to design new services and select new providers. More recently, for example in the mental health commissioning project, we have improved the way we engage with carers and have plans for taking this work further forward.

We have also created and supported a Supporting People service user group, representatives of which take part in decision making about the programme and have begun to help us to assess the quality of services we provide.

Finally, we have been involved in the development of the Up2Us – an innovative project described in more detail in the *Programme delivery report, section 13) Service user involvement*.

Most of these objectives cut across all sections of the programme and our achievements are illustrated in more detail in the *Programme delivery report, sections 2-12*.

3. The strategy for 2011-16

3.1. Vision and values

The vision statement for the Supporting People programme in Oxfordshire is:

“Working together to enable people of Oxfordshire to:

- access and sustain a stable home of their choice
- live independent and healthy lives
- make an active contribution to society”.

The following values underpin the Supporting People programme in Oxfordshire:

- **Prevention:** We will commission services that have prevention at their heart and enable an individual’s capacity to live independently in the community and sustain his/her capacity to do so. By intervening early services will aim to enable people not to become in need of statutory provision for as long as is possible in their circumstances.
- **Personalised outcomes:** We will commission services that have strong focus on delivering positive outcomes for people who receive them. We will find out which aspects of their lives are important to people, what goals and aspirations they have and support them in reaching these personal goals.
- **Service Users’ participation:** We will put service users at the centre of the programme by creating opportunities for their meaningful involvement in deciding what support services they receive now and in the future and how they are delivered. We will listen to service user’s views and make their opinions matter by considering their suggestions, addressing concerns and communicating to them the actions we take.
- **Diversity:** We will enhance diversity and social inclusion in local communities and support community wellbeing by commissioning services which address the needs of socially excluded groups whose needs are not met, or not adequately met, by current support provision and which apply principles of equal opportunities.
- **Best value:** We will work together with service users, carers, communities and other local agencies to make best use of resources available to us all for the benefit of people we aim to support.

3.2. Strategic objectives

This section sets out the main strategic objectives of the Supporting People programme in Oxfordshire for the period 2011-2016 in order of priority.

1. Commission services that make best use of resources and funding available across the key partner agencies to deliver better outcomes for service users and carers.
2. Work in partnership with service users to engage them in developing self reliance, respect and social connection.
3. Enable service users and carers to have more say about what services we commission and how they are delivered from start to finish.
4. Create and promote opportunities for self directed support.
5. Commission services that offer people a range of different support options and are able to adapt to changes in future requirements.
6. Invite and support innovation and best practice in service delivery.

3.3. Main task for 2011-12

As a commissioning programme, we have two main methods of achieving improvement:

- We can create specifications for new and improved services, and select organisations to provide them – usually by competitive tender
- We can use contract monitoring and management processes to ensure that service providers deliver services of the highest possible quality.

Although after eight years of delivering the programme this largely remains to be the case, we believe the time is right to fundamentally reconsider our approach and redesign the programme to ensure its positive contribution is sustained in the future.

Our main task for 2011-12 is to review all strategic commitments of the programme and agree future pattern of investment and delivery, taking into account fast-shifting policy environment, evidence of unmet priority need and emerging examples of best practice in joint commissioning, self directed support and localism.

We decided to move away from defining commitments by a single type of vulnerability and re-grouped the programme's commitments into two clusters:

- Cluster 1 – This group contains services for people who are more likely to be in contact with statutory health and social care services and have a range of services available to them depending on their level of need. For this group the programme provides support located on the preventative end of the care and support pathway.

- Cluster 2 – This group contains services for people who are usually referred to as ‘socially excluded and disadvantaged groups’ and who are less likely to be in contact with statutory health and social care services. For this group the programme is often the key, if not sole, provider of support.

This review would focus on three key parameters

- Locality based needs
- Lead commissioning agency role
- Centrally controlled commissioning function

and maximize new opportunities for working together on identifying local solutions and giving service users and commissioners greater control over local funding, while retaining benefits of having central strategic oversight of the programme.

4. Delivery plan for 2011-12

4.1 Financial strategy

In writing this strategy, we know what the programme’s funding for the future would be. Oxfordshire County Council has said it is likely to allocate the following amounts to purchase housing related support services:

2011-12	£15,359,116
2012-13	£14,591,160
2013-14	£13,715,690
2014-15	£12,892,749

This represents a 5% per year reduction in investment compared with the 2010-11 figure of £16,167,490.

This means that Oxfordshire’s Supporting People funding will reduce to £12,892,749 in 2014-15. This is almost forty percent less than what Oxfordshire received from government when the programme started in 2003-04 or a reduction of £8.2 million.

Managing financial risks

On the whole the administering authority managed risks associated with this challenging financial situation effectively on the Commissioning Body’s behalf.

Oxfordshire ended almost every year with a surplus which the government permitted Oxfordshire to carry forward except for 2005-06 where we overspent our Supporting People Grant by prior agreement by almost £0.5m as part of handling the first impact of the Supporting People Distribution Formula.

2010-11 is the first time we approach the end of the financial year with a balanced budget and no surplus to carry forward. This means that our approach to managing financial risks should change.

Supporting People contracts are typically issued by the administering authority for three years with an option to extend for a further two years – in effect, five year contracts, as recommended by the government.

This means each time we take a decision to commission services for a group of people after 2010-11, whether through formal contracts or other methods, we need to be commissioning the services we can afford for those people when our funding reaches its final level of £12.9m.

Managing the budget in 2011-12

The partnership adopted a two-pronged approach to managing these financial pressures:

- First, by setting specific saving targets for all commitments that have been subject to a strategic review in 2010-11 – This measure would produce planned savings in the short-term, while retaining strong links to the strategic relevance of these commitments.
- Second, by re-prioritising all programme commitments to align their strategic priority with available funding – This measure would produce planned savings in the medium to long term and would give the partnership time required to complete this complex exercise with due diligence.

As we approach 2011-12 the programme's commitments set out in existing contracts exceed the agreed allocation by about £300,000 or fewer than 2% of the budget. This figure already takes into account planned reductions to commitments for services for people with learning disabilities, generic floating support and mental health services.

It is therefore necessary to ensure further reductions or efficiencies approaching this amount were delivered in 2011-12.

The Commissioning Body set the 2011-12 budget for the programme within the following parameters:

- An additional efficiency saving target of 2% has been allocated across all commitments, as a starting point in order to balance the budget. Relevant negotiations with all providers have started in April and would pursue identification and delivery of genuine efficiencies, i.e. measures that do not result in reduction in service quality or volume.
- Subject to sufficient progress made across the programme, the partnership would look favourably at those commitments where a significant target has already been set.
- It is recognised that in some cases it may prove impossible to implement genuine efficiency savings. For example, direct payments for older people offer little room for manoeuvre due to the nature of these arrangements. Therefore different measures could be considered to achieve better value for money from these arrangements - i.e. revision of benchmarks on unit price or volume.

- It is also recognised that in some cases this work may produce a saving above the set target. If this were to be the case, it is proposed that the saving is realised in full and the remaining savings for the rest of the programme are adjusted proportionately within priority criteria to be set by the commissioners.

4.2 Making this happen – Work plan: 2011-12

In this section we list only the biggest tasks facing the programme in 2011-12:

- Conduct strategic review of the programme and agree future pattern of investment and delivery for 2012-16
- Make improvements to generic floating support services and deliver required financial savings
- Ensure smooth transition to new mental health services and deliver improved outcomes across new pathway of services
- Improve focus on personalisation, customer service and service user engagement
- Deliver our financial strategy for 2011-12

Outcomes of the strategic review mentioned above will inform our work plan and financial strategy for 2012-16, which will be produced and published at a future date.

This strategy will be reviewed annually.

5. References

- ¹ Oxfordshire 2030, A partnership plan for improving quality of life in Oxfordshire, June 2008, page 13.
- ² Supporting People Services 4Facts 4Questions, ADASS 2011
- ³ 'Supporting People Client Records & Outcomes - Annual Report 2009-10', Centre for Housing Research, University of St Andrews, page 7.
- ⁴ 'Supporting People Client Records & Outcomes - Annual Report 2009-10', Centre for Housing Research, University of St Andrews, page 8.
- ⁵ This work has started and would be completed in 2011-12.
- ⁶ Oxfordshire Supporting People programme projected spend for 2011-12.
- ⁷ SITRA survey of local authorities conducted in 2010.
- ⁸ Needs analysis exercise undertaken by Supporting People in 2008.
- ⁹ Oxfordshire Mind on line directory of services
- ¹⁰ Supporting People New Client Record Form data available quarterly and annually, 2007-08 to 2009-10 – Gender data, the proportion of females has increased from 33% in 2007-08 to 42% in 2009-10.
- ¹¹ Supporting People Long Term and Short Term Outcomes Form data available quarterly and annually, 2007-08 to 2009-10 – Ethnic data, White British cases account for 85.8% of the cases over 3 years. The proportion of BME cases has increased from 9.5% to 9.7% to 10.2%. The largest BME groups over the 3 years are Black/Black British: Caribbean (1.9%), Mixed: White & Black Caribbean (1.7%), Asian/Asian British: Indian (0.7%) and Asian/Asian British: Pakistani (0.7%).
- ¹² Supporting People Long Term and Short Term Outcomes Form data available quarterly and annually, 2007-08 to 2009-10 – Religion data, there is a known religion for 30.4% of the outcome returns cases. The majority of known religion is Christian (89.3%) followed by Muslim (6.6%)
- ¹³ Supporting People New Client Record Form data available quarterly and annually, 2008-09 to 2009-10 – Disability data, Over the 2 years “mental” has 315 cases, “mobility” has 122 cases and “learning” has 70 cases. Others are “visual” with 29 cases and “hearing” with 20 cases.
- ¹⁴ Supporting People New Client Record Form data available quarterly and annually, 2008-09 to 2009-10 – Economic status data, The “long term sick” (28.6%), “job seeker” (27.1%) and “not seeking work” (21.1%) account for over two thirds of proportion of client record cases. Note – client record data mainly covers short term cases.



**Oxfordshire
Supporting People:
Programme Delivery
Report 2008-2011**

April 2011

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1. Introduction

This report accompanies the Oxfordshire Supporting People Strategy 2011-16 as the key supporting evidence document.

It sets out the Supporting People programme's achievements and performance in delivering individual strategies for specific groups of vulnerable people in 2008-11.

It also describes key priorities for delivery in 2011-12.

Most of supporting evidence used in this report is drawn from the "Oxfordshire Supporting People Annual Report 2009-10", which is available from the Oxfordshire Supporting People team on request.

2. People with Learning Disabilities

Key Fact

Housing related support has a critical role in giving people with learning disabilities independence, choice and control in line with the vision in Valuing People and Transforming Adult Social Care.

Key Statistic

By 2016 the number of adults with learning disabilities in Oxfordshire is expected to increase to 4,263¹ compared with 3,900 at the time of the last census in 2001. This figure is based on those people with mild and severe learning disabilities who are considered to be vulnerable and eligible to receive a support service.

Oxfordshire Context:

- Oxfordshire LD Pool Budget is £74.2m in 2010-11. It is made up of contributions from Adult Social Care, Health Care and Supporting People.
- The Supporting People contribution is £4.58m. This funds the housing related support element of supported living. Currently over 550 people are in receipt of housing related support at any one time
- Supported living opportunities are available across the county, in both urban and rural areas
- Supported living is tailored to meet people's needs and to help people live independent and valued lives. People often live in shared houses, although there is a range of accommodation from one bed flats to larger houses of 4 or 5 people
- Care and support are available during the day, in the evenings and at night depending on individual's need and circumstances. These are assessed by care managers and a person budget is derived from the level of need
- All block contracts with service providers are open to competition. Service users, family members and carers now have the ability to choose which provider they want. All providers are subject to quality and price control at the competition phase.

How did we get here?

- We have transferred the funding for Supporting People services to people with learning disabilities into the Learning Disability Pooled Budget
- In doing so we have created one commissioning framework covering people's health, social care and housing related support needs
- We have achieved a reduction in the amount paid to the LD Pooled Budget from £5.14m in 2008-09 to £4.58m in 2010-11
- At the same time we have increased the number of adults with learning disabilities supported to live at home, including those who have taken a Direct Payment or Personal Budget

- We have increased the availability and use of assistive technology to help keep people safe and to allow them to live at home more independently
- We have reduced administrative burden on service providers by making sure they have just one contract if they meet all the needs of service users, rather than separate contracts for different funding sources.

Impact

- We have made it easier for clients, carers and providers to access supported living services by pooling funding and managing services under one contract
- People are able to choose whether to use services commissioned for them by professionals or whether to buy services themselves using direct payments, self-directed support and similar arrangements.
- Referral routes into learning disability services are clear, well communicated, and give priority to those with the greatest need.
- Service users are fully and meaningfully involved in decisions. Consultation will be organised around people and their carers, not fragmented according to funding boundaries.

Key Measures of Success or Failure

- We have achieved very high performance with increasing number of people with learning disabilities supported to maintain independent living and wish to maintain this success – The NI 142 scores from 2007-08 onwards have all been above 99.5%²
- We have maintained a high level of performance with increasing number of people with learning disabilities in settled accommodation and are significantly ahead with regards to regional and national achievement. The Oxfordshire scores are 92.3% and 80.8%, the England scores are 64.5% and 61.0%³
- Although numbers of people with learning disabilities in employment has dipped slightly, our performance has been in line with regional performance indicators. The Oxfordshire scores are 10.8% and 9.6%, the England scores 6.8% and 6.4% (2008-09 to 2009-10)⁴

Key Issues⁵

- There is a significant pressure on the availability of suitable supported living available to those who need it
- Service users should be offered more control and be more involved in choosing how and by whom their support is provided
- There are an increasing number of older carers with adult children with a learning disability living at home
- There are an increasing number of older people with learning disabilities who have dementia and other health problems

Key Actions

Between April 2011 and March 2016 we will

- Make Supporting People funding for housing related support available to all people with learning disabilities in supported living.
- Continue to increase the number of people with learning disabilities helped by the programme to over 600, whilst managing a reducing budget

- Move more people onto Personal Budgets and continue to facilitate the choosing and purchasing of support services by the service users themselves
- Monitor the quality of services in order to provide the best quality possible within the budget available and to keep people safe

What service users, carers, agencies and stakeholders have told us about the services we fund:

Case Study 1

JB has long standing mental health needs and institutional behaviours as well as having learning disabilities.

He has significant experience of living in in-patient (hospital) services.

By choosing a support provider with the suitable skills and expertise a service was designed to meet JB's specific support needs.

The support provider chosen was Real Life Options who were new to working for Oxfordshire County Council.

The support to JB has now enabled him to live independently in settled accommodation for nearly three years without relapse and the need for specialist residential in-patient care.

Not only has this allowed JB to live a more fulfilled and valued life, it has also saved the Learning Disability Pooled Budget around £3000 per week or over £400k to date

We have also built up local expertise in providing this type of service which has allowed us to expand this service for up to 12 people. This has likewise brought about significant savings.

Case Study 2

RN was finding it difficult to find suitable accommodation that met his needs and that would allow him to live independently on his own.

Working with his support provider, The Ridgeway Partnership, we were able to identify a suitable area attached to a current service. This involved converting a space previously used as an office into an independent flat.

Working closely with the landlord and specialist architects, the support team helped to design an apartment which contained a range of assistive technology.

The technology installed can monitor and alert the support team. They can respond to alerts triggered by, for example extreme heat, smoke, epileptic seizure etc. They can also monitor and respond to unusual activity around the front door. RN is also able to summon support when needed.

This remote and un-intrusive support allows RN to live independently and enjoy time alone in his flat. The staff team have confidence that all is well and that they can intervene if required rather than have to continually visit to assess RN's wellbeing.

It is unlikely that RN would have tolerated sharing a property with another tenant or intense staff support in his flat. The Assistive Technology gives the balance of safety and independence.

3. Older People

Key Fact

Low level preventative support combined with good quality housing conditions enables older people to sustain independence and continue to live at home.

Key Statistic

The Joint Strategic Needs Assessment predicts that there will be a large increase in the older population over the next few years particularly in the over 85's age group and especially in rural districts. It is estimated that in 2010 there will be nearly 15000 people aged over 85 and over 24000 by 2028⁶.

Oxfordshire Context:

- In 2010-11 we spent £2.5 million on services for older people
- This funding is used to provide three types of service:
 - The Alert service that offers social alarm, telecare, planned support and 24/7 emergency response
 - Home Improvement Agency services that provide minor and major adaptations to people's homes, handy person services, and offer advice on health and safety and benefits
 - Direct Payments to older people living in sheltered housing schemes to assist them with paying for social alarm and low level support provided by their landlord
- These preventative services are commissioned together by Adult Social Care, Supporting People and local housing authorities and are key to our commitment to enabling older people to sustain independence and live at home for as long as possible
- The number of people supported at any one time is 9000
- The first two of these services are available to people living in all types of tenure; support to tenants of sheltered housing is linked to accommodation they are occupying
- All of these services are now available across all parts of the county

How Did We Get Here?

Between April 2008 and March 2011 we have

- Properly consulted older people about the way services are being delivered
- Designed, advertised and implemented new round-the-clock housing related support services for older people throughout Oxfordshire starting in April 2010
- Offered and administered direct payments to 800 people to enable them to continue to receive support services from their preferred provider
- Supported the delivery of the Oxfordshire Extra Care Housing Strategy, increasing the number of extra care sheltered housing services we fund from the previous level of just one to two
- Reviewed all Home Improvement Agency services and agreed to extend current arrangements for another two years

Impact

- Housing related support and telecare services are now available to older people who require support to live independently - regardless of the accommodation they are occupying.
- Timely and effective support is now available at any time of day or night when it is needed. This includes regular planned contact with support staff and quick response in emergencies.
- Referral routes into services are now better integrated with existing housing, social care and health referral routes and minimise the requirement for further assessments.
- Combined these services offer innovative and flexible solutions to meeting priority need such as ensuring safe and timely discharge from hospital and ongoing support for carers.

Key Measures of Success or Failure

- The proportion of older people supported to maintain independent living continues to be high - the scores from 2007-08 onwards have all been above 99.2%⁷
- There has been a decrease in the number of black and ethnic minority older people receiving financial help from Supporting People with their support charges from August 2008 to September 2009⁸
- We are not yet able to assess in a systematic way whether these services contribute to reduced numbers of non-emergency calls to ambulance service about older people. We are planning to consider this issue in 2011-12.

Key Issues

- Demand for low level support and telecare services is increasing across the county. We therefore need to find ways to meet priority need within available resources.
- Existing direct payment arrangements need to be reviewed to ensure that they are aligned to best practice frameworks.
- We need to seek solutions to funding the element of housing related support in extra care housing without having to take money away from existing services.

Key Actions

Between April 2011 and March 2012 we will

- Evaluate the performance of new services to ensure they deliver the expected outcomes for older people
- Support the delivery of prevention and early intervention services by continuing to fund direct payments and extra-care housing services
- Agree our medium to longer term contribution to older people services

What service users, carers, agencies and stakeholders have told us about the services we fund:

How the alarm and support have changed people’s lives

Mr P was discharged from hospital with a terminal illness. Due to his domestic home arrangements he was living in a converted garage. It was not possible to fit a BT landline. In order for the discharge Mr P’s alarm was set up using mobile technology and he used the service successfully until his death.

Mrs C aged 92 lived in a small village with good family support. She wanted to remain independent. She had an alarm, falls detector, and door exit sensor fitted to which she is happy for her family to respond.

Mrs A lived a distance from her family although they visit regularly. She moved from a lower level of the service to a more intensive level and now receives planned support visits. This has enabled her to remain independent, have her health and well being monitored on a regular basis and provide relief to her family. She was also sign posted on for a benefit check.

“At the age of 90 I don’t exactly have ‘goals’ except to keep as well as possible – and to remain reasonably sociable. The support I have helps me with hospital visits etc and I am really grateful for it – particularly as I have no living relatives.”

Impact made by Home Improvement Agency services

“I am very grateful to have the lift as I am no longer “marooned” upstairs for a good part of the day!”

A is an 85 year old with a long term chronic health condition and a history of non-engagement with services and of personal neglect. She was referred by her case manager to the Home Improvement Agency in West Oxfordshire as she was living in squalid conditions which meant that support staff were unable to assist her with such tasks as cooking and cleaning. The agency installed a new kitchen and following this support staff were able to provide the help which **A** required. Without this intervention the view of the case manager is that **A** would almost certainly have had to enter permanent residential care.



4. Homeless People

Key Fact

Homeless Link states⁹ that a bed alone will not solve homelessness, but access to stimulating activity can give the most chronically excluded service user a reason to get out of bed. Structured programmes of activity help service users to develop confidence, raise their expectations, and gain skills for life and work.

Key Statistic

The average rough sleeping street count figure in Oxford from 2008-11 is 11 however figures vary during the period from a low of 5 to the highest count of 22¹⁰.

Oxfordshire Context:

- In 2010-11 we spent £2.5 million on services for homeless people
- The number of people supported at any one time is under 350
- Services provide support linked to specific accommodation and are based mainly in Oxford
- Vale of White Horse and West Oxfordshire have one service each, while Cherwell and South Oxfordshire have no services of this type
- In Oxford we are commissioning a pathway for homeless people, together with Oxford City Council
- The pathway provides a structured range of services from direct access night shelter and day service to a choice of hostels depending on support needs followed by second stage accommodation with support to move onto independent living
- In other parts of the county we build support for homeless people around different types of accommodation they are living in. This often takes the form of floating support that can be delivered in service users' homes or on a drop-in basis, for example at a local community centre

How Did We Get Here?

- We have completed a tender exercise for new accommodation based services for homeless people in Oxford City using the pathway for homeless services established with stakeholders. The services started in 2009-10.
- In late 2010 we made use of a new build property in Littlemore, Oxford, for part of a second stage move on service with affordable rent for homeless people who are ready to start work.
- We have designed, advertised and implemented a new hybrid service in West Oxfordshire for single homeless people and young people. This service started in October 2010.
- We have regularly monitored and audited the performance of the new services and there has been a large improvement in the number of homeless people achieving independent living.

Impact

- The pathway has enabled more service users to move through services in a planned way, building skills which lead to living independently
- Access to services has been improved with a system of assessment and prioritisation
- The addition of a new build property with affordable rent to a second stage service is an extra incentive to service users completing their pathway and gaining employment whilst still engaging with support

Key Measures of Success or Failure

- The major success over the last 3 years has been the vast improvement in the proportion of homeless people achieving independent living, below 50% for 2007-08 and above 60% for 2009-10 and 2010-11¹¹
- There has been an increased number of homeless people helped to manage their physical health over the last 3 years from 58 to 139 to 154 (2007-08 to 2009-10 data)¹²
- The number of people assessed as ready to move on is monitored through number of successful departures via audit work. The number here over the last 3 years has moved upwards from 454 (2007-08) to 484 (2009-10)¹³

Key Issues

- Despite increasing opportunities, many homeless people are not accessing employment, training or education¹⁴
- Oxfordshire still experiences rough sleeping and the government focus is to end this by 2012¹⁵.
- 2010-11 has seen a sharp increase in the number of people sleeping rough from the A10 countries who do not have recourse to public funds and therefore cannot be supported by the programme¹⁶
- A national driver around mental health and the needs of homeless people is the need to meet the psychological and emotional needs of homeless people, particularly where this derives from complex trauma in childhood¹⁷.

Key Actions

Between April 2011 and March 2012 we will:

- Continue to work with providers to improve outcomes for service users particularly around tackling worklessness and increasing participation in positive activities such as education and training.
- Sustain the current level or continue to increase the number of homeless people achieving independent living.
- Work together with districts to help eliminate rough sleeping across Oxfordshire
- Continue to work with providers and service users to encourage client involvement in the wider community
- Build on close links with the new mental health services around complex trauma to provide advice and expertise

What service users, carers, agencies and stakeholders have told us about the services we fund:

Comments from service users from O’Hanlon House and Julian Housing:

“To tell you what Julian Housing has done for me I would need much more space than this. So, to put it as simply as possible, I feel that Julian Housing have given me my life back and a chance to maybe be happy again.”

“I have never been to school in my life, and I thought I would never get a job, but I have at the post office and that’s because the staff here helped me. But I still think they get us up too early, especially at weekends!”

“I gradually came to believe I could get back into work and started to apply to employers with new-found confidence. I got a job as a bricklayer and am about to leave O’Hanlon House. I never could have achieved it without the help I received from the resettlement team.”

Case Study from Street Services Team

JMF is a 40 year old male with a history of homelessness and rough sleeping dating back over 25 years. JMF has a history of drug and alcohol abuse and has not settled anywhere for longer than a few months over the last 2 years. JMF is 19 months clean. In 2009 JMF was diagnosed with dystonia, a physical disability affecting the brain and the way it communicates messages to your muscles. This disability can be brought on by stress or drug use.

JMF came to the attention of homeless services in 2010 when seen sleeping rough by the Street Services Team. JMF engaged with the team and was able to access day services at O’Hanlon House. JMF was supported into O’Hanlon House by the SST and progressed very quickly through to the resettlement floor. JMF remained at O’Hanlon House for 6 weeks before being referred on to Simon House.

JMF has been at Simon House for 6 months and has progressed through the first stage accommodation in to their move-on flat. This flat is self catered and offers an insight into independent accommodation. Whilst working with the Street Services Team, JMF became involved in our service user forum and has helped the team during 2 rounds of recruitment to interview candidates. JMF has been instrumental in the selection of staff for the team.

JMF is part of the Simon House resident management committee and provides a voice to the residents when going to regular management meetings. JMF credits his progress and development to his key-workers from both O’Hanlon House and Simon House. JMF has long terms plans to work within the homeless field and is in the process of applying to become a volunteer at O’Hanlon House. In addition to this, JMF has applied for a college course relating to work with drug and alcohol users.

JMF has been supported by Simon House to apply for the Oxford City general housing register and hopes to move in to his own independent accommodation within the next 12 months.

5. Generic Services

Key Fact

Floating support services are flexible and can respond rapidly to crises and prevent tenancy breakdown¹⁸

Key Statistic

Outcomes data collected by providers shows that over 75% of identified needs are being met and that 90% of people with a need for greater confidence, control and involvement have been supported to achieve this¹⁹.

Oxfordshire Context:

- In 2010-11 we spent just over £2 million on floating support services
- The two services have a combined capacity of 277 units of support
- Services are delivered on a county-wide basis and providers have bases in most of the districts which enables each provider to reflect the local priorities in each District/City area
- Service provision in Oxfordshire is characterised by innovation, imaginative use of resources and quality evidenced by both providers achieving Level B in the Quality and Assessment Framework
- In addition to contractual requirements providers have introduced drop in services and a specialist mental health service, both of which represent “added value”.

How Did We Get Here?

- Following a strategic review of existing floating support services in Oxfordshire services were procured under a new service specification that sought to create widely accessible flexible multiple needs floating support services. As a result two generic floating support services were commissioned from Connection and Stonham in 2008
- Both providers have worked constructively and engaged with partners and stakeholders to address issues and challenges with service provision.
- In 2010 the Supporting People team undertook a strategic review of floating support services. The headline findings of this review were that the services are still strategically relevant, providing a client focused personalised and responsive service which is good value for money.

Impact

- The service has made a significant contribution to the reduction in homelessness in Oxfordshire and is regarded as an essential aspect of homelessness prevention work
- The service enables vulnerable people to draw on other forms of support and access other services and opportunities in the community
- The service has had a considerable impact on establishing stable and cohesive communities through reducing the risk of harm; supporting chaotic clients to become more stable, and support with employment, training, leisure and voluntary work activities.

Key Measures of Success or Failure

- The percentage of clients enabled to maintain independent living has exceeded both the South East and the National average for generic services²⁰.
- Outcomes data for 2009-10 show that 70% of service users needed support to maximise their income and this was achieved in over 90% of these cases²¹
- Evidence from service users demonstrates that they have been supported to get into employment and training and develop and maintain supportive relationships with others²².

Key Issues

- There is a need for a more assertive outreach model²³
- Young people can be reluctant to engage with floating support²⁴.
- There is a need for a more targeted service for substance misusers and offenders²⁵.

Key Actions

Between April 2011 and March 2012 we will:

- Ensure that there continues to be a similar level of service whilst also achieving efficiencies
- Continue to work with providers to develop a more targeted, assertive approach to engage young people, offenders and people with substance misuse issues.

What service users, carers, agencies and stakeholders have told us about the services we fund:**Case Study**

One woman who went to a Connection service user event described how the service had transformed her life and in fact saved her life. She described how for many years she had suffered with agoraphobia making it impossible for her to work, socialize or engage in many normal activities. She had experienced the threat of homelessness and the stress of having debt and benefit problems but was unable to address these due to her condition. Until being referred to Connection she received almost no support and was unable even to go to GP appointments despite being unwell.

Since Connection has been working with her she says her life has been transformed. She has sorted her housing, her income and is addressing her agoraphobia. She now regularly goes to support groups, is beginning to have a social life and has been successfully treated for a cancer that had gone undiagnosed until her support worker had supported her to receive the medical care that she required for diagnosis and treatment. She reports being given a new life and regards the support she received as a life saver.

Case study

“In Oct 2008 my husband Ron died and I didn’t know which way to turn as he did all the money matters. Then I was put on to Stonham, they have helped me so much with my rent and other money matters. They have also helped me get some confidence back in myself. Anyone who gets help from this group is very lucky.”²⁶

6. People with mental health problems

Key Fact

Recovery based support services achieve improved outcomes for people with mental health issues.

Key Statistic

Mental health problems affect one in four of us at some time in our lives.

- They are a major cause of distress for individuals and their families.
- They cost society an estimated £105 billion every year through lost productivity and avoidable costs for the criminal justice system as well as the costs of care and support.²⁷

Oxfordshire Context:

- We have a countywide approach and commitment to achieving recovery signed up to by a range of organisations and stakeholders.
- We have a pathway of services in place that are focussed on helping people achieve independence and sustain ordinary lives in the community with the right support. These services began on 7th March 2011.
- We are providing £1.85 million a year funding to mental health housing and support services.

How Did We Get Here?

- We developed a 3 year mental health housing and support strategy-*From Supported to Independent Living*. Developed in partnership with Oxfordshire County Council Adult Social Care and Oxfordshire Primary Care Trust and has involved service users, carers, providers and the mental health Trust.
- We developed a framework agreement setting out the principles, aims and objectives our approach to housing and support for people with mental health problems, with a clear emphasis on recovery. This approach has been endorsed by:
 - The District, City and County councils of Oxfordshire
 - Oxfordshire Primary Care Trust
 - Oxfordshire and Buckinghamshire Mental Health Foundation Trust
 - Agencies funded by these organisations to provide mental health services
- We bought a range of new mental health housing and support services replacing the services delivered within Oxfordshire. These have been bought jointly with Oxfordshire Primary Care Trust and Oxfordshire Adult Social Care. These services will work as a pathway, helping people to progressively achieve greater independence and autonomy through recovery.

Key Measures of Success or Failure

- We bought more places of support than were previously available (increase of 10%) at a lower cost (20% saving).

- We increased our commitment to floating support ensuring that individuals are able to be supported regardless of tenure, and that resources are used in the most cost effective way.
- Our integrated commissioning team (including the Primary Care Trust) have won an award from the Strategic Health Authority for innovation for the way in which these services were commissioned.
- This work is recognised and was published nationally.²⁸
- The numbers of people with mental health problems supported to gain independent living has increased rapidly over the last 3 years from 43 to 69 to 106 (2007-08 to 2009-10)²⁹
- There have been an increased number of people supported to manage their mental health better (mental health client group for short term services). This number in 2007-08 was 126, in 2008-09 it increased to 176 and in 2009-10 it was 168³⁰
- The data for adults in contact with secondary mental health services who are in employment is only available for one year. The data shows Oxfordshire with a score of 10.8% for 2009-10 compared to the England score of 6.7%³¹

Key Issues

- Access needs to be improved via a single referral pathway for all new mental health housing and support services.
- New services will need to work more creatively with individuals with complex needs and with those with personality disorder diagnoses.
- Support needs to be flexible, personalised and targeted to those who need it, when they need it.

Key Actions

Between April 2011 and March 2012 we will:

- Ensure new services work effectively with each other as a pathway to independence.
- Work closely with Community Mental Health Teams, District Councils and Housing providers to ensure availability of move on options for people with mental health issues.
- Work with service users and carers to ensure that they continue to be involved in shaping and personalising services to best meet their needs.

What service users, carers, agencies and stakeholders have told us about the services we fund:

“I am really glad I had the opportunity to take part in the process as it gave me a great sense of achievement in being able to help by using my own past experiences and being able to have help shape things for the better in the future of the mental health services here in Oxfordshire”.

Response and **Oxfordshire Mind** Housing Pathway Project, funded by NHS South Central Innovation Fund, is a new project that will work with people with mental health conditions in Oxfordshire. It aims to support 50 users to make applications to Choice Based Lettings (CBL) and Rent Deposit Schemes throughout the county. They will do this by providing choice for clients and challenging mental health workers to consider more independent housing options. This project includes partners from local authorities (SP and Housing) and health. It aims to provide sustainable change by introducing new housing pathways, a Pathway Information Pack and on-going peer group support.³²

7. Young people and teenage parents

Key Fact

Research shows that the transition from youth to adulthood can be a difficult and uncertain time for many young people. Housing related support is important to assist these young people through this transition, enable them to achieve their potential and enter training and paid employment. In addition, if teenage parents receive the right support at the right time most are able to live independently in the community.

Key Statistic

At the end of February 2008 thirty young people aged 16 to 18 were in unsuitable temporary accommodation in Oxford City. At the end of January 2011 three young people aged 16 to 18 were in unsuitable accommodation in Oxford City³³.

Oxfordshire Context:

- We commissioned together with our colleagues in the Children Education and Families Directorate and the District Councils a pathway of services for young people and teenage parents across the county
- The services are focused on prevention and early intervention as well as supporting young people to independence
- In 2010-11 we spent £1.7 million on these services.

How Did We Get Here?

- We have jointly commissioned housing and support services. As a result our work has received recognition nationally from Communities and Local Government (CLG).
- In addition, the Pathway of Services is cited by the Commissioning Support Programme as an example of good practice
<http://www.commissioningsupport.org.uk/resource-bank/children-and-families/looked-after-children-best-pr.aspx>
- We commissioned these services on time and within budget, achieving savings of 24% for Supporting People commissioned services.
- We changed all accommodation based services to make sure they support people with high level of need.
- We created partnership arrangements with Children's Services and the District Councils to ensure that we accommodate only those young people with the highest level of need and wherever possible young people remain in the family home.

Impact

- Across Oxfordshire we are housing a higher percentage of the most vulnerable young people aged 16 and 17. In June 2010 in our Supporting People funded accommodation we were accommodating 28 16 and 17 year olds, by November 2010 this number had risen to 45.
- The first two quarters of the newly commissioned services have seen a dramatic increase in the number of young people and young families achieving

independent living. Young people planned departures increased from 68.9% in 2009-10 to 78.2% in 2010-11 (first two quarters)³⁴

Key Measures of Success or Failure

- The number of young people achieving independent living has increased from 2007-08 (105) to 2010-11 (105 for the first three quarters). The number of teenage parents achieving independent living has decreased from 2007-08 (40) to 2010-11 (23 for the first three quarters). A high proportion of teenage parents achieve independent living, over 90% for each year³⁵
- The proportion of young people participating in positive activities has decreased from 71.2% in 2008-09 to 61.7% in 2009-10³⁶
- The proportion of young people misusing substances has not reduced, From 2008-09 to 2009-10 the proportion increased from 8.8% to 10%³⁷
- The proportion of 16 to 18 year olds who are in education, training or employment has decreased from 95.8% in 2007 to 93.5% in 2009³⁸
- There has been an increase in the proportion of care leavers in suitable accommodation from 85.7% in 2007-08 to 91.8% in 2008-09³⁹
- There has been an increase in the proportion of care leavers in employment, education or training from 65.1% in 2007-08 to 77.6% in 2008-09⁴⁰
- The number of teenage parents supported to manage their physical health better has fluctuated over the last 3 years from 3 to 5 to 2 (2007-08 to 2009-10 data)⁴¹

Key Issues

- Too many young people leaving home.
- Keeping young people at home wherever possible.
- The use of unsuitable temporary accommodation by young people.
- Despite increasing opportunities many young people are not accessing education employment or training (EET).
- Care leavers are insufficiently integrated into all supported accommodation.
- Not enough services meet the need of the whole family, including accommodating couples.
- Services are not spread evenly across the county.

Key Actions

Between April 2011 and March 2012 we will:

- Monitor the performance of services to ensure they deliver the expected outcomes for young people. This will be done using monitoring visits on a quarterly basis to all services and to appraise each service comprehensively by June 2012 using the QAF (Quality Assessment Framework).
- Through the Joint Housing Team we will continue to develop both operational and strategic partnerships with Children's services and our District Council partners.
- We will continue to work more closely with the County Council's Children, Young People and Families services to ensure better outcomes for Looked After Children and Care Leavers including those who are young parents.
- In addition we will continue to build closer links with other Pathways to improve outcomes.

What service users, carers, agencies and stakeholders have told us about the services we fund:

Case Study

The foyer and vTalentYear took a chance on me. They've made me determined to prove that I'm more than a criminal record."

Linval, now 22, was brought up in London until he was 15. He has experienced various difficulties in his life, and has been in prison three times.

'My mum was being beaten up by my sister's dad, and she took us to Oxfordshire, where she came from. She didn't tell me we were moving for good. Now I see she had to get away, but I was really angry then, I'd lost everything I knew.'

Linval was out of school for several months, and then went into year 10, made friends and gained seven GCSEs, including two Cs in science:

"I enjoyed science and got on well with the teacher, but I struggled with the written work. It was only when I went to prison that I found out I was dyslexic. Before that I just thought I was thick."

After school, Linval worked as a labourer and decided he wanted to become a bricklayer. He completed an E2E course and then did an apprenticeship in bricklaying. But things were going wrong in other ways. 'I was mixing with the wrong crowd and drinking and taking drugs. When I drank I'd get into fights, and I ended up in prison.'

He had nearly completed his apprenticeship when he went to prison for the third time.

"It was my fault but it was for something really pathetic. But I'd breached my tag, so I went back to prison, and spent my 21st birthday there. I realised I could spend the rest of my life in and out of prison."

By this time Linval's mother had died and he was homeless. He knew he needed to change and gained a place at Abingdon Foyer.

"Abingdon Foyer took a risk and offered me a place on a final warning – if I messed up I'd be out. It had rules about friends, so this helped me break away from my old friends. I made new friends, people who wanted to do something with their lives. The foyer feels like a family."

Once living at the foyer, Linval took part in a range of activities, based the action plan he developed with his support worker.

“They help me work out what I want and what I need to do. They make me want to learn and change. I've had courses to help me manage my anger and my drinking, and I can now have a drink without getting into fights.”

His support worker encouraged him to go to an open day for the vTalentYear programme, and he is now working as a full-time volunteer at Abingdon Youth Centre.

“It was awkward at first, because I used to come here and make trouble so I had a reputation. But the staff have accepted me, and I feel like one of the team. Andy [the youth worker] realised that I wanted to change.”

“I do different activities with young people, but can also use my experiences to help them. When I talk about prison I'll stress how boring it is, not that it's scary, so they don't think they'll get kudos for being hard. I'm not here as a mate, but as a worker. I'll challenge them if I have to. I'm mixed heritage and you get racism here, it's ignorance, so I'll help them think about things like language. I had to split up a fight and was proud of how I did it. Being given responsibility builds up my confidence step by step.”

Linval has already gained various qualifications through the foyer and E2E programme, and will gain a level 2 qualification in community volunteering through vTalent. When he completes the programme, he aims to get a job as a youth support worker:

“I'm well known in Abingdon, but now I'm known for the right things. If I can help someone not go down the same path, then my experiences haven't been wasted.”

Linval is now employed as a sessional support worker at the Foyer having successfully moved into his own social housing.

8. Women and men at risk of domestic abuse

Key Fact

Oxfordshire has a nationally recognised integrated multi agency domestic abuse strategy⁴² incorporating prevention, early intervention, risk management and ongoing support and encompassing adult victims, children and perpetrators. Housing related support plays a key role in the strategy and in reducing the risk of domestic abuse.

Key Statistic

The Home Office estimates that 12,500 women will have experienced domestic abuse in Oxfordshire last year⁴³. This figure excludes men and people aged over 60 and under 16.

Oxfordshire Context:

- In 2010-11 we spent just under £400k on services for women and men at risk of domestic abuse
- Following commissioning, all the Supporting People funded services are provided by one provider.
- The number of people (or families) who are being supported at any one time is 29 in refuge accommodation and 42 through outreach
- The services for domestic abuse are spread through the county.
- Cherwell district has a refuge service, an access and resettlement service and shares the Outreach service of 24 places with West Oxfordshire
- Oxford city has a refuge service and an access and resettlement service
- South Oxfordshire and Vale of White Horse share a refuge service and an access and resettlement service

How Did We Get Here?

- We have commissioned new services in Cherwell and Oxford City. Some of these services are supporting women and children in a refuge setting, with others being delivered by outreach staff in all types of accommodation. These services started throughout 2008.
- Oxfordshire has a helpline service and the number is promoted by all agencies as the point of contact for victims seeking advice and help. The helpline acts as a signpost to all services including the Independent Domestic Violence Advisors (IDVA) service for high risk victims as well as Supporting People services. It averages around 300 calls a month.
- In 2009, we have commissioned a new outreach service in Cherwell and West Oxfordshire. This service started on 1 January 2010. It provides support to both men and women.
- In summer 2010 a new build refuge able to support 4 families was opened in South Oxfordshire.

Impact

- The services have enabled people at risk to have control over their lives
- Women accessing the refuge services have been assisted to feel safe and supported
- The services have enabled more women to be able to secure and sustain their independence

Key Measures of Success or Failure

- There is a significant number of women from different Black and Minority Ethnic groups accessing these services. 76 which is 30% of the users from 2007-10 are BME cases⁴⁴
- There has been fluctuation in the number of women at risk of domestic abuse achieving independent living over the 3 years from 50 to 18 to 75 (from 2007-08 to 2009-10)⁴⁵
- There has been an increased number of women at risk of domestic abuse supported to minimise harm / risk of harm from others over the last 3 years from 26 to 50 to 82 (2007-08 to 2009-10 data)⁴⁶
- There has not been an increase in the number of women at risk of domestic abuse supported to access legal advice from 77 (2008-09) to 44 (2009-10)⁴⁷

Key Issues

- Oxfordshire does not have a 24 hour domestic abuse helpline available 7 days a week. The current helpline is only available during office hours and not at the weekend⁴⁸.
- Despite the outreach service being available for men in two areas of the county, there has been little if any uptake of this new service⁴⁹.

Key Actions

Between April 2011 and March 2012 we will:

- Monitor the performance of services and work with the provider to ensure the services deliver the expected outcomes for men and women at risk of domestic abuse
- Work with other local agencies to make our services easier to access
- Work more closely with the Oxfordshire Domestic Abuse Strategy Group with a view to assessing best value use of resources in the context of service planning and commissioning for the strategy as a whole
- Explore opportunities for increasing the availability of the domestic abuse helpline to 24 hours a day, 7 days a week.

What service users, carers, agencies and stakeholders have told us about the services we fund:

Case Study

A client referred herself to the service following advice from her CPN. Although she had been divorced for 10 years, her ex husband was still being very controlling and abusive. The client was very scared of him and unsure of how to deal with the situation.

Initial work was all around gaining the client's trust so that she could feel confident to disclose information and be believed. This took some months to achieve. Once the client was more relaxed we started to look at the dynamics and tactics that were being used, with a lot of reference to the Freedom Programme models. This helped the client to understand that she was not responsible for the abuse and to be able to make sense of her experiences.

As her confidence increased she engaged a solicitor to write to her ex husband to put child contact arrangements on a more formal basis. Previously he just turned up unannounced and the contact would take place in her home rather than his. Although he did not respond to letters from her solicitor he did stop coming to the house and the children now have regular contact with him in his home. The client now feels that her house is her home as she is not constantly being criticised and undermined by her ex husband.

The client successfully finished her first year in college and she started at university in September 2010.

9. People with substance misuse problems

Key Fact

Around 400,000 benefit claimants (around 8% of all working age benefit claimants) in England are dependent on drugs or alcohol and generate benefit expenditure costs of approximately £1.6 billion per year. If these individuals are supported to recover and contribute to society, the change could be huge⁵⁰.

Key Statistic

Oxfordshire has an estimated problematic drug using population of 3,182⁵¹.

Oxfordshire Context:

- In 2010-11 we spent £220k on services for people with substance misuse problems
- The number of people supported at any one time is 20
- Services provide support linked to specific accommodation and there are two services based in Oxford city and one in Cherwell district
- Vale of White Horse, West Oxfordshire and South Oxfordshire have no services of this type
- We are working closely with Oxfordshire Drug and Alcohol Action Team to commission services which complement the treatment services funded by the DAAT
- The services are for people who are experiencing problems with drugs and/or alcohol
- In other parts of the county we build support for people with substance misuse issues around different types of accommodation they are living in. This often takes the form of floating support that can be delivered in service users' homes or on a drop-in basis, for example at a local community centre.

How Did We Get Here?

- We have reviewed all substance misuse services and decided what services we wish to provide in the future.
- Together with the Oxfordshire Drug and Alcohol Action Team we have commissioned new accommodation based services in Oxford City and Cherwell. These services started in April 2009.
- We have also jointly commissioned the new, larger residential drug and alcohol detoxification project in Oxford City. This project started in November 2010. This project is already assisting substance misusers to achieve abstinence and positive move on to lead productive substance free lives.
- We have regularly monitored and audited the performance of the new services to ensure an increase in people with substance misuse issues achieving independent living and an improvement in the delivery of expected outcomes for this client group.
- We have facilitated closer working at ground level and have invited substance misuse providers to take part.

Impact

- There has been a year on year increase in the number of problematic drug users receiving effective treatment in Oxfordshire⁵².
- Substance misuse provider participation in countywide road shows has promoted their services and made them more accessible.
- Close working with Oxfordshire DAAT and drug treatment services has ensured that appropriate referrals are made to the services.
- The services have enabled service users to maintain the gains they have made through treatment for substance misuse.

Key Measures of Success or Failure

- There has been fluctuation in the number of people with substance misuse problems achieving independent living over the past 3 years from 12 to 5 to 17 (2007-08 to 2009-10 data)⁵³.
- There has been an increase in the proportion of service users supported to manage their substance misuse issues better from 50% in 2008-09 to 65% in 2009-10. There has not been an increase in the number of these cases, the numbers are from 146 to 141 to 112 (2007-08 to 2009-10 data)⁵⁴.
- There has been an increase in the proportion of service users supported to manage their mental health better from 64% in 2008-09 to 76% in 2009-10. There has been fluctuation in the number of these cases over the past 3 years from 67 to 73 to 60 (2007-08 to 2009-10 data)⁵⁵.
- The proportion of service users who achieve training / qualification has increased over the last 3 years from 9% to 13% to 19% (from 2007-08 to 2009-10). There has been fluctuation in the number of service users supported to take part in training and / or education over the past 3 years (from 60 to 67 to 42) and achieve training / qualification (from 11 to 21 to 19)⁵⁶.
- There has been a slight decrease in the number of service users supported to get paid work from 10 to 8 to 7 (2007-08 to 2009-10 data)⁵⁷.
- Of the estimated problematic drug using population of 3,182 in Oxfordshire, over 2,000 are in structured treatment each year. This is one of the highest penetration levels in the country against the University of Manchester prevalence of problematic drug users⁵⁸.

Key Issues

- Despite increasing opportunities, many people with substance misuse issues are not participating in positive activities such as employment, training or education⁵⁹.
- Outcomes for service users need to be improved further. Despite the current comprehensive system not enough people are leaving treatment successfully and living drug free, productive lives⁶⁰.
- Close links need to be built on with the new mental health services around dual diagnosis and complex needs to provide advice and expertise.

Key Actions

Between April 2011 and March 2012 we will:

- Continue to work closely with Oxfordshire Drug and Alcohol Action team to jointly commission services to increase recovery opportunities for substance misuse users.

- Sustain the current level or continue to increase the number of people with substance misuse issues achieving suitable move on from services into further treatment and/or independent living.
- Work with our substance misuse partners to ensure that supported housing and floating support staff are trained to enable them to effectively support this client group, thus reducing failed tenancies and eviction and improving outcomes and successful exit from the treatment system.
- Continue to work with providers to ensure that more people are enabled to take part in positive activities such as education and training, and take up paid work.
- Continue to promote joint working between substance misuse services and housing providers to increase opportunities for recovery and positive move on.

What service users, carers, agencies and stakeholders have told us about the services we fund:

Case Study

I was using Class A drugs for 20 years until 15 months ago. From the age 15 I spent 20 years in borstal, young offenders and prison. I had a moment of clarity 15 months ago when I realised I was either going to die or do a very long prison sentence. I had just broken up with my partner who was pregnant with my son and I was determined to be a part of his life.

When my son was born I had already been clean of class A drugs for 4 months – I was sofa surfing and spending time in the Night Shelter. My son was on an interim care order as soon as he was born and then fostered with the view of him being adopted in the future.

Fortunately, I moved into Osney Court 2 days after my son was born. I needed to be in a clean environment to help me remain abstinent from Class A's and to get my son out of care.

I have my own flat in Osney Court, I went through 10 months of 'assessment' from Social Services and I was eventually (after a long process) able to start having him stay overnight. The flat is brilliant, it was the ideal environment for me – I had never had my own place before and at 45 I had somewhere I could call my own home. I felt safe and secure for the first time in years.

The best thing about Osney Court is the privacy you get from having your own flat with your own front door but still knowing the support is there. I have key work sessions weekly and pop to the office regularly for a chat and a cup of coffee!

I have learnt some valuable lessons in Osney Court, I have learnt to pay bills, budget properly and (most importantly) have started to understand when and how to ask for help.

I now have full custody of my son, am looking to move into my own flat in the next month and have been clean of Class A drugs for 15 months. I truly believe I wouldn't have been able to achieve all these things if I hadn't moved into Osney Court.

10. Offenders

Key Fact

Homelessness increases the risk of re-offending and having been in prison
Increases the risk of homelessness⁶¹

Key Statistic

At any one time there are likely to be over 200 offenders under statutory supervision in Oxfordshire with an accommodation need. Within this group approximately 50 (25%) are likely to be priority need offenders (Prolific and other priority offenders (PPO's), those subject to Multi Agency Public Protection Arrangements (MAPPA) and substance misusers) who are in unsuitable accommodation and in need of support⁶².

Oxfordshire Context:

- There are no Supporting People funded services in Oxfordshire where offenders are the primary client group
- There is a clear pathway within Supporting People funded services for offenders leaving prison and who are in the target group of those subject to MAPPA, PPO's and those whose offending is linked to substance misuse.
- There is a wide range of Supporting People funded accommodation-based services for the single homeless which are accessible to offenders and specialist accommodation based substance misuse services
- There are floating support services which are accessible to offenders
- There is access to the private sector for offenders in all districts (apart from Oxford City) via Rent Deposit schemes

How did we get here?

- In 2008 the decision was made to decommission services for offenders as these services were not deemed to be strategically relevant
- A review of Supporting People services has been carried out to determine what services are available to offenders, whether these are being accessed by offenders and the outcomes for offenders
- We have consulted widely with key strategic and operational partners in order to establish the level of need for housing related support among offenders
- We have mapped a pathway through services for the priority group of offenders and now are clearer about which offenders access which services. We have identified ways forward which are cost-free to improve the response to offenders in housing need.
- We have identified the need for both a deposit scheme targeted on offenders and a targeted floating support service.

Impact

An analysis⁶³ of high level outcomes (2009-10) for service users with an offending history reveals the following:

- 79% of those with a need to keep to a statutory order had this need met
- 51% of those with a need to maintain their accommodation had this need met
- 1 in 2 offenders move on in a planned way from accommodation based services for the single homeless
- 76% with a need to establish contact with external services or friends and family had this need met

Key Measures of Success or Failure

- The number of offenders supported to achieve independent living has increased from 1 person in 2007-08 to 9 people in 2008-09⁶⁴
- There has been a reduction in the rate of re-offending in Oxfordshire for adult offenders⁶⁵
- There has also been a reduction in the rate of re-offending in Oxfordshire for prolific and other priority offenders⁶⁶
- The proportion offenders who are in employment at the end of their order have increased from 56.3% in 2007-08 to 57.6% in 2008-09. Both these scores are above the England scores of 48.7% and 46.5%⁶⁷
- There has been an increased number of people with improved compliance with drug treatment orders. For 2007-08 there are 65 successful completions and for 2009-10 there are 122 successful compilations⁶⁸
- The proportion offenders who are in settled and suitable accommodation at the end of their order have decreased slightly from 80.6% in 2007-08 to 80.4% in 2008-09. Both these scores are above the England scores of 77.4% and 78.6%⁶⁹

Key Issues

- There is limited access to the full range of housing options for offenders⁷⁰
- The transition from prison and out of approved premises remains a key area where meeting housing and support needs is crucial in preventing reoffending⁷¹
- There is a lack of dedicated housing advice and advocacy to challenge decisions, broker accommodation and support, and take responsibility for the housing and support needs of offenders⁷²

Key Actions

Between April 2011 and March 2012 we will:

- Take forward actions to address gaps and pressures identified in the Report on Offenders with strategic partners and stakeholders
- We would seek opportunities to make best use of available resources to improve access to the full range of housing options and maximise benefits from existing services.

What service users, carers, agencies and stakeholders have told us about the services we fund:

A had a long history of substance misuse and offending and had spent long periods in custody on different sentences.

He was on a methadone script and drinking 5 to 7 litres of cheap white cider daily, and had been diagnosed with schizophrenia and epilepsy.

At the time of his referral to floating support services he was sleeping in a car and had been arrested for driving without insurance.

His support worker arranged a homeless person's interview and temporary accommodation was provided for **A**.

This accommodation and the support provided gave **A** the degree of stability and security he required to address his addictions which were strongly linked to his offending.

His support worker referred **A** for assessment for Rehab and funding was given so that he could start a 12 step recovery based treatment programme.

11. People with physical disabilities, sensory impairment or acquired brain injury

Key Fact

One of Oxfordshire County Council's strategic objectives for adult social care is to assist those with a disability to live independently in the community⁷³.

Key Statistic

PANSI (Projecting Adults Needs & Service Information System) estimates there will be 40537 people with a serious and moderate physical disability between 18-64 in Oxfordshire by 2015.

Of these 31530 (78%) will have a moderate physical disability, while 9007 (22%) will have a serious physical disability. This figure is endorsed by the 10060 people between 18-64 who receive a Disability Living Allowance in Oxfordshire⁷⁴.

Oxfordshire Context:

- In 2010-11 we spent £150,000 on specialist services for people with physical disabilities
- This funding is used to support about 50 people at any one time, including:
 - Supported housing with specialist support - 12 units of accommodation with support in Cherwell
 - Specialist floating support – 25 units of support across Cherwell, West and Oxford
- In addition, large number of people with physical disabilities is successfully accessing support offered by other services funded by the programme, including:
 - Home Improvement Agency services that support older people and those with a disability by providing adaptations to properties⁷⁵
 - Generic floating support that offers advice and interventions to sustain tenancy across all types of vulnerability⁷⁶
 - The Alert service, which provides support and telecare solutions enabling people to remain safe at home.

How Did We Get Here?

Between April 2008 and March 2011 we have

- We have started to review all specialist services for people with physical disabilities which are funded by Supporting People
- We reviewed all Home Improvement Agency services and considered how well they assist people with physical disability to live independently
- We contributed to the production of the Oxfordshire County Council's strategy for people with physical disabilities and to the Joint Housing Plan referenced earlier in this section

Impact

- Low level support combined with home adaptations and telecare services has enabled people with a physical disability to sustain independence and remain living in the community⁷⁷
- We have started working closer together across social care, health, housing and support agendas to consider and address key issues for people with physical disabilities

Key Measures of Success or Failure

- In 2007-10 number of people supported to maintain their independence decreased gradually to below 91%. During the same period supported living services saw lower rates of throughput⁷⁸
- There have been an increased number of physical disability service users having more choice and/or involvement and/or control in their own lives over the past 3 years. The number per year are 18 to 25 to 25 (2007-08 to 2009-10 data)⁷⁹

Key Issues

- Specialist services are not currently available countywide and there continues to be a need for a small amount of accommodation with support for some people. This may serve as the first stage for people towards independent living or provide longer term housing for those with complex needs.
- Further work is required on understanding the level of support and description of these units.
- The provision of supported accommodation will need revenue funding for the support service provided and this will need to be found through existing budgets from re-provision of services or other sources at planning stage.

Key Actions

Between April 2011 and March 2012 we will

- Complete the review of all specialist services for people with physical disabilities we fund
- Consider the need for countywide access to services
- Consider the impact of the personalisation agenda and the use of personal budgets for this client group

12. Gypsies and Travellers

Key Fact

Gypsies and travellers are at greater risk of homelessness than the general population, and less likely to be well linked into available services.

Key Statistic

The prevalence of homelessness amongst gypsies and travellers is 18% compared to just 1% for the general population.

Oxfordshire Context:

- At present we do not fund specialist housing related support for gypsies and travellers.

- We do, however, look at all services we fund to see to what extent they are able to support people from a diverse range of backgrounds and with a variety of needs

How Did We Get Here?

Between April 2008 and March 2011

- We have recognised that there was widespread lack of understanding of gypsies and travellers' need for housing related support.
- To begin to address this issue we have, when an opportunity presented itself, arranged for housing related support needs of gypsies and travellers to be included in a Thames Valley survey of their housing needs.

Impact

- Based on information available to us it is not possible to say to what extent gypsies and travellers find it easy to access information about housing related support and local services on offer.

Key Measures of Success or Failure

- We have seen a small increase in the number of gypsies and travellers accessing housing related support services, from only two people in the five years 2003-08 to 7 people in 2008-10⁸⁰

Key Issues

- Information about gypsies and travellers who received housing related support indicates that they have a range of needs associated with homelessness, history of domestic abuse and mental health illness. They access both accommodation based services and floating support.
- It is suspected that gypsies and travellers chose not to describe themselves under this category when they use services and therefore current data under-represents their numbers. This makes it difficult to adequately assess met and unmet need among this population.

Key Actions

Between April 2011 and March 2012 we will

- Work with other agencies to find another approach to making sure that gypsies and travellers access housing related support services
- Assess what changes to existing services or new specialist services may be required

13. References

¹ Page 11, LD Commissioning Strategy 2009-11 plus Poppi & Pansi data sets (2011) to extend current population projections to 2016

² Supporting People National Indicator 141 measured quarterly service by service, April 2007 to December 2010, Oxfordshire submissions to CLG

³ National Indicator 145, Communities and Local Government HUB data as at October 2010, 2008-09 to 2009-10

⁴ National Indicator 145, Communities and Local Government HUB data as at October 2010, 2008-09 to 2009-10

⁵ Oxfordshire County Council, Commissioning Strategy 2008-11 Learning Disability Services in Oxfordshire – Section 1, Analysis of needs and guidance, pages 7-18, and Housing, pages 20 - 21

⁶ 'Ageing successfully: forward from 50' Oxfordshire's strategy for ageing 2010-2015, NHS Oxfordshire and Oxfordshire County Council

⁷ Supporting People National Indicator 142 measured quarterly service by service, April 2007 to December 2010, Oxfordshire submissions to CLG

⁸ Supporting People payments data for August 2008 and September 2009 - In August 2008, we had records of the ethnic origin of 3,265 people receiving Supporting People payments to help with the cost of services for older people. Of these, 2,964 (90.8%) were White British. In September 2009 the White British score was 3,278 out of 3,506 (96.5%)

⁹ 'You put both hands in' article on Homeless Link website as featured in the winter 2009/10 issue of Connect magazine

¹⁰ Oxford City Council – 'Review of Strategic Priorities for Rough Sleeping and Single Homelessness 2011-2012'

¹¹ Supporting People National Indicator 141 measured quarterly service by service, April 2007 to December 2010, Oxfordshire submissions to CLG

¹² Supporting People Short Term Outcomes Monitoring Data 3a available quarterly and annually, May 2007 to March 2010

¹³ Supporting People National Indicator 141 measured quarterly service by service, April 2007 to March 2010, Oxfordshire submissions to CLG

¹⁴ Supporting People Short Term Outcomes Monitoring Data 1c and 2a available quarterly and annually, May 2007 to March 2010

¹⁵ Communities and Local Government national rough sleeping strategy and action plan 'No One Left Out – Communities ending rough sleeping'

¹⁶ Oxford City Council – 'Review of Strategic Priorities for Rough Sleeping and Single Homelessness 2011-2012'

¹⁷ National Mental Health Development Unit and Department for Communities and Local Government good practice guide 'Meeting the psychological and emotional needs of people who are homeless', May 2010

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- ¹⁸ DCLG Research into the effectiveness of floating support services for the Supporting People programme Final Report 2008
- ¹⁹ Supporting People Strategic Review of Floating Support Services 2010
- ²⁰ Supporting People Strategic Review of Floating Support Services 2010
- ²¹ Supporting People Strategic Review of Floating Support Services 2010
- ²² Supporting People Strategic Review of Floating Support Services 2010
- ²³ Supporting People Strategic Review of Floating Support Services 2010
- ²⁴ Supporting People Strategic Review of Floating Support Services 2010
- ²⁵ Supporting People Strategic Review of Floating Support Services 2010
- ²⁶ Client's story taken from the first edition of Stonham Oxfordshire Floating Support Client Involvement Newsletter
- ²⁷ No Health Without Mental Health: A Call to Action; Department of Health 2010
- ²⁸ Housing, Care and Support 10, Volume 13 Issue 4, December 2010.
- ²⁹ Supporting People National Indicator 142 measured quarterly service by service, April 2007 to March 2010, Oxfordshire submissions to CLG
- ³⁰ Supporting People Short Term Outcomes Monitoring Data 3b available quarterly and annually, May 2007 to March 2010
- ³¹ National Indicator 150, Communities and Local Government HUB data as at October 2010, 2009-10
- ³² Cited in Strategic Health Authorities, Mental Health and Housing, NMH DU, 2010
- ³³ Supporting People Assessment and Pathway Usage and Data analysis report 2010, for Joint Housing Team Steering Group, March 2011
- ³⁴ Supporting People National Indicator 141 measured quarterly service by service, April 2009 to September 2010, Oxfordshire submissions to CLG
- ³⁵ Supporting People National Indicator 141 measured quarterly service by service, April 2007 to December 2010, Oxfordshire submissions to CLG
- ³⁶ National Indicator 110, Communities and Local Government HUB data as at October 2010, 2008-09 to 2009-10
- ³⁷ National Indicator 115, Communities and Local Government HUB data as at October 2010, 2008-09 to 2009-10
- ³⁸ National Indicator 117, Communities and Local Government HUB data as at October 2010, 2007 to 2009
- ³⁹ National Indicator 147, Communities and Local Government HUB data as at October 2010, 2007-08 to 2008-09
- ⁴⁰ National Indicator 148, Communities and Local Government HUB data as at October 2010, 2007-08 to 2008-09
- ⁴¹ Supporting People Short Term Outcomes Monitoring Data 3a available quarterly and annually, May 2007 to March 2010
- ⁴² Oxfordshire Domestic Abuse Strategy 2009-2012

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- ⁴³ Home Office 'Violence against women and girls reckoner' – calculation tool 2010 based on regional data from British crime survey
- ⁴⁴ Supporting People New Client Record Form data available quarterly and annually, April 2007 to March 2010
- ⁴⁵ Supporting People National Indicator 141 measured quarterly service by service, April 2007 to March 2010, Oxfordshire submissions to CLG
- ⁴⁶ Supporting People Short Term Outcomes Monitoring Data 4c (iii) available quarterly and annually, May 2007 to March 2010
- ⁴⁷ Further information supplied by providers on Supporting People Performance Indicator returns measured quarterly service by service, April 2008 to March 2010
- ⁴⁸ The helpline is not funded by Supporting People but currently sits with the provider commissioned to provide all domestic abuse services funded by Supporting People in Oxfordshire
- ⁴⁹ Supporting People New Client Record Form data available quarterly and annually for Service 1215, April 2009 to September 2010
- ⁵⁰ Home Office 2010 drug strategy, 'Reducing demand, restricting supply, building recovery: supporting people to live a drug-free life' released on 8 December 2010
- ⁵¹ Oxfordshire DAAT: Adult Drug Treatment Plan 2010-2011
- ⁵² Oxfordshire DAAT: Adult Drug Treatment Plan 2010-2011
- ⁵³ Supporting People National Indicator 141 measured quarterly service by service, April 2007 to March 2010, Oxfordshire submissions to CLG
- ⁵⁴ Supporting People Short Term Outcomes Monitoring Data 3c available quarterly and annually, May 2007 to March 2010
- ⁵⁵ Supporting People Short Term Outcomes Monitoring Data 3b available quarterly and annually, May 2007 to March 2010
- ⁵⁶ Supporting People Short Term Outcomes Monitoring Data 2a available quarterly and annually, May 2007 to March 2010
- ⁵⁷ Supporting People Short Term Outcomes Monitoring Data 1c (i) available quarterly and annually, May 2007 to March 2010
- ⁵⁸ Oxfordshire DAAT: Adult Drug Treatment Plan 2010-2011
- ⁵⁹ Supporting People Short Term Outcomes Monitoring Data 1c and 2a available quarterly and annually, May 2007 to March 2010
- ⁶⁰ Oxfordshire DAAT: Adult Drug Treatment Plan 2010-2011
- ⁶¹ Homeless Link Criminal Justice Policy Briefing April 2009
- ⁶² Supporting People Report on Offender Project 2010
- ⁶³ Supporting People Report on Offender Project 2010
- ⁶⁴ Supporting People National Indicator 141 measured quarterly service by service, April 2007 to March 2009, Oxfordshire submissions to CLG
- ⁶⁵ Ministry of Justice, Local Adult Re-offending 1 October to 30 September 2010, England and Wales, Page 22 - Published 22 February 2011. Oxfordshire cohort size

for 2009-10 is 4,331. Actual rate of re-offending is 9.10%, predicted rate of re-offending is 10.09%, % difference from 2007-08 baseline is -9.83%

⁶⁶ Home Office, Prolific and Other Priority Offenders: results from the 2008 cohort for England and Wales, Page 17 – Published March 2010. Oxfordshire cohort size is 97. Actual volume of offending for 2008-09 is 265, predicted volume is 277. Baseline volume of offending 2007-08 is 329. Actual % change against baseline is -19%

⁶⁷ National Indicator 144, Communities and Local Government HUB data as at October 2010, 2007-08 to 2008-09

⁶⁸ Thames Valley Probation Information Unit, DTTO and DRR completions for Oxfordshire, 2007-08 to 2009-10

⁶⁹ National Indicator 143, Communities and Local Government HUB data as at October 2010, 2007-08 to 2008-09

⁷⁰ Supporting People Report on Offender Project 2010

⁷¹ Supporting People Report on Offender Project 2010

⁷² Supporting People Report on Offender Project 2010

⁷³ Oxfordshire County Council Social and Community Services 'Promoting Independence' A commissioning strategy for people with a physical disability 2010-2015

⁷⁴ Joint Housing Plan for People with Physical Disabilities 2010-2015 (draft), March 2011

⁷⁵ Data from Home Improvement Agencies shows that in 2009-10 people with a physical/sensory disability made up the following proportion of clients: West – 14%, Oxford – 13%, South and Vale – 9%, Cherwell – 3%

⁷⁶ Supporting People client record data for 2007-10 shows that 265 people with a physical or sensory disability received support from the programme.

⁷⁷ Supporting People client record data for 2007-10 shows that the disability type with the highest proportion is mobility and that most referrals (39%) are made by social care staff

⁷⁸ National Indicator 142 measured quarterly, service by service

⁷⁹ Supporting People Short Term Outcomes Monitoring Data 5 available quarterly and annually, May 2007 to March 2010

⁸⁰ From New Client Record Form data, available quarterly and annually, 2003-04 to 2009-10

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Supporting People Budget - Budget Year End 2010-11 March

	2010/11 Commitments agreed at November 2010 Core Strategy Group	Year End March Actuals	Variance Year End Forecast	Comments to explain year end position
Expenditure by Client-Group				
People with Learning Disabilities	4,580,707	4,580,707	0	
People in Adult Placement	559,023	577,487	18,464	Spend includes one 2009-10 accrual
Older People, of which:				
HIAs and Direct Payments	538,700	566,462	27,762	Spend reflects contractual commitments and some additional costs due to service changes that took place
Alert Service	2,010,000	2,010,000	0	
Homeless People	2,498,288	2,430,840	(67,448)	Spend reflects contractual commitments
People with Mental Health problems	2,247,617	2,153,372	(94,245)	Reduction in subsidy claims in a number of services
Young People	1,261,996	1,549,885	287,889	Spend reflects additional contractual commitments for one service and is partly off set by Teenage Parents underpend and Leaving Care income.
Teenage Parents	501,721	437,447	(64,274)	See comment above
Generic Services	2,051,743	2,051,743	0	
People with Drug Problems	221,619	221,529	(90)	Spend reflects contractual commitments
Offenders	38,951	0	(38,951)	No contractual commitment made this year
Women at Risk of Domestic Violence	355,804	395,207	39,403	Spend reflects contractual commitments
People with Physical Disabilities	150,819	149,405	(1,414)	Spend reflects contractual commitments
People with Alcohol Problems	0	0	0	
Total Grant Expenditure	17,016,988	17,124,084	107,096	
Contribution to Admin Budget	155,000	110,016	(44,984)	Efficient use of the administration grant
Total Expenditure	17,171,988	17,234,100	62,112	
Income				
Leaving Care Income	(20,000)	(53,448)	(33,448)	Income reflects higher levels of service take up
Grant Income	(16,167,490)	(16,167,490)	0	
Contribution to BCHA	(42,992)	(43,197)	(205)	Small variance is off set by the line below
Contribution to Night Shelter	(133,432)	(133,227)	205	See above comment
Carry forward from 2009-10	(837,121)	(837,121)	0	
Total Income	(17,201,035)	(17,234,483)	(33,448)	
Deficit/(Surplus)	(29,047)	(383)	28,664	

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Supporting People Budget Forecast 2011-12		May-11						
	Service Lines	Full Year Gross Budget	SAP Forecast Gross Expenditure	Forecast over/(under) Budget	Previous Month	Variation/Movement	SAP Actuals Year to date	Comments
SKE151	Alert	1,969,800	1,969,800	0	0	0	431,004	Future reports for this service are being discussed
	People with Learning Disabilities	4,260,058	4,260,058	0	0	0	4,260,058	Budget is allocated in full at the beginning of the year
	Grand Total	6,229,858	6,229,858	0	0	0	4,691,062	
SHT211	Generic Services	1,520,708	1,520,708	0	0	0	247,844	
SHT212	Homeless People	2,314,818	2,314,818	0	0	0	391,381	
	Income (contribution to Night Shelter)	(133,432)	(133,432)	0	0	0	0	Retrospective income would be reported in June
SHT213	Offenders	152,684	152,684	0	0	0	0	Services have not been implemented yet
SHT214	People with Drug Problems	267,480	267,480	0	0	0	73,765	Costs of one service are being invoiced quarterly
SHT215	Older People, of which:							
	Direct Payments	246,092	246,092	0	0	0	68,696	
	Home Improvement Agencies	343,741	343,741	0	0	0	0	Retrospective costs would be reported in June
	Income (S&CS contribution to HIAs)	(174,730)	(174,730)	0	0	0	0	Income is being collected quarterly
SHT216	People with Mental Health Problems	1,778,022	1,778,022	0	0	0	(160,891)	Includes 2010-11 accruals
SHT217	People with Physical Disabilities	147,803	147,803	0	0	0	752	Retrospective costs would be reported in June
SHT218	People in Adult Placement	519,891	519,891	0	0	0	4,607	Retrospective costs would be reported in June
SHT219	Teenage Parents	443,355	443,355	0	0	0	67,067	Contracts are being paid in arrears
SHT220	Women at Risk of Domestic Violence	388,234	388,234	0	0	0	60,539	
SHT221	Young People	1,380,051	1,380,051	0	0	0	243,712	Contracts are being paid in arrears
	Income (various sources)	(118,402)	(118,402)	0	0	0	0	Retrospective income would be reported in June
SHT222	People with Alcohol Problems	0	0	0	0	0	0	
	Grand Total	9,076,316	9,076,316	0	0	0	997,474	
	Overall Total	15,306,174	15,306,174	0	0	0	5,688,535	
	Income (budget allocation)	(15,359,116)	(15,359,116)	0	0	0	(15,359,116)	Budget is allocated in full at the beginning of the year
	Deficit/(Surplus)	(52,941)	(52,941)	0	0	0	(9,670,581)	

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Efficiency programme update

	2011/12 Budget, net of savings target	Indicative savings, £	Indicative savings, % of the target	Identified savings, £	Identified savings, % of the target	Number of proposals requested	Total number of proposals, at stage of:		
							development	approval	implementation
Expenditure by Client-Group									
People with Learning Disabilities	4,260,058	91,614	28%	0	0%	1			
People in Adult Placement	519,891	11,180	3%	0	0%	1	1		
Older People, of which:									
Alert Service	1,969,800	40,200	12%	0	0%	1			
Direct Payments	246,092	5,022	2%	0	0%	1			
Home Improvement Agencies	343,741	3,841	1%	0	0%	4	2		
Homeless People	2,314,818	47,241	15%	65,055	20%	4	0	2	1
People with Mental Health problems	1,778,022	36,286	11%	0	0%	4			
Young People	1,380,051	28,164	9%	0	0%	6			
Teenage Parents	443,355	9,048	3%	0	0%	2			
Generic Services	1,520,708	31,035	10%	0	0%	2			
People with Drug Problems	267,480	5,459	2%	2,409	1%	2	0	1	
Offenders	152,684	3,116	1%	3,116	1%	1	0	1	0
Women at Risk of Domestic Violence	388,234	7,923	2%	22,634	7%	1	0	1	
People with Physical Disabilities	147,803	3,016	1%	0	0%	3			
Total Expenditure	15,732,738	323,147	100%	93,214	29%				
Income	(15,785,679)								
Deficit/(Surplus)	(52,941)								

Key to progress status:

Green = On target to deliver, no concerns

Amber = On target to deliver, minor concerns

Red = Not on target to deliver, major concerns

SUPPORTING PEOPLE COMMISSIONING BODY – 17 JUNE 2011

Update on programme review

Progress update

1. Methodology for the 2011-12 programme review was agreed at the Core Strategy Group meeting on 6 April. This methodology comprises project overview and first level project plan (ref: [Annex 8b](#)).
2. Second level project plan has also been produced (ref: [Annex 8c](#)). It contains more detailed descriptions of each of the work streams. These plans will be discussed at the first meeting of each work stream and finalised by the lead officers thereafter.
3. It is requested that the groups give sufficient attention to ascertaining dependencies between work streams and agreeing specific milestones for producing key deliverables, within the overarching milestones for the review. This information would be used to populate third level project plan, a draft version of which is being produced and will be tabled at the meeting.
4. By 10 May a number of key stakeholders and providers expressed their interest in taking part in the review. Their responses informed the membership of the three work streams and the list of co-opted members who are interested in making comments on draft proposals throughout the course of the review (ref: [Annex 8d](#)). This information has been used to produce a communication plan for the review (ref: [Annex 8e](#)).
5. It has become necessary to nominate a new lead officer for the third work stream due to imminent changes in the Children, Education and Families directorate's representation on the Core Strategy Group. Three lead officers are:
 - *'Strategic context and governance'* – Natalia Lachkou, Oxfordshire County Council
 - *'Needs and gap analysis'* – James Edwards, Oxford City Council
 - *'Benchmarking and best practice'* – To be elected at the first meeting of the group
6. **'Needs and gap analysis' work stream** – Core members met on 6 May to plan the work and prepare first meeting of the full group. Minutes of the meeting are attached at [Annex 8f](#). These minutes are being used to populate third level project plan for this core group.
7. Detailed work on delivering first three priority tasks identified by the group has started and is progressing well:
 - Map, analyse and select key data sources to be used

- Agree which key data analysis sources to use
 - Produce profiles of current service provision at county and district level, including Supporting People funded and non-Supporting People funded provision that directly or indirectly impacts on delivery of housing related outcomes for vulnerable groups
8. First meeting of the full group is scheduled to take place on 24 June.
 9. **‘Strategic context and governance’ work stream** – Preparation for taking this work to the next stage is going ahead. It involves obtaining the Commissioning Body’s approval of the strategy in June and undertaking initial planning with key groups of lead commissioners.
 10. For example, strategic links with the Oxfordshire Domestic Abuse Strategy Group (ODASG) have been re-established, with the Supporting People Programme manager now attending the meetings of the group. Supporting People funded provision for people at risk of / experiencing domestic abuse falls under the ‘Safety and support for victims’ element of the wider domestic abuse strategy, which has entered its third and final year.
 11. This strategy will be evaluated this year with a view to produce a refreshed strategy for 2012 and beyond. It has been agreed with the partners that existing support services provided by independent sector (including Supporting People funded refuges and outreach services) will be reviewed earlier, so that future commissioning priorities are produced by September 2011, in line with the Supporting People programme review requirements. Supporting People lead officer in taking part in the review is Lorraine Donnachie, who holds responsibility for the current contracts and who will also be undertaking service reviews this year.
 12. It is envisaged that the first meeting of the core group would take place in June and that the first task for the group would be to appraise strengths and weaknesses of the existing strategic, governance and administrative arrangements with a view to then seeking comments from a wider group of commissioning partners.
 13. **‘Benchmarking and best practice’ work stream** – Paper on personalisation to be considered later on the agenda begins work on this important policy agenda, which is closely linked to the review of the Oxfordshire Supporting People eligibility criteria. This work seats within the remit of this core group and would generate ideas and knowledge base for their first meeting, planned in June.
 14. It is also proposed that future progress updates on the review are presented in the form of a highlight report, starting from next monthly report to the Core Strategy Group.

Oxfordshire Supporting People Programme Review 2011-12 – First level project plan

This paper sets out the methodology for the Supporting People programme review 2011-12 agreed by the Core Strategy Group members on 6 April 2011.

Aims

Key aims of this review are to:

- Review strategic context, governance and administrative arrangements for the programme
- Undertake needs and gap analysis across two super-groups
- Review and analyse examples of best practice in commissioning and evidence-based practice
- Consider policy and practice developments in the field of personalisation, localism, outcomes based commissioning
- Review existing benchmarking arrangements across all parties

Outcomes

Key outcomes expected from this review are:

- Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12
- Proposals for how to structure the programme and deliver its outcomes beyond 2011-12
- Needs and gap analysis for housing related support provision for 2012-16
- Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12
- Proposals for future commissioning priorities, types of provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda
- Commissioning and investment plan for 2012-16

Programme design

For the purpose of this review the programme would be notionally split into two 'super-groups', defined as follows:

- a) Group 1 – This group contains services for people who are more likely to be in contact with statutory health and social care services and have a range of services available to them depending on their level of need. For this group the programme provides support located on the preventative end of the care and support pathway.
- b) Group 2 – This group contains services for people who are usually referred to as 'socially excluded and disadvantaged groups' and who are less likely

to be in contact with statutory health and social care services. For this group the programme is often the key, if not sole, provider of support.

Deliverables

This work would be taken forward by a small number of work streams that would be set up specifically for the purpose of this review, namely:

1) Strategic context and governance

Objectives

- Review latest policy developments at national, regional, local levels (e.g. the Localism Bill, Big Society initiatives, Personalisation)
- Continue horizon scanning for further developments and adjust direction of travel accordingly where necessary
- Consider key implications of these developments on the programme: e.g. What else is happening around us? What do we mean by a locality? What is the main purpose of housing related support in this changing environment? What eligibility criteria would look like? What personalised provision would look like?
- Map and overlay: lead commissioning functions, statutory versus non statutory role, expected outcomes for clients, eligibility criteria
- Analyse these relationships, seeking strategic and operational synergies, both existing and new – within and between two ‘super-groups’

This group would lead on delivering outcomes highlighted in bold below

- **Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12**
- **Proposals for how to structure the programme and deliver its outcomes beyond 2011-12**
- Needs and gap analysis for housing related support provision for 2012-16
- **Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12**
- **Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda**
- **Commissioning and investment plan for 2012-16**

2) Needs and gaps analysis

Objectives

- Analyse key data sources: JSNA, South East framework for supported housing, local intelligence, other
- Map target populations and identify areas of priority need in terms of: type of need, level of need and risk, desired outcomes for clients
- Undertake gap analysis taking account of existing provision across strategic partners and wider stakeholders
- Consider and propose possible solutions required to meet identified gaps

This group would lead on delivering outcomes highlighted in bold below

- Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12
- **Proposals for how to structure the programme and deliver its outcomes beyond 2011-12**
- **Needs and gap analysis for housing related support provision for 2012-16**
- **Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12**
- **Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda**
- Commissioning and investment plan for 2012-16

3) Benchmarking and best practice

Objectives

- Re-group 2009-10 data to match Oxfordshire 'super-groups'
- Utilise opportunities to obtain new data (e.g. based on other LAs budgets for 2011-12)
- Analyse this information to inform our own plans

This group would lead on delivering outcomes highlighted in bold below

- **Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12**
- **Proposals for how to structure the programme and deliver its outcomes beyond 2011-12**
- Needs and gap analysis for housing related support provision for 2012-16
- **Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12**
- **Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda**
- Commissioning and investment plan for 2012-16

Required resources

It is proposed that each work-stream would have a nominated lead, responsible for feeding back on progress and deliverables to the Core Strategy Group. The Core Strategy Group would oversee and manage the review and ensure it delivers its outcomes.

Each work-stream would consist of 4-5 people, including:

- one nominated member of the Supporting People Team
- one member of the Core Strategy Group
- one member of the Provider Forum
- one service user/carer
- one other stakeholder

It is expected that for the duration of the review the groups may need to meet monthly, at least for the first three months. Future frequency of meetings would be determined once the groups are set up.

Stakeholder survey attached at annex A will be issued once approved to seek nominations for the three work-streams and to produce an up-to-date stakeholder map.

Supporting People representation would be as follows, subject to confirmation due to imminent changes in the personnel:

- Strategic context and governance – Natalia Lachkou, Supporting People Programme Manager
- Needs and gaps analysis – Danny Hearn, Information and Systems Manager and Duncan Hall, Quality and Performance Officer
- Benchmarking and best practice – Lorraine Donnachie, Quality and Performance Officer

We would welcome offers from the partners to host these meetings and expect them, where possible, to be based at locations easily accessible for most members of the group, to save on travel time and costs.

Timetable

Complete 1st round of work across all work streams: April–May

- Produce 1st set of proposals – End of May
- Discuss, review and revise – June (including June Commissioning Body)
- Complete 2nd round of work across all work streams – July–September
- Produce 2nd set of proposals – End of September
- Consult, review and revise – October
- Produce 3rd set of proposals for approval – November
- Submit 3rd set of proposals for approval – December Commissioning Body
- Publish approved proposals – January
- Implement first part of the delivery plan – January–March

Document 8c

Oxfordshire Supporting People Programme Review 2011-12 – Second level project plan

This document comprises the second level project plan for the Supporting People programme review 2011-12 which will be delivered through the 3 Work Streams (WS) outlined on the following pages.

The Work Streams description are based on the first level project plan agreed on 6 April 2011, but *have been / will be* developed and elaborated in discussions with all partners and stakeholders engaged in this work to clarify the following elements for each work stream: timescale; roles and responsibilities of partners and stakeholders; deliverables; deadlines; equipment and facilities; dependencies.

Work Stream	Title of Work Stream	Work Stream Lead Officer	Start Date	End Date
1	Strategic context and governance	Natalia Lachkou, Supporting People Programme Manager	6 April 2011	
2	Needs and gaps analysis	James Edwards, Oxford City Council	6 May 2011	
3	Benchmarking and best practice	TBC	Date of 1 st meeting of the group	

Work Stream Description:

Work Stream 1: Strategic context and governance
<p>Start date: 6 April 2011 End date: 31 March 2012 Work Stream Lead Officer: Natalia Lachkou, Supporting People Programme Manager Contributing partners: [insert membership list]</p>
<p>Work Stream Objectives:</p> <ul style="list-style-type: none"> ➤ Review latest policy developments at national, regional, local levels (e.g. the Localism Bill, Big Society initiatives, Personalisation) ➤ Continue horizon scanning for further developments and adjust direction of travel accordingly where necessary ➤ Consider key implications of these developments on the programme: e.g. What else is happening around us? What do we mean by a locality? What is the main purpose of housing related support in this changing environment? What eligibility criteria would look like? What personalised provision would look like? ➤ Map and overlay: lead commissioning functions, statutory versus non statutory role, expected outcomes for clients, eligibility criteria ➤ Analyse these relationships, seeking strategic and operational synergies, both existing and new – within and between two ‘super-groups’
<p>Work Stream Outcomes:</p> <ul style="list-style-type: none"> • Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12 (WS1) • Proposals for how to structure the programme and deliver its outcomes beyond 2011-12 (WS1) • <i>Needs and gap analysis for housing related support provision for 2012-16 (WS2)</i> • Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12 (WS3) • Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda (WS3) • Commissioning and investment plan for 2012-16 (WS1)
Roles and Responsibilities:
<p>Work stream lead officer</p> <ul style="list-style-type: none"> - To chair meetings of the core group, oversee and direct production of deliverables, liaise with other lead officers to co-ordinate work, report on progress to the Core Strategy Group <p>Members of the core group:</p> <ul style="list-style-type: none"> - [to be agreed at the 1st meeting of the group] <p>All other stakeholders:</p> <ul style="list-style-type: none"> - To supply data and documents, respond to queries, provide contacts, comment on draft deliverables, and support activities in general.
<p>Equipment and Facilities:</p> <ul style="list-style-type: none"> - Meeting rooms, administrative support, etc

Summary of Deliverables:			
Ref.	Title	Responsibility	Due date
1A	Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12	Natalia Lachkou, Supporting People Programme Manager	17 th February 2012
1B	Proposals for how to structure the programme and deliver its outcomes beyond 2011-12		
1C	Commissioning and investment plan for 2012-16		
Dependencies:			
Items which must be available for this Work Stream			Responsibility
WS2 – Item 2A – Needs and gap analysis will inform work on items 1A and 1C. WS3 – Items 3A - 3B – Eligibility criteria and outcomes framework, including analysis of best practice, will inform work on items 1A – 1C.			Work stream 2 and 3 lead officers
Work Streams dependent on this Work Stream			Responsibility
WS2 – Items 1A - Strategic priorities will inform work on needs and gap analysis. WS3 – Item 1A – Commissioning priorities will inform work on item 3B.			Work stream 1 lead officer

Work Stream 2: Needs and Gap Analysis			
Start date: 6 May 2011			
End date: 31 March 2012			
Work Stream Lead Officer: James Edwards, Oxford City Council			
Contributing partners: [insert membership list]			
Work Stream Objectives:			
<ul style="list-style-type: none"> ➤ Analyse key data sources: JSNA, South East framework for supported housing, local intelligence, other ➤ Map target populations and identify areas of priority need in terms of: type of need, level of need and risk, desired outcomes for clients ➤ Undertake gap analysis taking account of existing provision across strategic partners and wider stakeholders ➤ Consider and propose possible solutions required to meet identified gaps 			
Work Stream Outcomes:			
<ul style="list-style-type: none"> • <i>Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12 (WS1)</i> • Proposals for how to structure the programme and deliver its outcomes beyond 2011-12 (WS1) • Needs and gap analysis for housing related support provision for 2012-16 (WS2) • Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12 (WS3) • Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda (WS3) • <i>Commissioning and investment plan for 2012-16 (WS1)</i> 			
Roles and Responsibilities:			
Work stream lead officer			
- To chair meetings of the core group, oversee and direct production of deliverables, liaise with other lead officers to co-ordinate work, report on progress to the Core Strategy Group			
Members of the core group:			
- [to be agreed at the 1 st meeting of the group]			
All other stakeholders:			
- To supply data and documents, respond to queries, provide contacts, comment on draft deliverables, and support activities in general.			
Equipment and Facilities:			
- Access to specialist data sources and data analysis tools			
- Meeting rooms, administrative support, etc			
Summary of Deliverables:			
Ref.	Title	Responsibility	Due date
2A	Needs and gap analysis for housing related support provision for 2012-16	James Edwards, Oxford City Council; Duncan Hall and Danny Hearn, Supporting People Team	End of September 2011

Dependencies:	
Items which must be available for this Work Stream	Responsibility
WS1 – Item 1A – Information about current service provision, strategic priorities and areas of unmet need will inform work in item 2A. WS3 – Item 3B – Analysis of best practice in commissioning models and service design will inform work on item 2A.	Work stream 1 and 3 lead officers
Work Streams dependent on this Work Stream	Responsibility
WS1 – Item 2A – Needs and gap analysis will inform work on items 1A and 1C. WS3 – Items 2A – Needs and gap analysis will inform work on commissioning models in item 3B.	Work stream 2 lead officer

Work Stream 3: Benchmarking and Best Practice			
Start date: Date of 1 st meeting of the group			
End date: 31 March 2012			
Work Stream Lead Officer: TBC			
Contributing partners: [insert membership list]			
Work Stream Objectives:			
<ul style="list-style-type: none"> ➤ Re-group 2009-10 data to match Oxfordshire 'super-groups' ➤ Utilise opportunities to obtain new data (e.g. based on other LAs budgets for 2011-12) ➤ Analyse this information to inform our own plans 			
Work Stream Outcomes:			
<ul style="list-style-type: none"> • Proposals for strategic direction of travel, governance and administration of the programme beyond 2011-12 (WS1) • Proposals for how to structure the programme and deliver its outcomes beyond 2011-12 (WS1) • <i>Needs and gap analysis for housing related support provision for 2012-16 (WS2)</i> • Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12 (WS3) • Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda (WS3) • <i>Commissioning and investment plan for 2012-16 (WS1)</i> 			
Roles and Responsibilities:			
Work stream lead officer			
- To chair meetings of the core group, oversee and direct production of deliverables, liaise with other lead officers to co-ordinate work, report on progress to the Core Strategy Group			
Members of the core group:			
- [to be agreed at the 1 st meeting of the group]			
All other stakeholders:			
- To supply data and documents, respond to queries, provide contacts, comment on draft deliverables, and support activities in general.			
Equipment and Facilities:			
- Meeting rooms, administrative support, etc			
Summary of Deliverables:			
Ref.	Title	Responsibility	Due date
3A	Eligibility criteria and over-arching outcomes for housing related support provision beyond 2011-12	Lead officer (TBC) and Lorraine Donnachie, Supporting People Team	31 st March 2012
3B	Proposals for types of future provision and commissioning models to deliver over-arching outcomes that embrace personalisation and localism agenda	Lead officer (TBC); Lorraine Donnachie	31 st March 2012

		and Angelo Fernandes, Supporting People Team	
Dependencies:			
Items which must be available for this Work Stream		Responsibility	
WS1 – Item 1A – Information about current service provision, strategic priorities, areas of unmet need and current commissioning models will inform work on item 3A. WS2 – Item 2A – Needs and gap analysis will inform work on item 3B.		Work stream 1 and 2 lead officers	
Work Streams dependent on this Work Stream		Responsibility	
WS1 – Items 3A and 3B – Eligibility criteria, outcomes framework and analysis of best practice will inform work on items 1A – 1C. WS2 – Item 3B – Analysis of best practice in commissioning and service design will inform work on item 2A.		Work stream 3 lead officer	

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Stakeholder map

Document 8d

Stakeholder Map - Review of Supporting People Programme 2011-12

Roles:

Strategic
Operational
Specialist
Other (define):

Strategic Alignment - Work Stream 1					
Core Group Member	Research	Link between sub groups	Focus Group leader	Service User Involvement Link	Available to comment on proposals
Mark Thompson				Mark Thompson	Mark Thompson
Matthew Wigglesworth					Duncan Saunders
Lesley Dewhurst					Khalid Boutayeb
Mike Hazeltine					Deborah Henry
Dennis Preece			Glenda Daniels/ Dean Inwood	Glenda Daniels/ Dean Inwood	Glenda Daniels/ Dean Inwood
Karen Diver					Benn Kiley
					Ruth Whyte
	Lesley Dewhurst	Lesley Dewhurst	Lesley Dewhurst	Lesley Dewhurst	Lesley Dewhurst
					Owen Shead
					Mike Hazeltine
					Gayle Jones

Needs and Gap Analysis – Work Stream 2					
Core Group Member	Research	Link between sub groups	Focus Group leader	Service User Involvement Link	Available to comment on proposals
					Mark Thompson
Andrew Ochia	Andrew Ochia	Andrew Ochia			Andrew Ochia
Nerys Parry	Nerys Parry	Nerys Parry	Nerys Parry		Nerys Parry
Charlotte Blake					Khalid Boutayeb
Simon Pitkin					Deborah Henry
Glenda Daniels/Dean Inwood			Glenda Daniels/Dean Inwood	Glenda Daniels/Dean Inwood	Glenda Daniels/Dean Inwood
Mike Hazeltine	Charlotte Blake				Charlotte Blake
					Karen Diver
					Benn Kiley
	Simon Pitkin	Simon Pitkin	Simon Pitkin	Simon Pitkin	Simon Pitkin
					Ruth Whyte
					Mike Hazeltine
					Owen Shead
					Gayle Jones

Benchmarking and Best Practice – Work Stream 3

Core Group Member	Research	Link between sub groups	Focus Group leader	Service User Involvement Link	Available to comment on proposals
					Mark Thompson
Nerys Parry	Nerys Parry	Nerys Parry	Nerys Parry		Nerys Parry
Khalid Boutayeb					Khalid Boutayeb
Toby Blake					Deborah Henry
Glenda Daniels/Dean Inwood			Glenda Daniels/Dean Inwood	Glenda Daniels/Dean Inwood	Glenda Daniels/Dean Inwood
Mike Hazeltine					Janis Stanton
Gayle Jones					Karen Diver
					Benn Kiley
	Toby Blake	Toby Blake	Toby Blake	Toby Blake	Toby Blake
					Ruth Whyte
					Mike Hazeltine
					Owen Shead
	Gayle Jones				Gayle Jones
					Lesley Sherratt

Core Groups Membership**Strategic Alignment**

Core Group Member	Organisation	Email
Natalia Lachkou	Supporting People	Natalia.Lachkou@oxfordshire.gov.uk
Mark Thompson	Connection	markthompson@connectionfs.org
Matthew Wigglesworth	Stonham Home Group	matthew.wigglesworth@homegroup.org.uk
Karen Diver	A2Dominion	karen.diver@a2dominion.co.uk
Dennis Preece	Chair of BMHO board	dp@discovery-uk.org
Lesley Dewhurst	Oxford Homeless Pathways	lesleydewhurst@oxhop.org.uk

Needs and Gap Analysis

Core Group Member	Organisation	Email
James Edwards	Oxford City Council	jedwards@oxford.gov.uk ;
Duncan Hume	TV Probation	duncan.hume@thames-valley.probation.gsi.gov.uk
Andrew Ochia	Vale & South DC	andrew.ochia@southandvale.gov.uk
Danny Hearn	Supporting People	danny.hearn@oxfordshire.gov.uk
Duncan Hall	Supporting People	duncan.hall@oxfordshire.gov.uk
Glenda Daniels/Dean Inwood	Oxfordshire User Team	glenda.daniels@oxfordshireuserteam.org.uk
Charlotte Blake	Two Saints	charlotte.blake@twosaints.org.uk
Simon Pitkin	Oxford Homeless Pathways	simonpitkin@oxhop.org.uk

Benchmarking and Best Practice		
Core Group Member	Organisation	Email
Janet Pring	CEF	Janet.Pring@oxfordshire.gov.uk
Lorraine Donnachie	Supporting People	Lorraine.Donnachie@oxfordshire.gov.uk
Nerys Parry	Oxford City Council	nparry@oxford.gov.uk
Khalid Boutayeb	A2Dominion	khalid.boutayeb@a2dominion.co.uk
Glenda Daniels/Dean Inwood	Oxfordshire User Team	glenda.daniels@oxfordshireuserteam.org.uk
Toby Blake	Oxford Homeless Pathways	tobyblake@julianhousing.org.uk
Gayle Jones	St Mungo's	gayle.jones@mungos.org
Mike Hazeltine	BCHA	michaelhazeltine@bcha.org.uk

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Audience	Purpose of Communication	Medium	Who	When
Service Users	<ul style="list-style-type: none"> • Gain involvement • Keep informed of review progress • Seek views on future plans for the programme 	<ul style="list-style-type: none"> • SPUG newsletters via providers • SPUG visits to services • SPUG meetings • Discussions at various fora 	<p>SPUG members</p> <p>Supporting People Team, SPUG and service user engagement leads</p>	<ul style="list-style-type: none"> • Quarterly • Throughout the year • When held • October-November 2011
Service Providers	<ul style="list-style-type: none"> • Gain involvement • Seek views on future plans for the programme • Notify of changes • Identify areas of risk • Keep informed of review progress 	<ul style="list-style-type: none"> • Work stream core-groups meetings • Discussion papers • Core Strategy Group • Provider Forum • Contract monitoring meetings 	<p>Work stream lead officers</p> <p>Supporting People Programme Manager</p> <p>Contract officers</p>	<ul style="list-style-type: none"> • When held • October-November 2011 • Monthly • Quarterly • When held
Stakeholders	<ul style="list-style-type: none"> • Gain involvement • Seek views on future plans for the programme • Explain impact of developments on clients in the community • Keep informed of review progress 	<ul style="list-style-type: none"> • Work stream core-groups meetings • Discussion papers • Equality Impact Assessment • Progress reports and discussions at various fora 	<p>Work stream lead officers</p> <p>Supporting People Programme Manager</p> <p>Supporting People Team</p>	<ul style="list-style-type: none"> • When held • October-November 2011 • Throughout the year • Throughout the year

Audience	Purpose of Communication	Medium	Who	When
Core Strategy Group	<ul style="list-style-type: none"> Seek views on future plans for the programme Explain impact of developments on clients in the community Keep informed of review progress 	<ul style="list-style-type: none"> Work stream core-groups meetings Discussion papers Equality Impact Assessment Progress reports Core Strategy Group meetings 	Supporting People Programme Manager Work steam lead officers Supporting People Team	<ul style="list-style-type: none"> When held Throughout the year Monthly Monthly
District Councillors / Commissioning Body	<ul style="list-style-type: none"> Impact on people in districts Gain support for the programme Keep informed of review progress 	<ul style="list-style-type: none"> Discussion papers Commissioning Body Meetings Special briefings 	Supporting People Programme Manager/ Accountable Officer	<ul style="list-style-type: none"> Throughout the year Quarterly As required
Accountable Officer	<ul style="list-style-type: none"> Keep informed of review progress Alert regarding issues and risks 	<ul style="list-style-type: none"> Progress reports Email Update meetings 	Supporting People Programme Manager	<ul style="list-style-type: none"> Monthly As required
Supporting People Team	<ul style="list-style-type: none"> Gain input into the review Seek views on future plans for the programme Keep informed of review progress 	<ul style="list-style-type: none"> Work stream core-group meetings Discussion papers Team meetings 	Work stream lead officers Supporting People Programme Manager	<ul style="list-style-type: none"> When held Throughout the year Monthly

Supporting People Programme Review

Needs and Gap Analysis Working Group

Initial Meeting – 6th May 2011

In attendance:

James Edwards – Oxford City Council
Duncan Hume – Probation Service
Natalia Lachkou – Supporting People
Danny Hearn – Supporting People

1. Scope:
 - a. Housing related support needs in Oxfordshire for people aged 16+.
 - b. 2012 to 2016 (short term expectation)
 - c. Medium to long term trends beyond 2016.
 - d. NEED - EXISTING PROVISION = GAPS
2. Membership:
 - a. Districts: James Edwards (Oxford City) & Andrew Ochia (Vale and South)
 - b. SP: Duncan Hall and Danny Hearn (Natalia Lachkou as required only).
 - c. CSG (Duncan Hume (Probation) plus Districts (above)).
 - d. Provider representatives (tbc)

Activities:

3. Map existing provision (Duncan Hall)
4. List existing data sources and undertake a summary analysis of these (example template used by Oxford City in similar exercise attached).
 - a. Template (JE)
 - b. List data sources (Danny Hearn)
 - c. Review of summaries (All)
5. Horizon Scanning Issues:
 - a. Prepare District Profiles:
 - i. Template to be developed to circulate to districts (All)
 - ii. Current situation
 - iii. Situation in 5 years time.
 - b. Review population changes (e.g. location of large housing developments) (Danny)
 - c. Review benefit and welfare changes (JE)
 - d. Feedback from Locality meetings (NL)
 - e. Review of finance and budgets (as planned for 2012 – 2016 and options for future).
6. Timeline:
 - a. Discuss proposals and actions to date at June CSG.
 - b. By end September 2011 complete first versions of 3,4 and 5 (above)
 - c. Meet next as full group w/c 20th June 2011.

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SUPPORTING PEOPLE COMMISSIONING BODY – 17 JUNE 2011

Taking Personalisation Forward

This paper is for discussion.

Personalisation is at the forefront of service change and development in the health and social care sectors. This paper summarises how this has progressed nationally and locally since the government signalled its ambitions in *Putting People First (2007)* and considers the future impact and options for Supporting People services going forward.

Definition of Personalisation

1. Personalisation is defined broadly as *'the way in which services are tailored to the needs and preferences of citizens. The overall vision is that the state should empower citizens to shape their own lives and the services they receive'* (HM Government Policy Review, 2007). Personalised services start with individual service users, rather than the services themselves as the public sector has traditionally done.
2. Leadbeater (2004) suggests that personalisation is *'a new organising logic for service provision...as influential as privatisation was in the 1980s and 1990s in reshaping service provision'*. For a considerable period of time growing dissatisfaction has been expressed by disabled people about a lack of flexibility and the unreliability of welfare services. Traditional modes of social delivery have been argued to produce the dependency of individuals, rather than promoting independence, and to prevent disabled people from obtaining full citizenship rights (Morris, 2006).
3. Boxall *et al* (2009) have argued that *'those promoting personalisation often contrast the 'one-size-fits-all' approach of standard services with this more 'personalised' approach where services and supports are tailored and customised to match the needs and preferences of an individual, offering them 'choice and control'*.
4. Personalisation is therefore a broad outcome in the sense that it is ultimately about active citizens (as opposed to passive recipients), co-producing services which allows them to live life in a way in which they have determined.
5. The ultimate measures of success of the transformation agenda, as set out in *Putting People First*, are that where possible everyone will be able to:
 - live independently
 - stay healthy and recover quickly from illness
 - exercise maximum control over their own life and, where appropriate, the lives of their family members

- sustain a family unit which avoids children being required to take on inappropriate caring roles
 - participate as active and equal citizens, both economically and socially
 - have the best possible quality of life, irrespective of illness or disability and
 - retain maximum dignity and respect.
6. *Personalisation* is an almost universally popular approach, supported by key stakeholders including people who use services, voluntary organisations, professionals and politicians of all parties. However, although it is supported in principle, national implementation has been more problematic. Councils are being required to make tough choices including considering service redesign, decommissioning, managing the provider market and radical change to working responsibilities.

Transforming Adult Social Care

7. Radical reform of adult social care has and is taking place based on the cross-government concordat, *Putting People First (2007)*. The objectives of this reform include:
- adult services departments working with the NHS, wider local government partners and other agencies so that people with social care needs are supported through universal as well as specialist services
 - a strategic shift in care and support away from intervention at the point of crisis to a proactive and preventative model centred on improved well being and maintaining independence
 - commissioning strategies which balance intensive care and support for those with high-level complex needs with investment in prevention and early intervention/re-ablement
 - a shift to choice and control for individuals through self-directed support and the opportunity to control a personal budget or direct payment
 - an increasing emphasis on treating people with dignity and respect and a more explicit systematic understanding of what that means
8. The Transformation of Adult Social Care has been a high profile programme in Oxfordshire since it commenced in 2008. Widespread system change has been implemented with all new and existing adult social care service users now being eligible for a personal budget.
9. In Oxfordshire, 2,421 Adult Social Care Personal Budgets have been allocated and over 100 self directed support training and briefing sessions have been delivered to approximately 350 staff. It has been recognised, however, that although the right to a personal budget is currently limited to adult social care, the implications of *Putting People First* reach beyond this to encompass health and wider community support.

Personalisation beyond Adult Social Care

Personal Health Budgets

10. A personal health budget allows people to have more choice, flexibility and control over the health services and care they receive.
11. A pilot programme involving around half the primary care trusts in England is currently underway, testing out personal health budgets in the NHS. Twenty of these pilot sites have been selected for an in-depth study as part of a wider evaluation exploring the potential of personal health budgets to benefit different groups of people. Oxfordshire is one of these pilot sites with personal budgets being tested out for individuals receiving continuing healthcare or end of life care. This pilot will end in 2012.

Right to Control Pilots

12. The ambition of central government to extend personalisation beyond adult social care is illustrated in the recent Right to Control Pilots which began in December 2010.
13. The Right to Control is a new legal right for (physically) disabled people. It gives disabled people more choice and control over the support they need to go about their daily lives. Disabled adults living in seven test areas will be able to combine the support they receive from different sources and decide how best to spend the funding to meet their needs.
14. The funding sources are:
 - Access to Work
 - Adult Social Care
 - Disabled Facilities Grant
 - Supporting People
 - Work Choice
15. Disabled people will be able to choose to:
 - continue receiving the same support
 - ask a public body to arrange new support
 - receive a direct payment and buy their own support
 - have a mix of these arrangements.
16. Trailblazers are areas where the Right to Control is being tested, for up to two years. Seven local authority areas are working with Jobcentre Plus to

test how the Right to Control will work for disabled adults. The Office for Disability Issues (ODI) will evaluate the Trailblazers which will inform a decision about wider roll out.

17. Seven local authority areas are testing the Right to Control. Five Trailblazers started on 13 December 2010. They are:
- Essex County Council
 - Leicester City Council
 - London Borough of Barnet
 - London Borough of Newham
 - Surrey County Council (two parts only: Epsom and Ewell Borough Council and Reigate and Banstead Borough Council).
18. There is a significant degree of overlap with the Department of Health's individual budget pilots, which ran in 13 areas from 2005-7, and were designed to test how funding could be pooled for disabled and older people from a range of funding streams. Key differences between the two schemes include the fact that 'right to control' will apply to all disabled people, not just social care service users, and is backed by legislation.

Personalisation and Supporting People

19. Supporting People services are largely delivered via block contracts. They are, however, already recognised nationally as having a highly personalised focus which emphasises choice and independence. For example, many services offer flexible hours to meet the needs of the service user. Each service user has an individual support plan which includes specific person led outcomes they are working towards. The highly reputable Supporting People Quality Assessment Framework sets out rigorous expectations that services are personalised with well evidenced service user involvement in their planning and delivery.
20. Personal budgets can offer a more focussed, and sometimes cheaper, solution for delivery of support. They can contribute to savings targets and relatively quickly. They can facilitate long-term shifts from long-term high-value Supporting People packages linked to long-term support to lower value, short-term preventative work for more people.
21. A resource allocation system for calculating personal budgets has the advantage of being:
- Transparent
 - Outcome focussed
 - Efficient
 - Explicit in rationing of resources
 - Able to encourage innovation and flexibility
 - Dynamic
 - Fair

Implementation options

Option 1: Inclusion of Supporting People funding in Adult Social Care funded personal budgets

Issues

- Exclusion of clients: Housing support can only be included in Adult Social Care Personal Budgets for those individuals who meet the local authority FACS (Fair Access to Care) critical and substantial eligibility criteria. This definition excludes the majority of people in receipt of housing support who have mild and moderate needs. It also is clear that in future, those who have a physical disability will have a 'right to control' which extends beyond being evaluated as having critical and substantial social care needs which will need careful consideration
- Measuring outcomes: Issues of joint monitoring and different outcome expectations of Adult Social Care and SP funding
- Different market rates for both types of care/support can cause difficulties determining what can be bought

Option 2: Delivering Personal Budgets that do not include Adult Social Care

Issues

- No ready-made infrastructure in place for delivering personal budgets unlike the Self Assessment Questionnaire, Needs assessment and Resource Allocation processes established now within Adult Social Care
- Existing Supporting People administered direct payments to older people for low volume and cost preventative services has substantially challenged existing administrative arrangements, continue to be labour intensive to administer and need to be reviewed in the light of this developing agenda
- Some services may best be delivered as commissioned block contracted services rather than as a personal budget- particularly rapid response, crisis interventions and preventative services

Issues for consideration

Oxfordshire Supporting People have already engaged with personalisation via the use of the Quality Assessment Framework for block contracted services,

use of direct payments for older people and through the innovative work undertaken within learning disabilities and now within mental health.

We need to consider how personalisation can be implemented more broadly in terms of the programme as a whole.

Issues and options to consider are the following:

1. Implementation of Flexi and Core models within accommodation based services
2. Use of personal budgets across Supporting People services, for example for floating support
3. Integration of supporting people funding with adult social care and health care funding for individuals
4. Ensuring that the needs of people who have mild/moderate needs are not lost in the system
5. Getting the right balance between block commissioned services and individually commissioned support

National and Local examples of Housing Related Support Personal Budgets

2 service examples and 3 area wide examples are provided below to illustrate existing approaches to personalisation of services.

Look Ahead

Look Ahead have pioneered the use of a Core and Flexi approach in their accommodation based service in Tower Hamlets for people with complex needs which is jointly funded by PCT and SP. There are 3 elements to the service which are:

- Core Service (a basic service which covers the health and safety aspects of the scheme)
- Flexible Support Hours (the service user can choose when and from whom additional support is provided)
- Cash Allocation (a sum of money is allocated for the service user to use to meet their support needs)

This service has been positively evaluated and received by service users, commissioners and service providers and has received national recognition as a model of good practice.

Cheshire Peaks and Plains Housing Trust

This service provider has changed its service for older people so that there are a range of support options clients can choose from.

- **1* Monitoring** – no visits. If there was an emergency the nominated key holder would be notified.
- **2*** As above. No visits but emergency response as required.
- **3*** As above plus monthly visit to check circumstances etc.
- **4*** As above plus weekly visit.
- **5*** as above plus daily visit.

The level of service is based on choice for self-funded customers and a needs assessment for customers who are eligible for housing support funding. However, all customers have the option to upgrade to a higher level of service if they are willing to pay the difference.

The Trust also offers a temporary '*Home Alone*' service for up to a month, to help people settle back at home after a hospital visit, or when their main carer is away. This package can include temporary equipment rental (including lifeline pendant and basic telecare equipment)

Since this tiered approach was introduced, a majority of tenants have opted for the lowest tiers, thereby freeing up staff time for targeted more intensive work, as and when required. People also feel it is a fair system – and can see that those who are fit and well are not paying for the same level of service as their frailer neighbours.

Oxfordshire County Council-Learning Disabilities

Supporting People Programme funding is used to purchase support services for people with learning disabilities. The housing related support is purchased from the same provider as part of a cohesive and integrated package, ensures a seamless service, promoting effective communication and accountability and also offering good value for money. To this end the SP funding has been placed inside (but separately accounted for) the Learning Disability health and social care pooled budget. Quality assessment and outcomes monitoring is based on a social care framework and does not include specific SP elements.

All service users are being (re)-assessed using the personal budget assessment tool (FACE), which considers all support needs (care, health, housing related support, transport, day activities, etc) and delivers an indicative budget based on the Resource Allocation System (RAS). Using a broker or a care manager a service can be designed and built up as a result of the assessment. Eligibility for services remains unchanged and is governed by Fair Access to Care Services (FACS) criteria. Only those who are assessed as substantial and critical will be given a personal budget and learning disability service. A care manager will always have final "sign off" of the money in order to maintain financial probity. This also goes to Learning Disability panel for formal agreement.

The money available can be made to work in a number of ways:

- 1) **Direct payment** (for all or some of the services required) - whereby the money goes directly to the service user to purchase services.
- 2) **Block contacted services** - whereby a service is commissioned and purchased by OCC and service users are given access to it - e.g. a day activities service. These are transitional services as in future they are unlikely to be re-commissioned in this way. Zero-hour contracts will become the norm, whereby service users opt in to using a service and pay for it with a nominal voucher or real money.
- 3) **A service bought by OCC under a framework agreement** (preferred provider list) which the service user has chosen to use following a tender exercise whereby they individually exercise choice and control. This allows the service user and their family to fully engage in choosing services and service design but without the burden of managing a budget and its

associated expense and liabilities. The service user can choose to use a provider on the framework whereby their personal budget can be used as a "service fund", whereby the provider in conjunction with the service user and family purchase the required service. The services can be bought with the provider or with another provider of choice.

Where there are shared supported living arrangements, then the general rule is to stick with one provider in the house although other providers can be used for other aspects like day activities.

In many cases service users have taken option 3 for individual aspects of the support needs. New and younger service users tend to follow a model of self directed support, building services they want and where they want (as far as possible) whereas older existing service users have tended to continue with the status quo. Existing service users can be transitioned into the self directed support model at the point of review if their needs have changed substantially.

Oxfordshire County Council and NHS Oxfordshire-Mental Health

All FACS eligible service users within the newly commissioned longer term From Supported to Independent Living services will be assessed for and will be allocated a personal budget. This personal budget will include adult social care, health and supporting people elements and the service user will have choice in how this will be used. We are at an early stage of this process but this is being worked on in partnership with the Primary Care Trust, Adult Social Care, Oxford Health and Response (the service provider).

Medway Council

This is the most significant example of an area-wide, programme-wide approach which is being piloted by Medway Council. Medway are piloting the use of an existing commissioning gateway to provide the administrative structure for time-limited Personal Housing Support Grants (PHSG).

The Personal Housing Support Grant can be used to purchase a variety of different services, depending on individual need. Lowest level is renewable as infinitum. Higher levels are paid for 12 months and can only be renewed for 5 years.

Grant Package	Award Period	Extendable up to
Acquiring Independence	12 months	5 years
Long Term Support	2 years	Unlimited
Supported Living	Level 1: 2 years Level 2/3: 12 months	Unlimited 5 years

SP9b

Resettlement	6 months	12 months
Crisis Intervention	3 months	3 months
Housing Options	3 months	3 months
Practical Support	2 years	Unlimited

The PHSG is paid 4-weekly. Individuals can choose whether they

- receive a direct payment – cash paid into designated bank account
- nominate a ‘principle provider’ – to receive the money for them and help them spend it
- have a local credit card (the Medway Card) – allowing people to make payments directly without having the hassle of using cash

A mix of clients is taking part in the pilot, with both long and short term needs. Grants are not means tested for the period of the pilot.

Note: Further information is provided at [Annex 9c](#).

PERSONALISATION CASE STUDIES

5. Medway Council's approach to Supporting People within Individual Budgets: cash allocations to individuals for housing-related support

BACKGROUND

In coming up with proposals for integrating Supporting People into Individual Budgets Medway has sought to take note of the following key facts:

- The provision of housing-related support is not a statutory duty for authorities. No one has a legal right to receive a housing-related support service
- The Supporting People programme is focussed on a facilitating a far more specific objective than social care generally i.e. ensuring that people are able to live in independent accommodation.

So Medway designed a Grants programme to make it clear what the specific contribution and value of housing-related support actually is.

THE NEW SERVICE MODEL

In the Medway model, housing-related support is defined as a range of specific types of assistance:

- Assistance to acquire the skills and confidence necessary, to manage accommodation with the maximum degree of independence
- Assistance to explore the housing options
- Practical assistance to maintain a home, when this is otherwise difficult because of disability or some other vulnerability
- Assistance to settle in to new accommodation
- On call assistance when required.

The Grant regime in Medway is then built around funding these different aspects of assistance. In this context, it is important to recognise the breadth of possible interventions that can come within the term housing-related support, alongside the relative narrowness of the outcomes that it is specifically designed to facilitate.

Historically Supporting People funding was precluded by Grant Conditions from helping a local authority to fulfil a statutory duty, and could not be used to simply top-up social care. Medway continues to believe that this is the right approach. Housing-related support should be regarded as a preventative service.

Medway wishes to retain the distinctness of the housing-related support contribution to people's overall wellbeing. It is important, therefore, to link the contribution from the Supporting People budget to specific relevant objectives that the individual wishes to achieve with the money received in their Individual Budget. To achieve this, Medway's system dovetails with their existing Resource Allocation System. However, the Resource Allocation System calculation keeps housing-related support separate for all clients and can be used for "Supporting People only" cases.

There are broadly six ways in which people receiving a personal housing support grant (effectively, a Supporting People Individual Budget) can use services to meet their identified support objectives.

1. Use of informal support arrangements from friends, family or neighbours
2. Use of services that are universal or block-funded or free at the point of delivery
3. Use of community facilities with a chargeable element
4. Use of generalist support services (e.g. existing contracted Supporting People services). The client is only be able to select these from a list of accredited providers.
5. Use of a range of specialist chargeable services
6. Direct employment of a support worker. This is only an option if the client is also receiving money from adult social care.

The model assumes three different types of intervention:

- Short-term intensive intervention – providing tuition, working alongside service user to learn tasks, supervision, advocacy, practical assistance, and brokerage
- Short-term basic intervention – providing information, advice occasional prompting, and signposting to other services
- Long-term maintenance – monitoring and occasional assistance in relation to the other two categories.

Service users' cash allocations are then calculated according to high, medium or low levels of need for each intervention type. It is assumed that short-term intensive intervention involves the need for the highest number of support hours and that long-term maintenance involves the lowest number of support hours.

CONCLUSIONS

The Medway approach reflects the primary emphasis of Supporting People, where higher level packages tend to relate to the *development* of independence skills rather than *maintenance*. This focus on (potentially) time limited, preventative interventions is quite different to traditional care approaches, based on meeting long term needs. In this sense, it is an attempt to integrate Supporting People with wider health and social care provision, without losing sight of the distinctive nature of Supporting People services.

For more information contact Mark Goldup at HGO Consulting who was engaged by the council to develop a way of integrating housing-related support into its Individual Budgets processes – mark@hgo-consultancy.ltd.uk

SUPPORTING PEOPLE COMMISSIONING BODY – 17 JUNE 2011

Annual Plan 2011-12: Progress Report

1. This is the second monthly report showing status of the work being taken forward by the partnership under the Annual Plan for 2011-12.
2. Summary table attached at **SP10b** shows that all projects are on track to deliver their objectives.

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Oxfordshire Supporting People Annual Plan for 2011-12

Item	Priority	Priority	Main aim	By when	Lead officer
Oxfordshire Supporting People Strategy 2011-16 - phase 2 review	Strategic	Financial	Review current arrangements and agree strategic and financial objectives for the programme for 2012-16	March 2012	Natalia Lachkou
Generic floating support services	Strategic	Financial	Implement recommendations of the strategic review and deliver required savings	March 2012	Lorraine Donnachie
Services for people with mental health problems	Strategic	Financial	Ensure smooth transition and deliver improved outcomes across new pathway of services	March 2012	Angelo Fernandes
Personalisation/ Customer service/ Service user engagement	Strategic		Improve focus on service user	Throughout	Natalia Lachkou
Delivering financial strategy		Financial	Balance the budget in 2011-12	March 2012	Natalia Lachkou
Traffic light code:					
Yes					
Yes, but concerns					
No					

Note:

Outcomes of the phase 2 review would identify additional priority items that may be added to the plan during the year.

Latest activity	On track?	Risk	Factors
Final draft of the strategy is on the agenda for today. First stages of work by three core groups are progressing well. Progress update on the programme review is on the agenda for today.	Yes	Medium	Scale and pace of policy change outside of partnership's span of control
Services changes were implemented in March 2011 and are being closely monitored. First quarterly monitoring meeting is scheduled for early June.	Yes	Medium	Scale and complexity of planned changes
New services started on 7 March 2011. Transition to new service models is progressing well. Key project priorities for 2011-12 are: greater personalisation of services, delivery of recovery outcomes and effective pathway management.	Yes	Medium	Scale and complexity of planned changes
SPUG members are taking active steps to establish direct links with service user engagement leads in services we fund. These contacts will be used to facilitate a programme of service visits scheduled for this summer. June issue of the SPUG newsletter has been produced. Discussion about ways of delivering greater personalisation of services is on the agenda for today.	Yes	Low	Best practice structures are embedding locally and nationally; Within span of control of the partnership
The budget was set by the Commissioning Body on 25 March 2011. Meetings with suppliers to discuss the efficiency programme have started and would be completed by end of June. First monthly progress report is on the agenda for today.	Yes	Medium	Strong track record in managing budget; early planning in place