A G E N D A

Social Care & Housing Scrutiny Committee

Date:	**Tuesday, 5th April, 2005**
Time:	**10.00 a.m.**
Place:	**Brockington, 35 Hafod Road, Hereford**
Notes:	Please note the **time, date** and **venue** of the meeting.
	For any further information please contact:
	Tim Brown, Members' Services, Brockington, 35 Hafod Road, Hereford. Tel 01432 260239
	e-mail tbrown@herefordshire.gov.uk

County of Herefordshire District Council

HEREFORDSHIRE
COUNCIL

AGENDA
for the Meeting of the Social Care & Housing Scrutiny Committee

To: Councillor Mrs. M.D. Lloyd-Hayes (Chairman)
Councillor Mrs. P.A. Andrews (Vice-Chairman)

Councillors   Mrs. E.M. Bew,   Mrs. A.E. Gray,   K.G. Grumbley,   Mrs. J.A. Hyde, R. Mills, Mrs. J.E. Pemberton, Ms. G.A. Powell and P.G. Turpin

Pages

1.   APOLOGIES FOR ABSENCE

To receive apologies for absence.

2.   NAMED SUBSTITUTES

To receive details of any Member nominated to attend the meeting in place of a Member of the Committee

3.   DECLARATIONS OF INTEREST

To receive any declarations of interest by Members in respect of items on this Agenda.

4.   MINUTES   1 - 8

To approve and sign the Minutes of the meeting held on 13th December, 2004.

5.   NATIONAL AND LOCAL CHANGES TO SCRUTINY OF CHILDREN'S SERVICES

To receive an update from the Director of Children's Services.

6.   REVIEW OF HOME SUPPORT SERVICES FOR OLDER PEOPLE AND   9 - 40 REVIEW OF ACCOMMODATION, HOUSING & HOUSING-RELATED SUPPORT NEEDS OF PEOPLE EXPERIENCING SEVERE & ENDURING MENTAL HEALTH PROBLEMS

To consider the findings of the Scrutiny Review Groups following the review of Home Support Services for Older People and the review of Accommodation, Housing and Housing-related Support Needs of People Experiencing Severe and Enduring Mental Health Problems.

7.   RESPITE SERVICES FOR PEOPLE WITH LEARNING DISABILITIES IN   41 - 46 HEREFORDSHIRE

To update the Committee on the situation with respite care services for people with a learning disability.

8.   SOCIAL   SERVICES   AND   STRATEGIC   HOUSING   BUDGET   47 - 52 MONITORING 2004/05 - 10 MONTHLY REPORT

To inform the Committee of the budget monitoring position for Social Care

and Strategic Housing for the first ten months of the financial year 2004/05.

To report on the available Performance Assessment Framework (PAF) indicators position and provide information about current performance management work within the Social Care and Strategic Housing Directorate.

To note the current position concerning the Committee's Work Programme.

To receive a report form the Cabinet Member (Social Care and Strategic Housing)

EXCLUSION OF THE PUBLIC AND PRESS
In the opinion of the Proper Officer, the next item will not be, or is likely not to be, open to the public and press at the time it is considered

RECOMMENDATION:
That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Schedule 12(A) of the Act as indicated below.

To receive a report form the Head of Social Care.

PUBLIC INFORMATION

HEREFORDSHIRE COUNCIL'S SCRUTINY COMMITTEES

The Council has established Scrutiny Committees for Education, Environment, Health, Social Care and Housing and Social and Economic Development. A Strategic Monitoring Committee scrutinises Policy and Finance matters and co-ordinates the work of these Committees.

The purpose of the Committees is to ensure the accountability and transparency of the Council's decision making process.

The principal roles of Scrutiny Committees are to

- Help in developing Council policy

- Probe, investigate, test the options and ask the difficult questions before and after decisions are taken

- Look in more detail at areas of concern which may have been raised by the Cabinet itself, by other Councillors or by members of the public

- "call in" decisions - this is a statutory power which gives Scrutiny Committees the right to place a decision on hold pending further scrutiny.

- Review performance of the Council

- Conduct Best Value reviews

- Undertake external scrutiny work engaging partners and the public

Formal meetings of the Committees are held in public and information on your rights to attend meetings and access to information are set out overleaf

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COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL

BROCKINGTON, 35 HAFOD ROAD, HEREFORD.

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COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL

MINUTES of the meeting of Social Care & Housing Scrutiny Committee held at Brockington, 35 Hafod Road, Hereford on Monday, 13th December, 2004 at 2.00 p.m.

Present: **Councillor Mrs. M.D. Lloyd-Hayes (Chairman)**
Councillor Mrs. P.A. Andrews (Vice Chairman)

Councillors: Mrs. A.E. Gray, K.G. Grumbley, Mrs. J.E. Pemberton, Ms. G.A. Powell and P.G. Turpin

Mrs B Millman (Voluntary Sector Representative)

In attendance: **Councillors Mrs. L.O. Barnett, T.M. James, D.W. Rule MBE and W.J.S. Thomas**

21.   APOLOGIES FOR ABSENCE

Apologies were received from Councillors Mrs E.M. Bew, Mrs J.A. Hyde and R. Mills.

22.   NAMED SUBSTITUTES

There were no named substitutes.

23.   DECLARATIONS OF INTEREST

There were no declarations of interest.

24.   MINUTES

RESOLVED: That the Minutes of the meeting held on 4th October 2004 be confirmed as a correct record and signed by the Chairman, subject to recording that Councillor Mrs L.O. Barnett had submitted her apologies for the meeting.

25.   ANNUAL SOCIAL SERVICES CONFERENCE 2004

The Committee received a report on the business discussed at the Annual Social Services Conference held in October 2004.

The changes in the delivery of Childrens Services consequent upon the Childrens Act 2004 had been a key theme of the Conference. The Committee congratulated Ms S Fiennes, Director of Social Care and Strategic Housing on her appointment by the Council to the post of interim Director of Children's Services.

RESOLVED: That the report be noted.

26.   SUPPORTING PEOPLE PROGRAMME UPDATE

Further to the report to the Committee in April 2004 the Committee received an update on the Supporting People programme in Herefordshire.

The Head of Strategic Housing Services presented the report, which had set out a number of risks to the funding of the Supporting People Programme in Herefordshire. He reported that since publication of the report the Office of the Deputy Prime Minister (ODPM) had announced the funding for the Supporting People Programme. In Herefordshire the Programme faced a 6.7% reduction, with funding decreasing from £7.3 million to £6.8 million. In addition the administrative budget faced a 15% reduction, the impact of which was still being assessed.

He noted that a new grant allocation formula was due to be implemented for 2006/2007 and whilst the outcome was as yet unclear the indications were that the formula would be to the disadvantage of shire/rural counties, although it was hoped the change to funding arrangements would be phased in to allow the service time to adjust. It had been confirmed that savings achieved through the review being undertaken by the Supporting People Commissioning Body could be rolled forward. He considered that the funding settlement would allow the Council to implement those measures which had been identified as high priority within the Supporting People Shadow Strategy.

The Head of Strategic Housing Services also drew attention to the monitoring and review process for the Programme and the ODPM's requirement that Supporting People Teams review all Supported People funded Services by 31st March, 2006. This was in addition to the requirement that a five year Supporting People Strategy had to be delivered to the ODPM by 31 March 2005. The report by the Audit Commission following its inspection of the Programme in Herefordshire had commented favourably on the review process being followed. However, it was important to recognise that there had been decisions relating to the de-commissioning or remodelling of services which had not all been well received by stakeholders. As a result the Supporting People Team were considering how the review process could help to ensure that stakeholders and providers were engaged with and committed to each stage of the review process.

He emphasised that the three Services provided in-house through Supporting People Grant: Home Care, Adult Placement/Supported Lodgings and Traveller Liaison were also subject to the review process and reported on the stage reached in reviewing each service. In relation to Home Care, service user consultation had indicated that the Home Care service was undertaking tasks which were ineligible for Supporting People Grant. The Supporting People Commissioning Body had recommended that an audit should be undertaken and it should be considered that any Supporting People Grant, which had been used to fund non-eligible tasks be repaid. The audit was now underway. However, the advice from a leading Supporting People Consultant was that the Home Care service would not have a liability to repay any grant.

In the course of discussion the following principal points were made:

- It was acknowledged that the Programme used 38 providers to deliver services and this might appear to be a high number. However, the wide range of services provided under the Programme to a wide range of clients meant this was unsurprising. The review process was taking the issue into account.

- It was requested that the information on the decisions of the Supporting People Commissioning Body, as set out in appendix B to the report, be presented more clearly in future reports.

- In response to a question about the engagement of a consultant to examine the Home Care Service's liability to repay supporting people grant the Head of

Strategic Housing Services explained that the ODPM's guidance was not consistent or definitive on this matter. Because of staffing pressures on the Supporting People Team and the commitments it faced in submitting the Supporting People Strategy by the required deadline the consultant had spent a day with the Supporting People Team providing specialist advice on a range of issues. The Head of Strategic Housing Services reiterated that the advice was that no funding for home care services would be withdrawn from an individual directly because the review had found they were receiving services ineligible for Supporting People Grant. However, the current in-house review being undertaken would help identify how services would need to be provided in the future.

- That a number of issues had been raised which merited further consideration by the Committee and it was proposed that a special meeting should be convened to receive a further update.

- That the role now given to two Councillors in relation to the work of the Supporting People Commissioning Body, as requested by the Committee in April, should be welcomed.

- That the learning from the monitoring and review process should be shared with the Committee as a whole.

RESOLVED:

That **(a)** **it be noted that the latest position in relation to the Supporting People Programme continued to give rise to considerable concern and a further report be prepared to be considered at a special meeting of the Committee;**

(b) **the governance arrangements surrounding the Commissioning Body be welcomed noting in particular the role now given to two Councillors in the process;**

and

(c) **learning from the monitoring and review process be developed and further considered within the Mental Health Scrutiny Scoping exercise and by the Committee as a whole.**

27. **BEST VALUE REVIEW OF SERVICES FOR PEOPLE WITH A PHYSICAL DISABILITY - STAGE 3 REPORT**

The Committee considered the Stage 3 report of the Best Value Review of Social Care Services for people with a physical disability.

The detailed review report had been circulated separately to Members of the Committee.

The Best Value Review Project Manager and Mrs B Millman, a service user and a voluntary sector representative on the Committee, explained the conduct of the review and presented the report's findings, emphasising the extent to which the recommendations had been informed by the views of service users.

The following areas for development and redesign were identified and recommendations made in respect of each area: assessment and care management, day care opportunities; adaptations and equipment, complaints and

advocacy, short-term breaks and transport. The recommendations drawn form section 4 of the review report were summarised in paragraph 11 of the covering report. There were also a number of additional recommendations made in section 5 of the review report, extracted to form appendix A to the covering report, which it was considered would improve existing services without radical redesign.

The covering report indicated that the main improvements would be managed within existing resources. A complex proposal for a Disabled Living Centre would, however, require a further feasibility study.

In the course of discussion the following principal points were made:

- In response to a question the Best Value Review Project Manager confirmed that partner agencies who would need to be involved in the redesign of services had had some involvement with the Review Team and the option appraisal report had been sent out for consultation.

- The review proposed the extension of the direct payments scheme to the purchase of equipment. It was noted that, whilst it was not necessarily the case that providing an individual service user with direct payments would be more costly, the extension of the direct payments scheme on a widespread basis could present a challenge to the Directorate of Social Care and Strategic Housing in commissioning services. The Head of Social Care (Adults) commented that if, for example, a block contract was let for the provision of a service but the uptake was low, with service users opting for direct payments to select their own provision in preference to the contracted service, the financial implications could potentially be significant. This emphasised the need to involve service users in determining service provision and the Directorate recognised the need to carry out further work in this area. The desire of service users to exercise their independence and the extent to which this reflected the national drive for choice was acknowledged.

- There was discussion of the information available to individuals in need of equipment. It was noted that it was a complex issue and suggested that service users really needed independent advice on what equipment was available in order to make an informed choice about what would suit them best. It was also important that once installed and in use the suitability of the equipment was monitored.

- In relation to the complaints system the review report proposed the development of a peer advocacy service to assist service users in making complaints about service delivery. The review report suggested that in the longer term the possibility of the development of an information and advocacy service as part of a Disability Living Centre merited consideration. It was noted that there were currently Disability Living Centres in Shropshire and Worcestershire but not in Herefordshire or mid–Wales. Several service users were reluctant to travel to Shropshire or Worcestershire but there was uncertainty over the ability to support a Centre for a sparsely populated rural area. The review had acknowledged that development of a Centre would require a feasibility study.

- That recommendation 8 as set out at page 37 of the review report should be shortened by the deletion of the last few words: "where appropriate instead of the ad hoc approach which can lead to crisis".

- In relation to transport it was considered that there remained considerable scope for improvement and cost savings, although it was reported that new Regulations

in January 2005 would increase transport costs. It was requested that the Strategic Monitoring Committee's attention should be drawn to the need for those responsible for implementing the findings of the Transport Review to ensure that account was taken of these concerns.

- Reference was made to a specific instance where there had been a communication failure about transport provision. In reply the Head of Social Care (Adults)advised that an apology had been given to the service users and action taken to resolve matters.

- Concern was expressed about how realistic it would be to implement the review's recommendations within existing resources. It was noted that the review report acknowledged that the proposal for a Disabled Living Centre would require a further feasibility study. The Director of Social Care and Strategic Housing advised that she considered that it would be feasible within existing resources to progress recommendations 2, 8 and 9 as set out in section 4 of the review report relating to service development and supervision of specialist staff through the appointment of a Team Manager and resourcing for short term breaks. However, the other recommendations in section 4 of the report would need further feasibility work. It was proposed that the recommendations in section 5 of the report would be progressed as feasible within existing resources. She confirmed that the review and its recommendations would now need to be referred to the Strategic Monitoring Committee for consideration. The Committee expressed the view that in the light of this advice, in forwarding the review to the Strategic Monitoring Committee, a distinction should be drawn between those recommendations which it was thought could or could not be progressed within existing resources.

RESOLVED

That   **(a)**   **the Strategic Monitoring Committee be recommended to endorse the findings of the review of services for people with a disability, subject to advising the Cabinet Member (Social Care and Strategic Housing) in considering the recommendations and preparing an Improvement Plan to have regard to the Committee's view:**

        (i)   **that recommendations 2, 3, 4, 5, 8 and 9 as set out in section 4 of the review report could be implemented within existing resources and should be progressed;**

        (ii) **that the remaining recommendations in section 4 of the review report , recommendations 1, 6 & 7 should be the subject of further feasibility work to ensure that sufficient resources were available to implement them; and**

        (iii) **that the additional recommendations in section 5 of the report be progressed as feasible within existing resources.**

    (b)   **that the Strategic Monitoring Committee's attention be drawn to the need for those implementing the findings of the Transport Review to ensure that account is taken of concerns identified in the review of services for people with a disability regarding the provision of social care transport.**

28. PERFORMANCE MONITORING 2004

The Committee considered a report on the available Performance Assessment Framework (PAF) indicators position (as at the second quarter) and current performance management work within the Social Care and Strategic Housing Directorate,

The report also included a summary of the Commission for Social Care Inspection's (CSCI's) star ratings, which assessed the performance of social services authorities across the Country and their capacity for improvement.

The Director of Social Care and Strategic Housing expressed disappointment that the new CSCI assessment judged that the Council was providing a one star Service, having been judged as providing a two star service in the previous assessment. It was considered that performance against four particular indicators for Children's Services, which were delivered in partnership with other Directorates and agencies had heavily influenced the judgment. The Director advised that the Directorate was looking carefully at those indicators and she agreed to provide an informal briefing note to members of the Committee on the position.

RESOLVED

That (a)   the report on Herefordshire Social Care and Strategic Housing performance be noted;

and

(b)   areas of concern continue to be monitored and an informal briefing note circulated to members of the Committee on key indicators in Children's Services.

29. BUDGET MONITORING 2004/05 - 6 MONTHLY REPORT

The Committee was informed of the budget monitoring position for the Directorate for the first six months of the financial year 2004/2005.

The Director of Social Care and Strategic Housing reported that the projected overspend on the social care revenue budget was some £700,000, as projected in August, with an underlying trend of £1million. The management action of which the Committee had previously been advised had prevented the projected overspend increasing but had not achieved a reduction. Further consideration was being given to what options were available to reduce expenditure. However, it had to be borne in mind that these discussions concerned services to vulnerable people and the capacity to make reductions was limited.

She noted that It also now appeared highly likely that there would be an overspend on the strategic housing revenue budget because of the large increase in expenditure needed to address homelessness.

Members acknowledged the pressures being faced and the efforts being made by staff to try to address the situation.

RESOLVED: That the budget monitoring report for the first six moths of the financial year 2004/2005 be noted.

30.   IN-DEPTH INVESTIGATIONS INTO HOME CARE AND SUPPORTED HOUSING FOR PEOPLE WITH MENTAL HEALTH PROBLEMS

The Committee was asked to note the progress of the exploratory programme for in-depth investigations of home support for older people and supported housing for people with mental health problems.

RESOLVED: That progress on the in-depth investigations be noted.

The meeting ended at 4.00 p.m.   **CHAIRMAN**

REVIEW OF HOME SUPPORT SERVICES FOR OLDER PEOPLE AND REVIEW OF ACCOMMODATION, HOUSING & HOUSING-RELATED SUPPORT NEEDS OF PEOPLE EXPERIENCING SEVERE & ENDURING MENTAL HEALTH PROBLEMS

Report By: **Social Care & Housing Scrutiny Review Groups**

Wards Affected

County-wide

Purpose

1.   To consider the findings of the Scrutiny Review Groups following the review of Home Support Services for Older People and the review of Accommodation, Housing and Housing-related Support Needs of People Experiencing Severe and Enduring Mental Health Problems.

Financial Implications

2.   To be considered as part of the implementation of the review recommendations, if approved by the Cabinet Member (Social Care and Strategic Housing).

Background

3.   In January 2004 this Committee appointed task groups to cover the service areas of Older People, Children and Mental Health. It was agreed in April that investigations should take place into the provision of home care and supported housing for people with mental health problems. In June 2004 the Committee considered an exploratory programme for in-depth investigations and detailed scoping statements for the two reviews were considered and approved in October 2004.

4.   The programme of reviews comprised a series of presentations and discussion sessions with key officers and stakeholders, with opportunities for work shadowing utilised within the review of home support for older people.

5.   The aim of the reviews was to advise the Cabinet Member for Social Care & Strategic Housing on the issues noted during the reviews and to provide recommendations for the development of these services.

6.   The review of Home Support Services for Older People and the review of Accommodation, Housing and Housing-related Support Needs of People Experiencing Severe and Enduring Mental Health Problems are appended.

Further information on the subject of this report is available from
Richard Gabb, Head of Strategic Housing, on 01432 261902
or Stephanie Canham, Head of Social Care (Adults) on 01432 260320

RECOMMENDATION

THAT (a)   the Committee considers the review of Home Support Services for Older People and determines whether it wishes to agree the recommendations for submission to the Cabinet Member (Social Care & Strategic Housing);

and

(b)   the Committee considers the review of Accommodation, Housing and Housing-related Support Needs of People Experiencing Severe and Enduring Mental Health Problems and determines whether it wishes to agree the recommendations for submission to the Cabinet Member (Social Care & Strategic Housing).

BACKGROUND PAPERS

- None

Further information on the subject of this report is available from
Richard Gabb, Head of Strategic Housing, on 01432 261902
or Stephanie Canham, Head of Social Care (Adults) on 01432 260320

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Review of Home Support Services for Older and Physically Disabled People in Herefordshire

Report by the Home Support Services Review Group – April 2005

For presentation to the Social Care & Strategic Housing Scrutiny Committee 5th April 2005

…**Putting** people first
…**Preserving** our heritage
…**Promoting** our county
…**Providing** for our communities
…**Protecting** our future

Quality life in a quality county

1

Contents

Appendices:

1.   Introduction

1.1   The purpose of the review was to examine the support provided to older and physically disabled people to live at home, with particular reference to the home care service. The reviews aim was to provide guidance on how home support could be improved in order to support the increasing numbers of older people who will need services in the future.

1.2   Members wanted to gain a better understanding of the framework in which Social Care provide services, how people access services, what services are provided, to who and the challenges of providing these services.

Cllrs. Rees Mills, Jennifer Hyde, Anne Gray, Glenda Powell and Margaret James (Carers' Support) were appointed to serve on the review group with Cllr. Marcelle Lloyd-Hayes taking the Chair. The Scoping statement and Terms of Reference are attached - Appendix 1.

1.3   The review was undertaken between 4th November and 17th December. This report   summarises the key findings of the review and makes recommendations to the Cabinet member (Social Care & Strategic Housing)

2.   Method of Gathering Information

2.1   Presentations by officers with specific links with home support.

2.2   Work shadowing of home care, STARRS (reablement) staff. and assessment staff carrying out community care assessments.

2.3   The review group would like to express their thanks to all the staff who gave presentations and work shadowing opportunities for their time. The group was impressed with the professionalism with which staff carried out their duties in often complex and demanding situations.

3. Presentations

The following presentation topics were arranged;

3.1 How funds are deployed within the various home support services.

A total of £24m per annum is spent on care of older people. This is approximately 44% of the Social Care budget. An analysis of total budget provision for Older Peoples Services including the extent of reliance upon specific grants (15% - £3.5m) and income from Service Users (25% - £6m) was described. A breakdown was provided of present distribution of these resources against a full range of service choices along with an indication of the number of older people provided for by each service type.

 Home support in the form of domiciliary care is now predominantly (80%) provided by approved independent sector providers. In total 5400 hours of service per week for approximately 650 service users per annum.

A number of general and service specific challenges were presented and which can be summarised as: providing the optimum balance between service options, quality and costs that meet changing local and national expectations while securing equitable access in a predominantly rural area and maintaining stability in a care services market struggling with recruitment of a suitable workforce.

A joint (Herefordshire Council and Herefordshire PCT) Commissioning Plan is being developed with broad stakeholder involvement, and informed by an analysis of comparative performance with other Authorities/PCT's. This will produce the joint service models required following the SSI Inspection.

3.2 Eligibility for services

It was emphasised that English Local Authority eligibility criteria for social care support (that is, the rules regarding to whom we provide and to whom we do not provide a service) were not a matter of local discretion.

From April 2003 all Councils with Social Service Responsibilities (CSSRs) have had to work to a national framework called 'Fair Access to Care Services' (FACS), developed and issued by the Department of Health. Whilst the adoption of the policy framework

4

is mandatory, CSSRs can choose at what level they set the threshold for access to support.

From the four bands of need set out in FACS – critical, substantial, moderate and low – Herefordshire Council has set its threshold at the critical & substantial level, based on an analysis of funds available. When people cross that threshold in terms of their need, we have a duty to provide support. For people that do not meet our threshold, informal support can be provided through a number of ways, including signposting, provision of information, referrals to other organisations and preventative services.

The national FACS framework is a loose framework, and can be difficult to translate into specific responses to specific situations and needs. Staff therefore need to deploy good assessment skills to ensure equity of service response. The emphasis on critical and substantial needs means that it may be difficult to identify and then secure services for those needs that should be addressed for preventative reasons. FACS requires care plans to have clear objectives, which in turn means that staff have to undertake regular reviews of service users. The growing older population means poportionately increasing levels of critical and substantial needs, which puts great pressure on budgets and makes the identification of resources that can be diverted to preventative services challenging.

3.3   Charging for home support services

Home support services are subject to the Council's charging system. The basis structure of charging for services is determined by statutory guidance for Local Authorities produced by the Department of Health.

Key planks of the guidance are:
- The means test uses Income Support as the basis.
- People with over £20,000 pay the full cost of the service.
- Housing and disability related expenditure are taken into account when assessing income.
- Benefits assistance must be provided to all adult service users.
- Income from paid employment is disregarded.

3.4   Direct payments

Direct payments create more flexibility in the provision of social services. Giving money in place of social care services means people have greater choice and control over their lives, and are able to make their own decisions about how the support they need is delivered. Most people use the money to employ their own support staff, because they can choose who supports them and at

what times. They also have the ability to use the support hours more flexibly.

The evidence suggests direct payments are more cost effective and cheaper than traditional services, and research has found that direct payments can have a preventative or delaying role with regard to residential care. Research into take up of direct payments by older people found that:

"Older people receiving direct payments reported feeling happier, more motivated and having an improved quality of life than before. There was a positive impact upon their social, emotional and physical health".

For direct payments to be successful service users must have access to a good support service, and help to manage the financial and administrative aspects of using direct payments.

The challenge now is to establish direct payments within the culture of care management, so that direct payments are routinely offered to all older people who are eligible for services. Care managers/social workers who had successfully implemented direct payments with older people gained a massive sense of satisfaction from empowering clients to be "able to do it themselves". A Local Implementation Group (LIG) is working to establish this culture in Herefordshire.

3.5 Workforce development for home support

Nationally, there are increased resources available to employers for training and professional development in social care. Local employer-led partnerships are becoming key to successful bids for funding, and also play a significant role in the regional allocation and distribution of these resources.

Locally, social care employers such as home support are well placed to make the most of these opportunities. Training grants have increased, and the local employer-led Association for Care Training (ACT) has just appointed two members of staff to move workforce development forwards across Herefordshire and Worcestershire.

There are also a variety of challenges ahead. The collection of data and development of stronger links between key local stakeholders will be very important in maximising the outcomes from workforce development funds. Modernising the image of career pathways in social care and exploring traineeships could assist in recruitment and retention for home support. Plans for the registration of the wider social care workforce by the General Social Care Council

6

should also ensure continued individual professional development plans are drawn up locally for all staff.

A Best Value Review of home care in 2000 recommended that the in-house service refocus on providing rehabilitation opportunities for older people through short-term intensive input. The STARRS (Short term assessment, reablement and review service) was created. Correspondingly part of the traditional in-house service activity has been contracted with independent providers, committing them to providing blocks of hours in geographical areas. The remaining in-house service is due to be contracted in a similar way in the autumn. The advantage of block contracts is that contractors can plan their workforce accordingly leading to a more consistent response to the needs of the service.

The key challenge in supporting older people to continue living at home is in securing an adequate home care workforce. Home care providers are subject to registration by CSCI through a set of National Minimum standards, many of which relate to the training and development of the workforce.

The NHS is a key partner organisation employing a similar workforce and opportunities need to be created to work more closely in addressing this challenge. In particular health care assistants where the recruitment pool is shared.

A workforce development manager (adults) will be recruited to undertake this work.

3.6   Contribution of informal carers

Many older people are supported substantially by informal carers, usually family members. Successive acts of parliament have ensured mandatory support is provided to informal cares to help them continue in their caring role. Carers are entitled to an assessment of their own needs if they provide regular and substantial support, they must be told of their rights, have more opportunities for work, education and leisure.

A government grant is provided to assist LAs in their duties. Information, short breaks and day care are among services offered.

3.7   Performance management

The current approach to Performance Management was driven by the Modernising Social Services white paper of 1998, which was responding to '… many examples of poor services, widespread inefficiency and a worryingly high number of authorities with serious and deep rooted problems'.

7

The Commission for Social Care Inspection (CSCI) assesses the performance of Social Services departments using the Performance Assessment Framework (PAF) – a set of 50 indicators, which are rated in bandings and scored in blobs. These figures are presented at each Scrutiny Committee. CSCI also monitor progress against national objectives and targets through the Delivery and Improvement Statement (DIS), which is a self-assessment tool in which previous achievements are recorded and future targets are planned, along with details of strategies, risks and contingencies in place for the Directorate.

Indicators relevant to support at home are:

Numbers of older people helped to live at home (as a percentage of the older peoples population) – This has been identified in recent performance reports as requiring urgent attention.

Numbers of older people helped to live at home with intensive home support (as a percentage of all those supported by Social Care) – Although there has been a steady improvement in this indicator we are still well short of the Government targets.

4.   **Work shadowing.**

Members of the Review Group were given the opportunity of shadowing home care, STARRS and assessment staff.

The   following   observations   were   made   by   members:

•   Members shadowing social workers on assessment visits commented on the high standard of professionalism and skill they observed. The wide range of knowledge required in dealing with complex family situation, the skill in involving informal carers, whose views sometimes differed from those of the carer for the person.

•   Good quality assessments were identified as the key to delivering appropriate service responses, which are sensitive to both the service user and his/her family carers. Good assessments take a great deal of professional time.

•   There was concern about how older people make contact with the care sector. It was felt that the system was not always easily accessible to older people and that some people were not receiving services because they did not know how to go about enquiring about what was available.

•   Shadowing home carers and re-ablement assistants gave members an insight into the range of tasks carried out by these

8

staff, e.g. catheter care, use of hoists and assistance with medication.

- Members observed that many of these tasks now carried out by home care staff would have been carried out by nursing staff, prior to the developments in community care in the 1990's. Members felt that there had not been an adequate transfer of resources from the health service to Social Care along with the transfer of tasks and responsibilities.

- Some service users had expressed concern about the changes in home care from in-house service to independent agencies. The importance of having continuity of staff and standards were stressed.

- The home support workforce issues of recruitment, retention and skills required to meet increasing expectations of both service users and regulators were felt to have a wide ranging impact. If there was not an adequate home support workforce this could potentially affect the ability of the health and social care systems in delivering care in the right place.

- The logistics of providing home care were complex – rotas had to be covered 7 days per week, even when staff were sick or on leave.

- The human resource required to provide complex care arrangements for older people with high level needs was noted. Including the pay structure and similarities with nursing assistants in the health service. The career structures for intensive social care in the community need both national and local attention.

General observations;

- Links need to be made with the development of "Chronic Disease Management" by the Primary Care Trust and the social care support of people with long-term conditions.

- Examples of innovative care arrangements were seen, which were not based simply on tasks to be carried out, but also on quality of life outcomes.

- The nutritional adequacy of frozen meals was questioned whether these are provided through WRVS Meals on Wheels service or purchased from supermarkets.

- Links between Supporting People and Social Care are important. Any changes in Supporting People criteria can mean an increased demand on Social Care.

Recommendations

That:

1. **An inter-agency, overarching strategy for well-being and better ageing in Herefordshire is developed.**

2. **The Health and Social Care Partnership examine the vital role of home care and explore better ways of sharing resources for better outcomes for older people.**

3. **A home care workforce strategy is developed with independent sector involvement.**

4. **The eligibility criteria for Supporting People Services and Social Care are clarified.**

Appendix I

Social Care and Housing Scrutiny Committee

REVIEW:	HOME CARE	
Committee:	Social Care and Housing Scrutiny	Chair: Cllr Lloyd-Hayes
Lead support officer:	Stephanie Canham Head of Social Services (Adults)	

SCOPING

Terms of Reference

- To review the level and need for home support services to older people in Herefordshire.
- To review the councils Eligibility criteria for Social Care Services.
- To examine current use of available funding and Charging Policy.
- To consider Cross Agency support for older people.
- Following the review to make recommendations to the Cabinet member above policy development.

Desired outcomes

- Development of cross Agency/strategy for older people in Herefordshire.
- Policy development to support/encourage self-reliance/prevention agenda.
- Direct payments influencing Social Care commissioning strategy.

Key questions

- How are current funds committed?
- What has been the effect of Home Care changes?
- Are Home Care Agencies providing Services that people want? What monitoring arrangements are in place?
- Are we being as creative in Service options? Direct Payments? Support to informal carers?
- How can we develop the human resources required? What are the barriers to developing the workforce – Pay? Status?
- What are the Government Targets the Council will be measured by?
- How do we determine who is eligible for Council Services?
- Identify need of community of older people, funding required.
- Have we got a Council wide view of access to universal services by older people?
- Rural dimension. Deprivation. Transport. Financial – benefits take up.
- What contribution does health make to support older people living independently?
- How do we encourage a self-reliant population?
- What support do we give to informal carers?
- Which authorities are doing well and how?

Time Scales

- Dates have been agreed for following topics.
  - Commissioning Care.
  - Eligibility for services.
  - Direct Payments.
- Case Study – October.
  - The following topics to be illustrated using a case study.
- Visits: Options – September
  - Shadow Social Worker on an assessment visit.
  - Shadow reablement assistant – STARRS.
- Policies review with Head of Services - October.
- Benchmark exercise to identify excellent authorities - November.
  - Assessment.
  - Eligibility.
  - Charging.
  - Service Options.

Review of Accommodation, Housing and Housing-Related Support needs of People Experiencing Severe and Enduring Mental Health Problems

Report by the Mental Health Review Group - March 2005

For presentation to Social Care and Housing Scrutiny Committee 5th April, 2005

…**Putting** people first
…**Preserving** our heritage
…**Promoting** our county
…**Providing** for our communities
…**Protecting** our future

Quality life in a quality county

CONTENTS

APPENDICES

1. Scoping Terms of Reference

2. Summary of Proposals

3. Pathway of referrals

1. Introduction

1.1 In January 2004, the Social Care and Strategic Housing Scrutiny Committee appointed three Task Groups to undertake scrutiny reviews within the service areas of Older People, Children and Mental Health. Cllr Mrs Josie Pemberton, Cllr Mr Bill Turpin, Cllr Mr Keith Grumbley and Cllr Marcelle Lloyd-Hayes were appointed to the review group charged with reviewing the Mental Health subject area.

1.2 Subsequently, acknowledging the implications of the Children Act 2004, the scope of the scrutiny exercise was reduced to encompass the two areas of Home Support Services for Older People and Supported Housing for people with Mental Health problems.

1.3 Terms of Reference were refined in the course of the Scoping Exercise to examine the accommodation, housing and housing-related support needs of people who experience severe and enduring mental health problems, and to establish current provision for this group and any gaps or blockages that exist.

1.4 An initial Scoping Exercise was held on 3rd August 2004, supported by officers from Strategic Housing and the Mental Health Service, at which the scoping group established a focused Terms of Reference for the review:

To review the accommodation, housing and housing-related support needs of people who experience severe and enduring mental health problems

and

To establish current provision of this group and any gaps or blockages that exist.

1.5 The review group also established a series of desired outcomes upon which to focus within the terms of reference:

- Ensure there is transparency and understanding between Housing and Mental Health Services e.g. support with applications, awareness of process and capacity

- Understand "pathways" into housing and protocols and establish good practice

- To establish demand and need for housing with appropriate support

- Creating opportunities for choice in housing tenure

- Consider best practice models for the provision of housing with appropriate support

- To create appropriate, safe and viable housing and support options for people with mental health problems

2. Methodology

2.1 A series of Engagement/Investigation Proposals were established through which the review group could explore the key issues (Appendix 2)

Proposal 1 – A visit to the Stonebow Unit including presentation and discussion
Proposal 2 – Exploring the User Perspective
Proposal 3 – Exploring the Provider Perspective
Proposal 4 – Developing supported housing and housing related support services

2.2 The outcomes were discussed at a summary and evaluation meeting on 25 January 05. Notes taken at each event can also be found in the attached Appendices. Presentations

referred to in the Appendices are not attached but are available from Richard Gabb, Head of Strategic Housing.

3.   Proposal 1 – Visit to Stonebow

3.1   Members received an overview of mental health services in Herefordshire and a summary of the current key issues facing the service. The review group also noted the high levels of mental health problems in society and were interested to note that one in five people suffer a mental health problem at some stage in their life. The majority of these cases would be seen outside hospital. It was identified that there were a range of common disorders and the services were described which currently provided to promote their recovery. However, people with serious and enduring mental illness accounted for the greatest challenge for providers and an appropriate focus for the review.

3.2   The review considered the "Pathway" of Referrals (Appendix 3) presented by Mark Hemming. This identified the pathways taken, ranging from early intervention, where possible, through to hospital admission and associated routes to treatment, care or support either within the own home or within dedicated accommodation. There were a number of causes and effects to mental illness with influences ranging from employment, through to personal relationships, influencing illness and recovery. The review group heard that there appeared to be increasing incidence, within Homelessness presentation/applications, of persons experiencing mental health problems associated with drug use.

3.3   A clear indication emerged through discussions that, wherever practicable, people with mental health problems were best supported in their own homes. Furthermore, in-patient care was expensive to provide. Specifically, the Stonebow unit provided a 24-hour service with an aim to prevent in-patient treatment where possible.   There appeared to be no difficulties in facilitating an admission to the Stonebow Unit in an emergency, although difficulties were described in moving-on from the Stonebow. However, there were a limited number of beds within the Stonebow and short admissions were preferable.

3.4   The review group considered issues around accommodation and support for people with mental health problems. Mark Hemming, Service Manager, Mental Health Services, described accommodation and services currently available including facilities provided through a residential re-habilitation unit at Oak House, Barton Road, which offered Care services 24 hours, 7 days a week.

3.5   However, there were extreme shortages of affordable long-term and temporary move-on accommodation in Herefordshire for those able to live either with no support or low-levels of support. Although the Council and it's Home Point partners had facilitated greater priority within the new Allocations Policy for people seeking to move-on from supported accommodation, there was insufficient affordable housing for rent within the County. Furthermore, in view of the shortage, it had to be recognised that increasing the priority of one group impacted on other people awaiting housing.

3.6   The distinct lack of social-rented housing, made worse by continuing levels of Right To Buy purchases, was placing pressure on homelessness levels. Furthermore, the private rented sector in Herefordshire was not providing a real alternative access point to housing for homeless or vulnerable people. Those persons presenting as homeless were generally more vulnerable than some years ago and this presented a challenge for may RSL's in the provision and management of suitable tenancies. Some RSL's had experienced great difficulties coping with more vulnerable tenants and some instances where there was resistance to re-housing persons who they felt were not suitable for general needs tenancies, even with support. A proportion of homeless applicants and tenants would, by

implication, have drug-related problems and associated chaotic lifestyles with a potential for failure to pay rent etc. This led to resistance to re-house following homelessness unless there were assurances about care and support.

3.7 Capital sums had been invested by the Council in developing 'bricks and mortar' schemes providing accommodation with support for people with Mental Health problems. Additionally, revenue support for Housing-related support services via Supporting People grant had been invested at the launch of the Supporting People Programme. This funding also provided floating support services within people's own homes.

3.8 It was discussed that there still remained some confusion amongst service professionals and service users about what services were provided by and/or eligible for Supporting People funding and this had led to challenges in commissioner/provider relationships. This could be resolved through increased training and information for Mental Health services.

3.9 However, there was concern for service users for whom Supporting People-funded support had a role but where a higher level of support and intervention was also needed. Furthermore, there were issues surrounding services and accommodation for individuals who required care and support beyond that which could or should be provided through Supporting People funding.

3.10 Housing and resource shortages were the main issues affecting people with Mental Health problems and a specific challenge for Mental Health Services lay in adequately resourcing Care and Support Services to those for whom general tenancies with RSL's were not appropriate or viable or where extensive care services within the home were necessary. Mental Health Services considered that there was a gap in the range of housing available to suit a variety of needs with resultant 'blockages' in the system. The review considered this could be identified in the development of the proposed Mental Health Housing Plan but wished to see more detail from Mental Health Services on where blockages existed.

3.11 Housing-related support for people in their own homes was financed by Supporting People grant, whilst care in the home or in-patient treatment was funded by a pooled budget jointly financed by Social Care contributions and the Mental Health Service, managed by the PCT. Members considered that the PCT should make a greater investment in Mental Health Services in responding to the distinct challenges around more intensive levels of support and accommodation.

3.12 Members highlighted the need to improve communication between Registered Social Landlords (RSL) and Mental Health Services in order to improve understanding of the issues and support services available. It was considered that some RSLs might be reluctant to accept people with mental health problems although RSLs would be more willing to take service users if they had more confidence about the level of support available.

3.13 Recognition of a person's priority need, or the allocation of a Gold card, was no guarantee that a person would be housed due to the pressures within the housing stock. Within this environment, there was a potential for representations from other people who might be forced to wait longer for housing where additional priority was given to specific groups.

3.14 Mental Health Services were asked for a position statement on blockages in move-on accommodation. More specifically there was a need to evidence individuals stuck in specific establishments, e.g. numbers ready to move on who have been trying unsuccessfully to get re-housed, and the impact of the lack of affordable move-on accommodation.

3.15 The review group considered the impact of recent Supporting People Service Reviews carried out which had led to some challenges for existing accommodation-based support services linked to the Mental Health Service. Service reviews considered a range of factors, including those around strategic relevance, quality of services provided, and value for money, and undertook user and stakeholder consultation as part of that process. Decisions relating to the future of services reviewed under the process, were made by a Commissioning Body comprising representatives from the Council, The Primary Care Trust (PCT) and West Mercia Probation.

3.16 There was some evidence that there was a lack of ownership and engagement on the part of Mental Health Services with some recent Supporting People reviews linked to the service area, possibly due to capacity. This had contributed to tensions over review outcomes and commissioning decisions which had changed established services. It had also highlighted issues around the need for clarity over what sort of housing-related support services Mental Health Services both wanted and were able to complement through their own resources and services. Again, this appeared to be an issue that could be considered in light of any emerging Mental Health Housing Plan.

3.17 In considering the shortage of affordable housing and the impact this had on the outcomes for people with Mental Health Problems the review team felt a range of options would need to be considered, This could include exploring future options for e.g. shared ownership, sheltered housing schemes and considering ways of using them imaginatively to deal with more diverse client groups.

4. Proposal 2 – Exploring the User Perspective

4.1 The exploration of the Service User perspective in terms of housing and support for people with mental health problems was considered an important element of the process and review members found this particular session be a very positive and informative experience.

4.2 Service users and user representatives were invited to describe their experiences in support and housing terms in a session supported by the Involving People Co-Ordinator for Herefordshire PCT. Some key descriptions appeared either common to the experiences of people with mental health problems or were highlighted as important in terms of the impact on accessing or sustaining housing, support and recovery.

4.3 The early stages of a tenancy were when persons with mental health problems could be at their most vulnerable. This could be due to neighbour harassment or difficulties in accessing key landlord services such as repairs, which could upset an individual's stability. It was therefore important that agencies considered what opportunities existed to mitigate the risk of problems being encountered. Examples included the possibility that Registered Social Landlords might be encouraged to prioritise repairs for tenants who were vulnerable to mental health problems or provide more intensive housing management support at the early stages of a tenancy.

4.4 The shortage of affordable housing and housing options was frustrating for those who either needed to move on from supported accommodation or who were ready to secure employment but needed to move in order to do so. This impacted on the recovery pathway and hindered independence due to a continued reliance on support networks and benefits. However, there were simply insufficient financial resources and development land available to satisfy the need for affordable housing.

4.5 People wanted choices about where and how they lived. For some service users this might mean total independence in a tenancy or through owner-occupation and for others a form of community or shared living. The option of 'small group homes' was raised by a service user whereby individuals run a community home themselves, perhaps joining together for meals if they wished. Other service users were committed to seeking more independent solutions.

4.6 User groups and Issue-based Groups provide an important 'voice' and advocacy service for service users, especially when difficulties in dealing with key agencies were experienced. Examples were given when the intervention of these groups had resolved issues which could have challenged the sustainment of tenancies. Support from these groups had also proved useful for those experiencing homelessness or making homelessness applications and the Housing Options Team had provided extra support for mental health users seeking re-housing through Home Point.

4.7 Individuals required different levels of support and, for some, there will be more than one attempt at trying to successfully live independently. Therefore, a return to supported accommodation might be required for some people. On occasion, the support needs of some individuals were too great for tenancies to be sustainable. Where there were problems within the city, the Crisis Team could assist but this did not appear to be available in rural areas.

4.8 Due to the vulnerability of some people, there would be locations which could be unsuitable for some individuals to be housed within. As a result, it was important that support workers assisted vulnerable applicants through the Home Point bidding process. An advocacy role in that process should facilitate discussion with landlords over where bids might be appropriate. Furthermore, whilst Choice-Based Lettings had demonstrated huge benefits there was always a risk that vulnerable people might not be well placed to engage with such a system.

4.9 The review considered how the housing agenda had changed in recent history with a move towards being part of a strategic response to Health and Social Care agendas. Herefordshire had produced a Leaning Disabilities Housing Plan which has assessed the problems and needs, considered the resources and models of response and planned a way forward in a real partnership with Housing and Learning Disabilities colleagues. The same approach was critical to developing housing responses for people with Mental Health problems. Joint ownership with Supporting People, Strategic Housing, Mental Health Services and service users was critical during the preparation of the Mental Health Housing Plan. General needs or supported housing was only part of the solution however. The review heard that there was a shortage of 24-hour nursing/residential care in Herefordshire with significant funding having to be spent out-of-county. Whilst there was a need for investment in Herefordshire for more general needs accommodation, investment was required for more specialist and intensive services/accommodation.

5. Proposal 3 – Exploring the Provider Perspective

5.1 The exploration of the provider perspective offered the review members with an opportunity to explore services provided to support people with Mental Health problems through both accommodation-based services and floating support services. Andrew Strong, General Manager of Herefordshire MIND was invited to reflect on services and challenges faced in the current funding environment including a provider perspective on housing related support through the Supporting People Programme. MIND was not just involved in housing-related support but also provided counselling and psychotherapy services, a nursing home (The Shires, Aylestone Hill), transport services (to address rural isolation) and day services.

5.2   Experience showed that comprehensive assessment of a persons capabilities and support needs was an essential part of tenancy sustainment. This was just as important for supported housing schemes where a robust sound referral criteria was essential to ensure the appropriateness of the person being referred, and the safety of other residents and the individual themselves.

5.3   There were particular difficulties for accommodation-based providers in managing high-density accommodation based in one building with multiple-occupancy. Such accommodation would only be suitable as transitional accommodation, however, there was a shortage of move-on accommodation for single people which challenged the facilitation of move-on.

5.4   The review heard that a real threat had emerged to the long-term sustainability of the currently wide-ranging Supporting People Programme in Herefordshire following the announcement of a proposed re-distribution formula. This presented challenges to housing-support provider's stability within the County. Provider and service continuity would also be challenged by the ongoing inability of the Council, as administering authority under the programme, to issue longer-term Supporting People contracts in such an environment.

5.5   In contrast to 'accommodation-based' support, 'floating' support followed the person and was not aligned to any particular accommodation. It provided an opportunity to sustain people within their own community. This assisted independence and was more cost-effective.

5.6   However, challenges and difficulties had been experienced in relation to managing the expectations of professionals providing care with the role and purpose of professionals providing housing-related support services. Partnership working and a two-way learning process were identified as being essential to overcoming these challenges in delivering care and support services to people experiencing mental health difficulties.

5.7   Reference was further noted in relation to pressures on capacity within the Stonebow Unit and the difficulties in onward referral to Oak House where some people were remaining due to a lack of move-on accommodation. This appeared to suggest that a lack of move-on accommodation impacted backwards to in-patient facilities at the Stonebow. The majority of people being admitted to the Stonebow Unit currently returned to their own home, however, for some this was not a possibility because of a lack of appropriate support. The review considered that the extent or existence of this as an issue would emerge from the requested information on blockages in the system. However, the review group considered it would also welcome a comparison between the costs of hospitalisation and the costs of providing care or support in the home or within supported accommodation options.

5.8   A theme repeated from the user perspective was that the voluntary sector, and organisations providing advocacy services for users, appeared to have a strong role and real benefits in the support of people experiencing mental health difficulties. However, it was also evident that budget shortages had impacted on such services.

6.   Proposal 4 – Developing Supported Housing & Housing Related Support Services

6.1 Through this final event in the programme, the review group explored the role and scope of the Supporting People Programme in Herefordshire and considered the process under which a high quality accommodation based scheme had been commissioned and developed in partnership between the Council, a Registered Social Landlord, Herefordshire MIND and Mental Health Services within the Primary Care Trust (PCT).

6.2 The Supporting People programme was highlighted as promoting the independence and social inclusion of vulnerable and disabled people through the provision of housing-related support services that enabled people to maintain and sustain their tenure. In working to an agenda around seeking to develop independence, prevent homelessness and sustain tenancies, the aim in relation to people experiencing mental health problems therefore can be described as attempting to prevent people requiring mental health services. The aims of Supporting People are consistent with the Mental Health National Service Framework.

6.3 In Herefordshire, over 250 people with mental health problems currently receive support from Supporting People funded services and prior to the implementation of the programme nationally, supported housing had been delivered on an ad hoc basis with little or no reference to strategic relevance, quality checks or controls.

6.4 The review noted that the Supporting People Programme does not deliver a solution to the shortage of housing within Herefordshire but it does have a role to play in making, e.g. social housing, more accessible to people with mental health problems. More specifically, general needs housing could be suitable for someone requiring low level housing-related support, where formerly a landlord might have resisted an applicant with no support services available.

6.5 Within Herefordshire, a nominal cap of 10 hours support per week for each individual reflects a need to demonstrate an equitable distribution of funding to meet identified needs within the programme and further illustrates the distinct role of the programme in promoting independence. An outcome for support provided under the programme is that support could be reduced as service users gained in confidence and independence.

6.6 The review was informed of a number of services provided under the Supporting People Programme which illustrated the effectiveness of the programme in helping people, who are experiencing mental health difficulties, stay in their own homes. This included a scheme operated by Carr Gomm who were working with the Assertive Outreach Team in skilled and challenging work to support 15 people with multiple and complex needs in their own homes.

6.7 In housing terms, there appeared to be a desire from mental Health Services to see a broad spectrum of accommodation with appropriate support to meet the wide range of needs of service users. This would range from general needs housing with support when required to group home provision for others and 24 hour nursing residential care. However, the role and appropriateness of Supporting People funded support was to provide enabling support services in general needs and supported housing environment.

6.8 The review considered a presentation on the development of a transitional supported housing scheme at Etnam Street, Leominster, developed for people with mental health problems in partnership between the Council and a range of other agencies. Achieved through the conversion of existing domestic residential accommodation into high quality self-contained accommodation, occupants have tenancies for up to two years during which time they are supported to move on to general needs housing. Each person receives floating support as a condition of their tenancy, provided for up to six hours per week by Herefordshire MIND.

6.9 Denise Shuker (Director St John Kemble Housing Association) outlined that the scheme had evidenced how it was possible to work collaboratively and in partnership to overcome difficulties. Residents were delighted to be living there independently and support workers from MIND had reported how much clients had improved in confidence. The review considered this as being a good example of partnership working.

6.10 In closing the session, the review group heard evidence of the increasing affordable housing shortage in Herefordshire. Specifically, house prices rising faster than salaries was continuing to make owner-occupation unaffordable for Herefordshire residents. This problem was exacerbated by inward migration of older, more affluent households to the County, and continuing losses of Registered Social Landlord property for rent due to Right to Buy. Furthermore, Herefordshire had a lower proportion of social rented property by comparison to the rest of the West Midlands.

6.11 As a result of this lack of affordable housing, more people were attempting to access the social rented sector which had caused an increase in the applications for housing and increasing levels of homelessness.

6.12 In terms of the impact on the subject of the review, it was evident that the shortage of affordable housing was impacting on the housing opportunities of people experiencing mental health problems.

7. Recommendations

7.1 The review considers the completion of a Mental Health Housing Plan to be an essential requirement to the identification and development of appropriate housing responses necessary to meeting the needs of people experiencing mental health problems.

7.2 The recent invitation from Mental Health Services to Strategic Housing Services to participate in the development of a Mental Health Housing Plan is noted and welcomed. Mental Health Services should seek the widest possible partnerships in developing and implementing the strategy and funding responsibilities should be firmly established.

7.3 Once there is clarity over the provision of Mental Health services required, the Primary Care Trust should commit the necessary resources to enable the funding of Mental Health Services which will contribute to supporting the outcomes of the Mental Health Housing Plan.   The individual accountabilities and contributions of each partner should be agreed.

7.4 Transitional supported housing is an essential element in a spectrum of accommodation and housing options for people with mental health problems. However, it may not be appropriate for some people with complex and enduring mental health problems. Services for these people are outside the scope of the SP programme as their needs cannot adequately be met through the provision of low level housing related support. These services should be funded appropriately by the PCT. Additional investment should be made by the PCT to provide accommodation and support services to those whose needs should not be met through Supporting People funding.

7.5 That a review of existing accommodation-based schemes should be undertaken to establish an accurate picture of blockages in the system due to the perceived lack of move-on accommodation for those who are ready to do so.

7.6 That Mental Health Services should ensure close engagement with reviews undertaken under the Supporting People Review Programme to ensure shared and robust ownership of review recommendations.

7.7 That the Supporting People Team, in partnership with Mental Health Services, should explore opportunities to provide clarity to partners and providers over the role and expectations of professionals providing clinical and therapeutic interventions and professionals providing housing-related support.

7.8 That Mental Health Services should closely engage in any opportunities to contribute to the development of related strategies, including the Supporting People Strategy 2005 – 2010 and annual review.

7.9 That Registered Social Landlords should be approached with a view to exploring what opportunities existed for enhanced responses to the needs of tenants with mental health problems e.g. through enhanced responses to repair requests at the early stages of a tenancy.

7.10 That options for funding an Advocacy role to assist vulnerable applicants or their support workers with accessing the Home Point system be explored with a view to ensuring engagement in the choice-based lettings process.

7.11 That the beneficial role of user groups in enabling service users to have a voice should be noted and that the Council and Primary Care Trust should consider how to re-energise this important sector.

REVIEW:	HOUSING SUPPORT FOR PEOPLE WITH MENTAL HEALTH PROBLEMS	
Committee:	Social Care & Strategic Housing Scrutiny Committee	Chair: Cllr M Lloyd-Hayes
Lead support officer:	Richard Gabb, Head of Strategic Housing Services	

SCOPING

Terms of Reference

To review accommodation, housing and housing related support needs of people with severe enduring mental health, and associated housing problems.

To establish current provision for this group and any gaps or blockages that exist.

Desired outcomes

Ensure there is transparency and understanding between Housing & Mental Health services e.g. support with Home Point applications, awareness of process and capacity.

Understand pathways into housing and protocols and establish good practice.

To establish demand and need for housing with appropriate support.

Mixed tenure responses – creating opportunities for choice in housing tenure.

To establish best practice model for the provision of housing with appropriate support.

To create appropriate, safe and viable housing and support options for people with poor mental health.

Key questions

What is the role of key stakeholders in creating safe and viable housing and support options?

Who are we referring to when we talk about people with mental health problems?

Who should be included in the scrutiny scoping review?

What is the scale of the problem in Herefordshire in terms of need and provision?

How good is our information currently? What more can we find out and from whom.

Is it a growing problem? – Trends in mental health problems.

Do people want supported housing or independence?

What blockages exist in the system? Is there equality of access?

How can communities support people with mental health problems?

What supported housing is available?

Are we making best use of available funding?

How does supported housing provision match with projected need and anticipated growth?

What causes mental illness and what interventions can be made at an early stage?

What is the position of homelessness legislation on people with mental health difficulties presenting as homeless?

SCRUTINY SCOPING

<u>Housing and Support</u>

<u>for People who Experience Mental Health Problems</u>

<u>Terms of Reference</u>
To review accommodation, housing and housing-related support needs of people who experience severe and enduring mental health problems.

To establish current provision for this group and any gaps or blockages that exist.

<u>Engagement/ Investigation Proposals</u>

<u>Proposal 1</u>

Visit to Stonebow including Presentation and Discussion

Visit of Stonebow Unit, Hereford, followed by presentation and discussion with Mark Hemming (Service Manager – Mental Health) and Rob Cunningham (Operational Manager – Mental Health).
- What do Mental Health Services provide?
- Who are services provided to?
- What gaps, if any, exist?
- What are the service pressures relating to accommodation and social housing?
- Exploration of pathway from intervention to recovery or supported independence
- Alternatives to hospital admission

Presentation

Discussion to follow presentation.

Venue: **Thursday 4 November 2004, 2.00 p.m. at Stonebow Unit**

<u>Proposal 2</u>

Exploring the User Perspective

Facilitated and Chaired by Euan McPherson (Patient Advisory and Liaison Service (PALS)) Focus group event to explore the user perspective on Mental Health and Housing involving assistance from Herefordshire User Group (Phillip Pankhurst to be link).

Questions and responses about:-

- Services and experiences of accessing e.g. social housing or supported housing
- Housing Needs / housing preferences of service users
- How a Mental Health Housing Plan could assess and address user perspectives

Results could be fed into Mental Health Housing Plan development – needs assessment.

Venue: **Friday 17 December 2004, 10.00 a.m. at Moor House**

Proposal 3

Exploring the Provider Perspective

Presentation by Andrew Strong (General Manager MIND) on Supported Housing Schemes and Community Support Services.

Venue: **Friday 17 December 2004, 11.30 a.m. at Moor House**

Proposal 4

Developing supported housing and housing related support services

Presentation by Ian Gardner (Supporting People Team). Supporting People Programme contribution to the provision of Supported Housing Schemes and Housing Related Support Services for people who experience mental health problems.

Presentation by Denise Shuker (Director, St John Kemble (Hereford) Housing Association). The landlords role and perspective in developing and managing supported accommodation – illustrating development of e.g. Etnam Street (6 units of high quality transitional supported housing) followed by:-

Presentation by Jane Thomas (Enabling Manager). Herefordshire Council's Enabling Team's role in developing Capital schemes

Presentation by Richard Gabb (Head of Strategic Housing), Jamie Burns (Homepoint Manager). The role of Strategic Housing and Homepoint.

Venue: **Friday 3 December 2.00 – 5.00 p.m. Room 1 Garrick House**

Pathway of referrals

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                    ┌──────────────────────┐
                    │  Early intervention  │
                    └──────────────────────┘
                                                    ┌──────────────────┐
          ┌──────────────────────┐                  │  Treated in the  │
          │  Community mental    │                  │    community     │
          │    health teams      │                  └──────────────────┘
          └──────────────────────┘
┌──────────┐
│   GP     │
└──────────┘
┌──────────┐
│   A&E    │       ┌──────────────────────┐
└──────────┘       │  Hospital via Crisis │
┌──────────┐       │        Team          │
│  Police  │       └──────────────────────┘
└──────────┘
┌──────────────┐   ┌──────────────────────┐
│Social Worker │   │    Oak House         │
└──────────────┘   │  medium/long term    │
                   │  re-habilitation     │
                   └──────────────────────┘

     Care 24/7                    own home with/without support
```
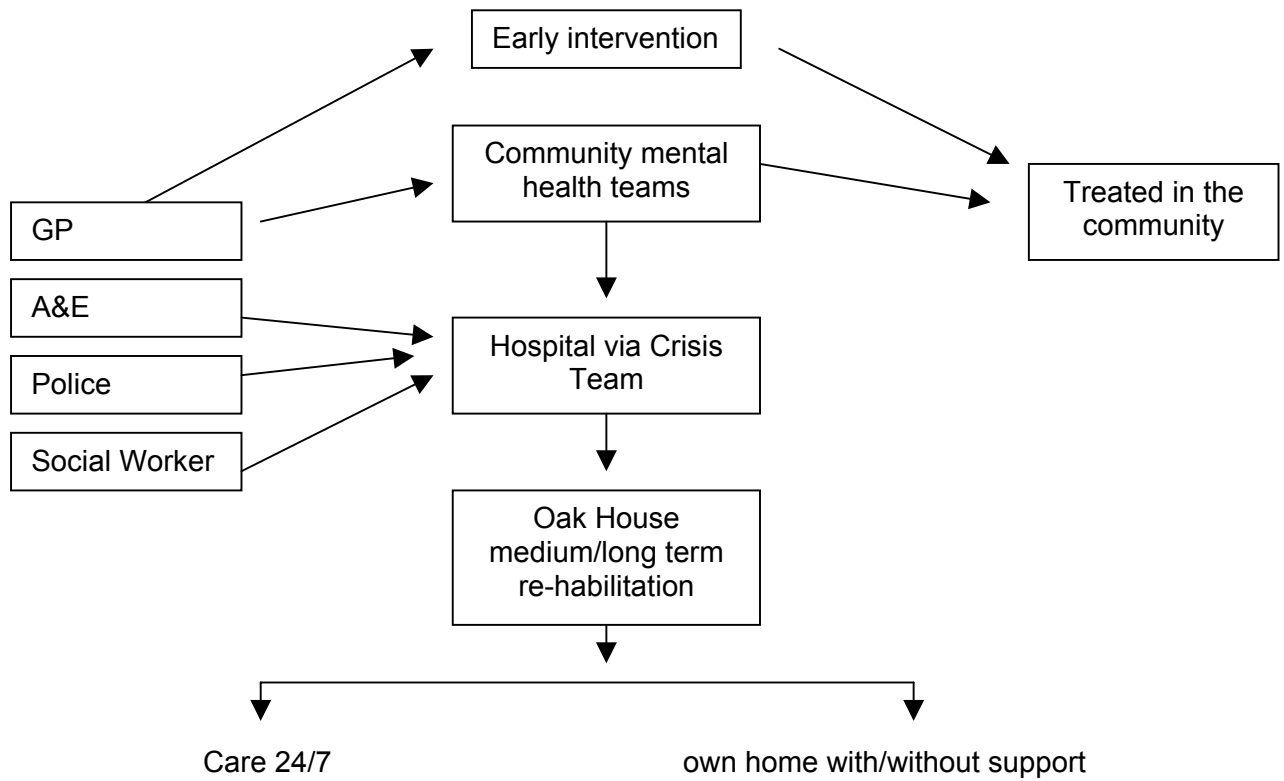
RESPITE SERVICES FOR PEOPLE WITH LEARNING DISABILITIES IN HEREFORDSHIRE

Report By: Head of Social Care (Adults)

Wards Affected

County-wide

Purpose

1.   To update the Committee on the situation with respite care services for people with a learning disability.

Financial Implications

2.   There is a potential budget implication of up to £95,000, which would have to be accommodated within the budget planning process for 2005/2006.

Background

3.   In October 2004 the Committee received a report outlining the current situation with respite provision for people with learning disabilities in Herefordshire.

4.   This report showed that although there was sufficient resource to meet current demand there were certain pressures on the service:

- Respite beds blocked by emergency placements

- The cancellation of planned respite because of emergency placements.

- Nature of demand (weekends)

- The changing needs of service users and their carers

- Changing expectations and the availability of other support options.

- CSCI (Commission for Social Care Inspection) requirements to split long and short stay provision.

5.   The report identified the need to take some short-term actions to address the immediate pressures with the need for a longer-term strategy to meet the changing needs and demands.

6.   This Committee requested that (a) options for future respite be explored further; (b) reasons for emergency admissions be explored further; a new strategy for short breaks be considered and referred to the Cabinet Member (Social Care and Strategic Housing), based on the review and subject to

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Further information on the subject of this report is available from Lydia Bailey – Service Manager, Learning Disability Services on 01432 261555

considerations (a) and (b); and feedback on the review recommendations be provided to the Committee.

7.   The findings of the review which informed the Scrutiny Report have been used to identify issues that need an immediate response and those that need a longer-term solution.

Immediate response

8.   <u>Separation of short and long-stay placements:</u>   Currently two respite beds have long-stay residents occupying them. We need to separate short-stay and long-stay placements, so that the different needs are not being met within the same house. The cost of moving these two people into long-term placements would be up to £95,000.

<u>Proposal</u>

- Over the past few months, it has been possible to reduce the number of blocked beds across the service and only two now remain.

  It is proposed that we make a commitment to moving these two individuals on to new placements within a timescale agreed with CSCI and that we then implement the new interim placement agreement (Appendix 1) to ensure that any new emergency placements are moved on within an appropriate timescale.

9.   <u>Emergency Placements:</u>   We need to ensure that emergency placements are prevented wherever possible and that where they are inevitable, they are dealt with appropriately and within agreed timescales, so that beds do not remain blocked and that they do not become long-stay placements.

<u>Proposal</u>

- That we ensure that we have robust services to ensure that people who are in crisis can be supported, where appropriate, within their current placement and do not need emergency placements. This will be achieved by developing a crisis support service funded by the PCT as part of the PCT Local Development Plan (LDP) from April 2005.

10.   <u>Equitable allocation:</u> We need to ensure that Short-breaks are allocated in an equitable and transparent way to all service users.

<u>Proposals</u>

- That we begin to develop more innovative ways of offering short-breaks or respite to carers on an individual level, based on person-centred planning.

- That we identify a transparent and equitable way of allocating short breaks to individuals, which takes into account their level of need and the other services which are being provided.

- That we learn from other Local Authorities, who have already tackled this issue, to ensure best practice.

Further information on the subject of this report is available from Lydia Bailey – Service Manager, Learning Disability Services on 01432 261555

Longer-term Issues

11.   Changing demand: The needs of younger people coming into the service are different to those who are living with older carers and who are used to having a building based service. Therefore in the future there will be less demand for this type of service. More people will wish to have different patterns of service, including support at home, direct payments etc.

12.   Changing need: Short-break services have to meet the needs of a range of individuals with very differing levels of need; this includes increased people with a profound and multiple disability. In the longer term our current resources may not be able to provide this service because of physical restrictions.

Longer-term solutions

13.   It is proposed that a longer term-piece of work is completed by a Change Manager for learning disability in partnership with the Service Manager, Assessment & Care Management, to identify future needs more accurately and enable the commissioning of appropriate services to provide short-breaks and emergency bed provision, alongside the development of innovative alternatives to this type of provision.

RECOMMENDATION

That the progress on the short break strategy be noted.

BACKGROUND PAPERS

•   None

Further information on the subject of this report is available from Lydia Bailey – Service Manager, Learning Disability Services on 01432 261555

**SERVICE AGREEMENT FOR THE PROVISION
OF INTERIM CARE ARRANGMENTS**

This agreement is between the Learning Disability assessment and care management service and the in-house care homes of Windsor Place, Southbank Close and Ivy Close.

1. Purpose/Objectives of the Service

The principle objective of the service will be to assist in ensuring interim care arrangements are in place for clients where there is a breakdown in current care arrangements, either temporary or permanent, whilst longer-term arrangements can be planned.

2. Service to be provided by the Service Provider

Herefordshire Council Learning Disability Services will arrange for not less than 3 places in its care homes for the purposes of an interim care service.

2.1 Description of Service

2.1.1 Herefordshire Council Learning Disability Services will provide not less than 3 places in its care homes for the purposes of the service. Service users will be admitted on an interim basis whilst longer-term care arrangements can be planned.

2.1.2 The places will be made available in accordance with the following allocation.

   1 Residential Care places at Windsor Place
   1 Residential Care place at Southbank
   1 Residential Care place at Ivy Close

   This allocation may change in the light of operational experience.

2.2 Service Availability

2.2.1 The service will be provided in the individual care homes for the purpose by Herefordshire Council Learning Disability Services.

2.2.2 No placement will exceed 12 weeks duration.

2.2.3 If, at the end of the 12 week period, the Council has not yet arranged an appropriate or agreed community care services for the service user, the Council will ensure an alternative arrangement is made whilst s/he waits for the establishment of longer –term care arrangements. Any such additional

18th March, 2005.

agreement will be outside this agreement and made in accordance with the Councils normal financial procedures.

2.2.4 Reduction or change to this service may be amended in light of operational demand provided not less than 3 places remain available for the service as a whole.

2.2.5 Placement will be arranged at the first care home where a suitable vacancy exists in the service user's home community; at that care home.

3. Referrals to the Service

3.1 Referrals will be made by via the Community Learning Disability Team social work or nursing Case Coordinators, who will forward the request to the Learning Disability Operational Manager-Supported Living. The request will include relevant Community Care Assessment documentation, by fax or email, which will be forwarded to the receiving care home. Admission will normally take place within 24 hours of the referral to the care home.

3.2 No referrals can be agreed for admission until the care home has received   the assessment documentation.

4. Refusals of Services

If or when a service user is offered and refuses an interim care placement, the Council will have fulfilled its responsibilities under the Community Care Act 2003. In these circumstances, the council will offer appropriate guidance to the Service User so that s/he may make an informed choice on their preferred care arrangements.

5. Ending of an interim care placement

A placement shall end 12 weeks after admission, or on the date the longer-term care services commences, whichever is sooner.
If at the end of 12 weeks, longer-term care arrangements have not been established or agreed, the provision of services thereafter will be in accordance with the terms of Clause 2.2.3 and 2.2.4.

6. Review of the Service

6.1 Herefordshire Council Learning Disability Services will meet on a monthly basis to discuss the operation of the service and consider whether an adjustment to the allocation of places described in 2.2.4 is necessary.

6.2 Additional review meetings will be convened at any time by agreement.

18th March, 2005.

SOCIAL CARE AND HOUSING SCRUTINY COMMITTEE   5TH APRIL, 2005

SOCIAL SERVICES AND STRATEGIC HOUSING BUDGET MONITORING 2004/05 – 10 MONTHLY REPORT

Report By: Finance Manager

Wards Affected

County-wide

Purpose

1.   To inform the Committee of the budget monitoring position for Social Care and Strategic Housing for the first ten months of the financial year 2004/05.

Financial Implications

As detailed within the report.

Background

2.   Following the Council's Performance Management Framework, budget monitoring reports should be made at 4, 6, 8, 10 and 12 months to relevant Scrutiny Committees. This is the third budget monitoring report for the financial year 2004/05.

3.   At the last meeting of this Committee on 13th December 2004, a report was presented on the budget position at the six months stage. Pressures were identified from rising demand and costs across all user groups and the action that was being taken to reduce the risks. At that stage the projected year end position for Social Care was an overspend of £740,000 with a warning that the underlying trend was an overcommitment of £1million. However, the projection made a number of assumptions which had the potential risk of not being achieved. It was acknowledged that the position was both concerning and challenging.

4.   It was also noted that there were risks within the Strategic Housing budget on homelessness.

5.   This report discusses the results of the investment in Older People's Services, the continuing pressure on other services, and the exceptional circumstances that have arisen in the year and the resultant projected overspend.

Social Services Budget 2004/05

6.   The budget for the financial year 2004/05 was set by Council on 5[th] March 2004. Additional resources of £1million were allocated to the Social Care programme area against the Older People's Business Case.

Older Peoples Services

7.   The increased investment in Older Peoples Services has yielded a number of developments, including:

- The in house home care service has been reshaped into the STARRS reablement service, with little disruption to service users;

- Secured the Nursing Home Sector being available with the increase in fees;

- Care packages have been reviewed, which has meant resources have focussed on those in highest need

- Block contracts with independent home care providers have been set up, which has brought stability to the market;

- The numbers of people assessed as needing a service for whom funding is not available has been kept to a minimum

The projections on Older Peoples Spend indicate a breakeven position

Children's Social Care

8.   The budget management has secured a hold on expenditure, but given the complex needs and costs of placements, there remains a projected overcommitment of £585,000 for the year.

Learning Disabilities

9.   The budget management has not had the same impact as planned in relation to holding the expenditure or taking into account key pressures. The savings plan has not been realised in full and the Continuing Care funding from the Primary Care Trust has been less than assumed. There has been a separate change report to Cabinet which identified significant service challenges. However, given the size of the problem, it has been decided to conduct an external (to the directorate) review of the financial arrangements and spending decisions, in order to have secure budget planning for 2005/06.

Further information on the subject of this report is available from
Anne Silley on 01432 260545

Exceptional Items

10.   There have been exceptional items of expenditure, totalling £758,000 which relate to the risks identified. Although efforts were made to manage these items, this has not proved possible. They are as follows

- *PCT Contributions to Pooled Budgets* The ongoing negotiations with the PCT on the attributable risk have not reached total agreement. The financial risks on the pooled budgets are now projected as attributable to the partner whose service element the overspend relates to. The Mental Health overspend reported by Social Care, even though the PCT manages the service, is now included in the Social Care projections.

The projected overspend on the pooled budgets increases by £256,000 as a result. The PCT have now agreed to make a contribution of £100,000 towards the overspend on the Council's element of the Mental Health pooled budget. This methodology does not fit a Section 31 pooled budget agreement, in that there must an agreed risk share in respect of over and underspends. There will be a more robust risk sharing and management accountability agreement for 2005/06.

Continuing Care Contributions for qualifying Learning Disability service users- current projections assume £250,000 contribution from the PCT. This is secure, although the costs attributable had been calculated at approximately £400,000. The PCT has acknowledged this and this will be budgeted for in 2005/06.

- *Statutory Obligations* The Council has needed to review its funding decisions for some individual cases as a result of legal challenge. This has created additional expenditure of £89,000.

- *Loss of Grant* The Directorate has suffered a loss of Supporting People Grant income of £175,000. It has been a challenge to manage commitments within budget.

- *Prior Year Adjustments* Invoices totalling £152,000 have been received, which relate to the 2003/04 financial year. Some of these relate to disputed invoices which ultimately fell to the responsibility of the Council to pay.

- *NHS Emergency Support -* Additional funding of £36,000, to enable discharges from community hospitals to free beds at the Acute Trust, given the pressures in November 2004 and January 2005.

Projected Year End position

11.   The projected year end position for Social Care, is an overspend of £1,514,000, (4.2% of the Social Care budget) with exceptional items of £758,000. This is shown in the tables below. This latest budget projection shows deterioration on the previously reported position, despite applying harsh management action. All efforts possible are being made to sustain this position

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Further information on the subject of this report is available from
Anne Silley on 01432 260545

Social Care Budget

	£000
Original Budget 2004/05	35,990
Overspend Carried Forward from 03/04	(245)
Budget 2004/05	**35,745**

Budget Area £000	Budget 2004/05 £000	Projected Over (Under) Spend £000	Exceptional Items within Projection £000
Children's	8,789	543	48
Older People	8,237	0	36
Mental Health	3,871	284	156
Learning Disabilities	5,797	1,569	503
Other Adults	6,486	(388)	15
Business Services	1,983	(412)	0
Other Social Care	582	(82)	0
TOTAL	35,745	1,514	758

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Strategic Housing Budget 2004/05

12.   The Strategic Housing budget is projected to overspend by £163,000, of which £49,000 is an exceptional item relating to 2003/04 homelessness expenditure.

13.   A previously identified risk was on homelessness expenditure. The budget on temporary accommodation has overspent by £310,000, but robust management action continues to be taken to manage the overspend down to projected level of £163,000 for the overall Strategic Housing budget The 2004/05 budget for

Further information on the subject of this report is available from
Anne Silley on 01432 260545

Strategic Housing is £1,260,000. In addition, an underspend of £60,000 has been carried forward from 2003/04, making the total budget £1,320,000.

Summary

14. The Directorate's aim is to completely eradicate the "debt" brought forward on the Social Care budget has not proved possible despite the action that has been taken to achieve savings at the cost of service provision. The current projected overspend represents a significant deterioration in the position and equates to 4.1% of the Social Care budget, double the 2% limit permitted by Financial Standing Orders. The projection has made realistic assumptions against the savings targets previously set and other risks and is not expected to deteriorate further.

15. The picture being managed at present is very concerning and the challenges will remain for 2005/06 bearing in mind the commitments that have been entered into. Decisions will need to be taken about the level of service that can be achieved within the budget available and the pooled budgets.

RECOMMENDATION

THAT the budget monitoring report for the first 10 months of the financial year 2004/05 be noted.

BACKGROUND PAPERS

- None

Further information on the subject of this report is available from
Anne Silley on 01432 260545

PERFORMANCE MONITORING 2004/2005

Report By: Performance Improvement Manager

Wards Affected

County-wide

Purpose

1. To report on the available Performance Assessment Framework (PAF) indicators position and provide information about current performance management work within the Social Care and Strategic Housing Directorate.

Financial Implications

2   There are no direct implications.   However, top-performing authorities will be rewarded by the relaxation of government grant conditions.

Background

3. The Performance Management Framework of the Council requires reporting to Scrutiny Committee at 4, 6, 8, 10 and 12 months. This report covers the latest position prior to the final outturn figures, which will also be reported to the Department of Health. This is the provisional position as some information, measured in conjunction with health colleagues, is to be confirmed.

4. As outlined in previous reports to this Committee, the Department of Health (DH) publishes statistical information on the performance of all Social Services Departments. There is a national set of 50 indicators covering the two service groups, Adult Services and Children's Services. The DH ranks performance in five bands ranging from Band 1 - 'investigate urgently' to Band 5 - 'very good'.

5. Strategic Housing performance is monitored by Best Value indicators and regularly reported to the Government Office of the West Midlands and the Office of the Deputy Prime Minister.

Social Care

6. Overall performance is being maintained at a steady state across the Directorate, although there are two areas in which we are potentially vulnerable. Current indications are that there are two adults indicators that are in the "investigate urgently" band. These are: 'Older People Helped to Live at Home' (C32) and 'Acceptable Waiting Time for Assessments' (D55). Operational managers are aware of the situation and actions are being taken to try and improve these areas.

7. The detail of the performance is given in the attached Appendices.

Further information on the subject of this report is available from
Andrew Hasler, Performance Improvement Manager on 01432 260655

Strategic Housing

8.   The detail of the housing indicators is shown in the attached appendix, including a commentary for each. It is to be noted that whilst certain indicators may appear not to be on target, it is anticipated that further progress will be seen later in the year.

Other Performance Developments

Service Planning

9.   The current round of Service Planning is coming to an end. The Service Plans have been developed in line with the Corporate approach and are now more closely aligned to the national objectives set within the Delivery and Improvement Statement. A regular programme of monitoring the plans will be established through the Directorate Management Team.

Delivery and Improvement Statement

10.   The Spring Delivery and Improvement Statement (DIS) is expected to arrive on 1st April and must be completed by the end of May. This represents a significant piece of work across the Social Care Divisions within the Directorate. The DIS includes the outturns and achievements from last period, projections for the next six months and details the strategies, risk management action and contingencies that we will put in place.

11.   The DIS is returned to the Commission for Social Care Inspection who is responsible for assessing the Directorate's overall performance.

"Making it Real"

12.   In order to raise awareness about performance management across the Directorate and to enable and empower operational teams to take more control over their performance, a series of "Making it Real" workshops have been facilitated across the Directorate. There has been broadly a positive response to these sessions, which has enabled some very useful feedback about actions needed. An update will be made at the meeting.

Herefordshire Driver

13.   Work using the Council's Herefordshire Driver tool has also recently been completed, which has provided both a senior management and operational team perspective as to how well the Directorate is performing against a set of components; Leadership (Do we provide effective leadership?), Policy and Strategy (Where are we going?), People (Do we manage our own people well?), Partnerships and Resources (Do we make the best use of our resources and partnerships to deliver our services?) and processes (How do we do things?)

14.   The findings from both the Making it Real and Herefordshire Driver exercises, along with the feedback from the Staff Opinion Survey are being used to establish a set of Senior Management Team Commitments for the forthcoming year. These will be regularly reviewed and will demonstrate a positive means of responding to Directorate-wide feedback. A verbal report will be given to the meeting.

Further information on the subject of this report is available from
Andrew Hasler, Performance Improvement Manager on 01432 260655

54

RECOMMENDATION

THAT (a)   the report on Herefordshire Social Care and Strategic Housing Performance be noted;

and

(b)   areas of concern continue to be monitored.

BACKGROUND PAPERS

• None

Further information on the subject of this report is available from
Andrew Hasler, Performance Improvement Manager on 01432 260655

55

SERVICE AREA: ADULTS AND OLDER PEOPLES (AO)

PAF	BVPI	LPSA	Indicator	2003/2004 Performance	Band 2003/04		2004/2005 Performance 2nd Quarter	Band 2004/05	2004/2005 Performance 3rd Quarter	Band 2004/05	L
B11		✓	**Intensive home care as a percentage of intensive home and residential care**	14.7	2	☹	15.0	2	16.0	2	☹
B12	52		**Cost of intensive social care for adults and older people**	434	2	☹	487	2	406	3	😐
B13			Unit cost of residential and nursing care for older people	354	3	😐	327	2	355	3	😐
B14			Unit cost of residential and nursing care for adults with learning disabilities	543	4	☺	685	3	569	5	☺
B15			Unit cost of residential and nursing care for adults with mental illness	452	2	☹	563	2	510	2	☹
B16			Unit cost of residential and nursing care for adults with physical disabilities	633	2	☹	710	2	710	2	☹
B17			Unit cost of home care for adults and older people	17.8	2	☹	19.6	2	19.6	2	☹
C26			Admissions of supported residents aged 65 or over to residential/nursing care	69.9	4	☺	58.9	4	58.9	4	☺
C27			Admissions of supported residents aged 18–64 to residential/nursing care	2	4	☺	2	5	2	5	☺
C28	53	✓	**Intensive home care**	5.5	2	☹	6	2	6	2	☹
C29			Adults with physical disabilities helped to live at home	4.2	4	☺	2.2	2	2.2	2	☹
C30			Adults with learning disabilities helped to live at home	2.2	3	😐	2	3	2	3	😐
C31			Adults with mental health problems helped to live at home	1.7	3	😐	1.1	2	1.0	2	☹
C32	54	✓	**Older people helped to live at home**	84	3	😐	51	1	51	1	☹
C51			Direct payments	51	3	😐	52	3	53	3	😐
C62			Services for carers *						8		
D37			Availability of single rooms	81	2	☹	80	2	80	2	☹
D39	58		% of people receiving a statement of their needs and how they will be met	85	2	☹	86	2	87	2	☹
D40	55		Clients receiving a review	50	2	☹	48	2	60	2	☹
D54	56		Percentage of items of equipment and adaptations delivered within 7 working days *	63	3	😐	59	2	73	4	☺
D55	195		Acceptable waiting time for assessments **	70	3	😐	48	1	48	1	☹
D56	196		Acceptable waiting time for care packages **	76	4	☺	72	4	72	4	☺
E47			Ethnicity of older people receiving assessment	0.92	***		0.7	2	0.7	2	☹
E48			Ethnicity of older people receiving services following an assessment	1.06	***		0.7		0.7	3	😐
E50			Assessments of adults and older people leading to provision of service	43	***		53		79		☺
E61			**Assessments of older people**	55.4	3	😐	41	3	48	3	😐

* New Indicator for 2004-05

** Indicator replaced from 2002–03 onwards

*** Not banded

☹ Band 1/2
😐 Band 3
☺ Band 4/5

SERVICE AREA: CHILDREN AND FAMILIES (CF)

PAF Area	PAF	BVPI	LPSA	Indicator	2003/2004 Performance	Band 2003/04		2004/2005 Performance 2nd Quarter	Band 2004/05	2004/2005 Performance 3rd Quarter	Band 2004/05	
A. **National Priorities and Strategic Objectives**	A1	49		**Stability of placements of children looked after**	8.7	5	☺	9.8	5	10.3	5	☺
	A2	50		**Educational qualifications of children looked after [joint working]**	52.2	4	☺	Annual PI		Annual PI		
	A3			**Re-registrations on the Child Protection Register**	21.4	2	☹	9	4	9	4	☺
	A4	161	✓	**Employment, education & training for care leavers [joint working]**	68.8	5	☺	Annual PI		Annual PI		
B. **Cost and Efficiency**	B7			**Children looked after in foster placements or placed for adoption**	93.3	4	☺	90	5	91	4	☺
	B8	51		**Cost of services for children looked after ***	454	4	☺	555	3	526	4	☺
	B9			**Unit cost of children's residential care ***	2794	2	☹	4495	2	3927	2	☹
	B10			**Unit cost of foster care ***	251	3	😐	230	4	239	4	☺
C. **59 Effectiveness of Service Delivery and Outcomes**	C18			**Final warnings/reprimands and convictions of children looked after**	2.1	3	😐	Annual PI		Annual PI		
	C19			**Health of children looked after**	86.5	5	☺	Annual PI		Annual PI		
	C20	162		**Reviews of child protection cases**	100	5	☺	Annual PI		Annual PI		
	C21			**Duration on the child protection register**	7.6	4	☺	9.2	4	5.3	4	☺
	C22			**Young children looked after in foster placements or placed for adoption**	100	5	☺	92.6	3	98.1	5	☺
	C23	163	✓	**Adoptions of children looked after**	4.8	2	☹	9.9	5	9.4	5	☺
	C24		✓	**Children looked after absent from school [joint working]**	12	3	😐	Annual PI		Annual PI		
D. **Quality of Services for Users and Carers**	D35			**Long term stability of children looked after**	48.1	2	☹	50	3	49	2	☹
E. **Fair Access**	E44			**Relative spend on family support**	39	4	☺	31.7	3	38.0	4	☺
	E45			**Ethnicity of children in need ****	2.71	2	☹					

* **Indicator is collected annually**

** **Indicator only collected when there is a CIN Census**

☹   😐   ☺

Band 1/2

Band 3

Band 4/5

HOUSING PERFORMANCE INDICATORS

BVPI	Out-turn 2001/2002	Out-turn 2002/2003	Out-turn 2003/2004	Target 2004/2005	Actual Performance					Explanation of target	Commentary on progress towards target
					Q1	Q2	Q3	Q4			
BV62: The proportion of unfit private sector dwellings made fit or demolished as a direct result of action by the LA	1.27% **Out-turn 2000/2001** 0.83%	1.62%	2.52%	3.0%	2.50 %	2.56 %	2.58 %		:| Progress towards target = 2.58%	The target is intended to drive up performance improvement with the aim of achieving top quartile status over a three-year period. Denominator = 3650 unfit properties, defined by the House Condition Survey 2000	This indicator measures average performance since the last Stock Condition Survey in 2001, as required in the Audit Commission guidance. Progress is being made towards achieving the target. Staff shortages have impacted upon completion of grant applications.
BV64: The number of private sector dwellings that are returned to occupation or demolished as a result of action by the LA		64	42	40	2	10	4		:(Progress towards target = 16 properties	This target reflects our excellent performance in the previous two years. We aim to maintain our position in the top quartile of all English authorities. The target of 40 for 04/05 was based upon focussing on properties which had been long-term empty.	Staff time has been concentrated on reviewing the Private Sector Lease Scheme which has had a direct impact on initial delivery. In the longer term, this work should support improvement in this indicator. Difficulties are also being experienced with partners in developing schemes.
BV183 a: The average length of stay of households that include dependent children/pregnant women in bed and breakfast accommodation		8 weeks	5 weeks	0	4	3	3		:(Progress towards target = 4 weeks	The Council has an LPSA 1 target which requires that no households are placed in B&B accommodation during 04/05, hence the zero target. The ODPM also discourage use of this type of temporary accommodation through the Homelessness (Suitability of Accommodation) Order 2004.	The LPSA 1 target has not been met due to increasing numbers of applicants and a lack of alternative temporary accommodation and move-on accommodation. On-going homelessness demand means the use of B&B is unavoidable but the Council is developing additional temporary housing solutions. The trend is showing improvement.

HOUSING PERFORMANCE INDICATORS

Best Value Performance Indicators	Out-turn 2001/2002	Out-turn 2002/2003	Out-turn 2003/2004	Target 2004/2005	ACTUAL PERFORMANCE					Explanation of target	Commentary on progress towards target
					Q1	Q2	Q3	Q4			
BV183 b: The average length of stay of households that include dependent children in hostel accommodation		14 weeks	13 weeks	12 weeks	10	17	30		Progress towards target = 19 weeks :(	Herefordshire is an area of high housing demand. The lack of settled accommodation and lengthy waiting times for homeless families means that 12 weeks a challenging target for this indicator.	The policy of minimising the use of Bed and Breakfast accommodation, combined with the shortage of settled accommodation, has impacted on the use of hostel accommodation for families with children.
BV 202: The number of people sleeping rough on a single night within the LA area				Less than 3	Annual Count Count = 0				:)	Government target is to reduce rough sleeping as close to zero as possible, and to maintain a reduction of two-thirds the figure recorded in 1998. Our estimate at that time was less than 10 people sleeping rough.	The Headcount was carried out in accordance with ODPM guidance on 21 April 2004. There was found to be no admissible evidence of rough sleeping in the county.
BV 203: The % change in the average number of families with dependent children or a pregnant woman placed in temporary accommodation compared with the average from the previous year.			(+ 12.4%)	0%	+ 1.6 %	+ 6.3 %	+ 11.1 %		Progress towards target = + 6.33% :(	Set against rising levels of homelessness, this target is intended to halt the increasing trend of families with children in any form of temporary accommodation. Action to prevent homelessness will take time to implement and our target will aim to achieve a % reduction here in the future. The on-going housing shortage represents a challenge to this indicator.	It is hoped performance will improve when the new Allocation Policy is implemented. This will allow Agency Staff to support and encourage quicker move-on from temporary accommodation. Furthermore, expansion of support services should impact on reducing repeat homelessness. However, the housing shortage makes occupation of temporary accommodation inevitable.

SOCIAL CARE AND HOUSING SCRUTINY COMMITTEE

WORK PROGRAMMES

Report By: County Secretary and Solicitor

Wards Affected

County-wide

Purpose

1.   To note the current position concerning the Committee's Work Programme.

Background

2.   The Committee's current work programme has expired. A review is currently underway concerning the remit of the Committee in the light of the Children Act 2004 and the establishment of a Children's Directorate and a Cabinet Member portfolio for Children's Services. Following this review a draft work programme will be prepared as appropriate, in consultation with the Chairman and Vice-Chairman.

3.   If Members have any Social Care and Strategic Housing issues they wish to suggest should be scrutinised in the future, they are requested to inform the Chairman or Vice-Chairman accordingly.

RECOMMENDATION

> **THAT the position be noted and any issues which Members consider merit scrutiny be noted for future scrutiny arrangements.**

BACKGROUND PAPERS

•   None

Further information on the subject of this report is available from Tim Brown, Committee Manager (Scrutiny)
on 01432 260239

PRESENTATION BY CABINET MEMBER (SOCIAL CARE AND STRATEGIC HOUSING)

Report By: County Secretary and Solicitor

Wards Affected

County-wide

Purpose

1.   To receive a presentation by the Cabinet Member (Social Care and Strategic Housing) informing the Committee of policy issues affecting this programme area and the main priorities.

Background

2.   A report from the Cabinet Member is attached.

BACKGROUND PAPERS

• None

Further information on the subject of this report is available from
Tim Brown, Committee Manager (Scrutiny) on 01432 260239

HEREFORDSHIRE
COUNCIL

PRESENTATION BY CABINET MEMBER TO SOCIAL CARE AND HOUSING SCRUTINY COMMITTEE – APRIL 2005

BY COUNCILLOR MRS LO BARNETT
CABINET MEMBER (SOCIAL CARE AND STRATEGIC HOUSING)

1. I made a presentation to the Committee in September 2003 on the policy issues affecting this programme area and the main priorities. Since that time the Council has responded to the Children Act by appointing Councillor Don Rule as the Cabinet Member for Childrens Services. My report this time therefore focuses on developments in Adult Social Care and Strategic Housing.

2. Since that presentation the following achievements have been realised which has involved a massive effort on the part of all relevant officers, and I would like to take this opportunity to record my thanks to every one for their fortitude and loyalty during a very difficult period:

    *   The Hillside Intermediate Care Centre opened in November 2003, which has assisted in the reduction of delayed discharges from Hereford Hospitals Trust from a high base to nil. This change in service is helping people to return safely to their own homes.

    *   The Transfer of the Council's Homes for Older People to SHAW took place in 2004. This was a very complex contract and demanded a great deal of time and effort in order to obtain the best possible results for service users and the Council.

    *   The Business Case for Older People was presented to Cabinet in January 2004, securing additional investment of £700,000 for Older Peoples Services for 2004/05.

    *   The Extra Care Housing project for Hereford City is under way, partly funded by a successful bid for Department of Health funding, Herefordshire Council and Extra Care Charitable Housing Trust. This partnership working will result in a very worthwhile scheme for older people, which has been successful in other areas of the country.

    *   The Older Peoples Inspection report in July 2004 showed that Older Peoples Services showed "promising prospects for improvement".

    *   The Strategic Housing Self Assessment achieved an excellent rating.

    *   The in-house home care service has been reshaped into the STARRS reablement service, with little disruption to service users. All members of staff were seen on a one to one basis by the Service Manager responsible for the service. This change is of immense benefit to the people who need it, 800 hours per week across the county being provided by 80 reablement assistants with 10

Further information on the subject of this report is available from
Councillor Mrs LO Barnett 01544 267289

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senior members of staff. The new policy is more flexible and ensures staff time is used to the maximum benefit.

3.   In my previous presentation I warned that budget plans for 2004/05 and onwards indicated a need for more financial investment, particularly for older people. The increased investment in Older Peoples Services for 2004/05 has resulted in this particular budget breaking even, but I am stressing the need for more investment to meet ever-increasing challenges in future years. The integration of Learning Disabilities and Mental Health has been a success, but the budgets for 2004/05 are showing an overspend which is giving rise to concern and the Learning Disabilities position is being investigated. The integration of the Community Equipment Service with the PCT is yet another change which is to be commended, but the pooled budget arrangements are to be strengthened, much more partnership working is needed and a great deal of research is to be undertaken for the future.

4.   My main priorities for the coming year are to:

- Take forward the recommendations of the new Vision for Adult Social Care, published 21st March 2005. This is a Government Green Paper dealing with "Independence, Well -being and Choice" of individuals, more partnership working with communities and the voluntary sector, plus being involved in prevention work. This document is out for consultation and at the moment does not indicate any additional resources being made available to local government.

- Review the Budget Plans for 2005/06, recognising the need to achieve efficiency savings.

- Drive forward the Extra Care Development to bring the project to a successful conclusion.

- As a matter for priority, take forward the modernisation of the Learning Disabilities Service as endorsed by Cabinet, work closely with the PCT to reach a clear understanding on pooled budgets, to ensure that the budget for this area is brought under control in 2005/06.

- Develop and enhance the Community Equipment Service as a matter of urgency, working in partnership with Housing and ICT in order to plan a futuristic service as soon as possible, with a report to Cabinet in September of this year.

- Urgently address the Supporting People programme. There are severe difficulties for the Herefordshire Supporting People Partnership if the ODPM distribution formula is implemented as it stands. Herefordshire will be the 7th most adversely affected authority in England, facing a loss of approximately £1.85million over a 5 year period and means in the long term a loss of at least £4.2 million on 2003/2004 grant levels.

- I appreciate the support of Cabinet for extra financial assistance and am very much aware that efficiency savings must be found. This will not be easy but there is a determination by senior officers to make sure that the savings are achieved.

Conclusion

5.   I am in no doubt that 2005/06 will again be a very challenging year for Social Care and Strategic Housing, and one of even more change and innovation. I am particularly concerned about the Learning Disabilities agenda and Mental Health services but am confident if partnership working is driven forward, particularly on matters financial, a successful outcome will be achieved

6.   Delivering the Supporting People Programme is not going to be easy. Homelessness is increasing in our County and this needs urgent attention, but the Supporting People Partnership has produced a strategy document covering a 5 year period, which is on its way to the ODPM with a covering letter from the Leader of Council. I wish to thank the officers and members of the Partnership for all their hard work in producing the document, bearing in mind that a further review will be necessary in 12 months.

7.   Continuing to progress the Older Peoples Service achievement is also a matter of priority and concern. I am not unhappy with the Government's Green Paper but feel that words are all very well. However, delivering an ever-changing agenda without any obvious financial help from Government is no easy task, particularly when Herefordshire has an ever-increasing older population.

8.   In conclusion I wish to make it very clear that even more investment is required in future years and that we all have to work more closely together with all our partners including our local communities to ensure that we put a great deal of effort into preventative work. At the same time we always need to be aware of the vulnerability of many people in their own homes or in care homes and this will always be a top priority.

COUNCILLOR MRS LO BARNETT
CABINET MEMBER (SOCIAL CARE AND STRATEGIC HOUSING)

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