

# AGENDA

## Cabinet

Date: **Thursday 19 March 2015**

---

Time: **2.00 pm**

---

Place: **Shire Hall, St Peters Square, Hereford, HR1 2HX**

---

Notes: Please note the **time, date** and **venue** of the meeting.

For any further information please contact:

**Governance Services**

Tel: 01432 260635

Email: [ruth.goldwater@herefordshire.gov.uk](mailto:ruth.goldwater@herefordshire.gov.uk)

---

If you would like help to understand this document, or would like it in another format, please call Governance Services on 01432 260635 or e-mail [ruth.goldwater@herefordshire.gov.uk](mailto:ruth.goldwater@herefordshire.gov.uk) in advance of the meeting.

# **Agenda for the Meeting of the Cabinet**

## **Membership**

**Chairman**

**Councillor AW Johnson**

**Councillor H Bramer  
Councillor JW Millar  
Councillor PM Morgan  
Councillor GJ Powell  
Councillor PD Price  
Councillor P Rone**

**AGENDA****PUBLIC INFORMATION FIRE INFO OCT 14****HEREFORDSHIRE COUNCIL**

Notice has been served in accordance with Part 3, Section 9 (Publicity in connection with key decisions) of The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

<b>Item No</b>	<b>Title</b>	<b>Portfolio Responsibility</b>	<b>Scrutiny Committee</b>	<b>28 Day Notice Given</b>
5	Herefordshire Older People's Housing Strategy and Pathway	Health and Wellbeing	Health and Social Care Overview and Scrutiny Committee	28 January 2015
7	Waste Management Services Update	Corporate Strategy and Finance	General Overview and Scrutiny Committee	12 February 2015

**1. APOLOGIES FOR ABSENCE**

To receive any apologies for absence.

**2. DECLARATIONS OF INTEREST**

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

**3. MINUTES**

To approve and sign the minutes of the meeting held on 26 February 2015.

7 - 14

**4. PUBLIC HEALTH ANNUAL REPORT**

To publish the statutory annual report of the Director of Public Health on the health of people of Herefordshire, as required by the Health and Social Care Act 2012.

15 - 38

**5. HEREFORDSHIRE OLDER PEOPLE'S HOUSING STRATEGY AND PATHWAY**

To approve the Herefordshire Older People's Housing Strategy and Pathway.

39 - 96

**6. STAYING PUT STRATEGY**

To approve the Staying Put policy and procedures.

97 - 112

**7. WASTE MANAGEMENT SERVICES CONTRACT UPDATE**

To approve the deferral of the payment for the purchase of the Energy from Waste plant site in Hartlebury and provide an update on the outcome of the execution of joint waste PFI contract variation concluded in May 2014.

113 - 118

**8. CORPORATE DELIVERY PLAN 2015-16**

119 - 138

To agree the projects and measures within the 2015/16 corporate delivery plan.

## **The Public's Rights to Information and Attendance at Meetings**

### **YOU HAVE A RIGHT TO: -**

- Attend all Council, Cabinet, Committee and Sub-Committee meetings unless the business to be transacted would disclose 'confidential' or 'exempt' information.
- Inspect agenda and public reports at least five clear days before the date of the meeting.
- Inspect minutes of the Council and all Committees and Sub-Committees and written statements of decisions taken by the Cabinet or individual Cabinet Members for up to six years following a meeting.
- Inspect background papers used in the preparation of public reports for a period of up to four years from the date of the meeting. (A list of the background papers to a report is given at the end of each report). A background paper is a document on which the officer has relied in writing the report and which otherwise is not available to the public.
- Access to a public register stating the names, addresses and wards of all Councillors with details of the membership of Cabinet and of all Committees and Sub-Committees.
- Have a reasonable number of copies of agenda and reports (relating to items to be considered in public) made available to the public attending meetings of the Council, Cabinet, Committees and Sub-Committees.
- Have access to a list specifying those powers on which the Council have delegated decision making to their officers identifying the officers concerned by title.
- Copy any of the documents mentioned above to which you have a right of access, subject to a reasonable charge (20p per sheet subject to a maximum of £5.00 per agenda plus a nominal fee of £1.50 for postage).
- Access to this summary of your rights as members of the public to attend meetings of the Council, Cabinet, Committees and Sub-Committees and to inspect and copy documents.

### **Public Transport Links**

- The Shire Hall is a few minutes walking distance from both bus stations located in the town centre of Hereford.

## **RECORDING OF THIS MEETING**

Please note that filming, photography and recording of this meeting is permitted provided that it does not disrupt the business of the meeting.

Members of the public are advised that if you do not wish to be filmed or photographed you should let the governance services team know before the meeting starts so that anyone who intends filming or photographing the meeting can be made aware.

The reporting of meetings is subject to the law and it is the responsibility of those doing the reporting to ensure that they comply.

## **FIRE AND EMERGENCY EVACUATION PROCEDURE**

In the event of a fire or emergency the alarm bell will ring continuously.

You should vacate the building in an orderly manner through the nearest available fire exit and make your way to the Fire Assembly Point in the Shire Hall car park.

Please do not allow any items of clothing, etc. to obstruct any of the exits.

Do not delay your vacation of the building by stopping or returning to collect coats or other personal belongings.

The Chairman or an attendee at the meeting must take the signing in sheet so it can be checked when everyone is at the assembly point.

HEREFORDSHIRE COUNCIL

**MINUTES of the meeting of Cabinet held at Shire Hall, St Peters Square, Hereford, HR1 2HX on Thursday 26 February 2015 at 2.00 pm**

**Present:** Councillor PM Morgan (Chairman)

**Councillors:** H Bramer, JW Millar, GJ Powell, PD Price and P Rone

**In attendance:** Councillors CNH Attwood, WLS Bowen, ACR Chappell, EPJ Harvey, TM James, RI Matthews, FM Norman, AJW Powers, Mr A Neill, Mr B Norman, Mr P Robinson, Mrs J Davidson and Ms H Coombes

**61. APOLOGIES FOR ABSENCE**

Apologies were received from the Leader, Councillor AW Johnson.

**62. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**63. MINUTES**

**RESOLVED:** That the Minutes of the meeting held on 22 January 2015 be approved as a correct record and signed by the Chairman.

**64. CHILDREN'S SAFEGUARDING UPDATE**

The Cabinet Member, Young People and Children's Services, introduced an update report on the outcomes of three inspections concerning safeguarding within Children's Services.

The Director of Children's Wellbeing and the Head of Safeguarding and Review presented the update.

It was noted that the Department for Education (DfE) review was positive and that steps are being taken to improve the areas that were identified as requiring further attention. The rate of progress is dependent upon sustaining stability and quality of the workforce which is being addressed through a range of recruitment activity with the intention of reducing the proportion of agency workers from 31%.

There is ongoing support from all agencies and progress is being made despite some issues with capacity, which is being addressed to ensure effective safeguarding.

It is hoped that the DfE will take the decision at the end of March 2015 to lift the intervention notice and this will enable transitional arrangements for effective safeguarding and for the service to then focus on continuous improvement. The appointment of a new Chair of the Herefordshire Safeguarding Children Board will be announced next week.

The Peer Diagnostic pilot scrutinised the functionality of the Safeguarding Board and

informed the DfE review. It also recognised that better alignment of partnership working was needed and that the voice of the child needed to be embedded. Both of these matters are being addressed. The review also noted improvements in multi-agency working and in business support and was positive about what has been achieved within the past twelve months.

Progress on the Ofsted action plan was noted; the Safeguarding Board is now responsible for assuring delivery of the plan and this will form the bench-mark for any future Ofsted inspection. Key evidence will be that there is a case by case difference reflected in feedback from families.

In answer to a member's question regarding sufficient resourcing of the business unit of the Safeguarding Children Board, the Director of Children's Wellbeing explained that there was support from partner agencies to enhance structures. A management of change process is underway and there is confidence that the structure will be fully staffed from April 2015. It was further clarified that there is work across the partnership to ensure that priorities are addressed through the Safeguarding Board.

The leader of the Independent Group asked about the scale of the concerns reported by staff feeling overwhelmed with administrative tasks. The Head of Safeguarding and Review confirmed that capacity in the business support function was being addressed to support the volume of calls to the service, further enhanced by improvements in telephony. The casework management system, Frameworki, is also being modernised to simplify processes.

The Chairman of the General Overview and Scrutiny Committee commented that there is more to be done to ensure stability and that nationally there is an alarming volume of complex cases that remain unreported including those relating to child sexual exploitation.

The leader of the Green group asked for reassurance that there is now focus and strong leadership and that the service can be flexible to the nature of casework without the level of police resources as reported impeding the safeguarding process. The Director of Children's Wellbeing explained that the Safeguarding Board has identified priorities and will be held to account. The leadership role is key here in raising the profile of safeguarding across Herefordshire to ensure that children are protected from harm. She added that child sexual exploitation is both a national and county-wide issue for communities as well as for agencies. As regards police input, it is recognised that there is pressure on all agencies regarding participation in child protection conferences, making it harder to progress some cases. The involvement of Mental Health and General Practitioner services is also being addressed. The focus is on achieving an "outstanding" review to improve lives and to provide high quality work for every family.

A Member observed that, in the context of a forthcoming new administration, the report contained a high number of acronyms, and requested that this be addressed to ensure that reports are accessible. It was noted that a glossary is being developed and this matter will be taken into account in the induction programme for members.

The leader of the Liberal Democrats commented that the focus needs to be on having a strong workforce that is not distracted by process, and cited a social worker who left the service due to increasing administrative tasks. The Director for Children's Wellbeing explained that safeguarding relies on the judgement of all professionals and that it is governed by regulation and legal process. These factors were previously of poor quality at the time that the service was deemed "inadequate". A good process protects the interests of all and supports people to



perform well and improve outcomes. The Head of Safeguarding and Review added that there is a long term plan underway to ensure a high quality workforce which will pay dividends over time.

The leader of It's Our County noted the encouraging messages although there is further work ahead and improvement needs to be maintained. He commented that each partner must meet its legal obligations under the Children Act to contribute fully alongside the council, and that the Safeguarding Board and the Scrutiny Committee be held to account. The Head of Safeguarding and Review confirmed that there is support and recognition from partners for growth and despite pressures on police resources, there is active commitment to the Multi-Agency Safeguarding Hub and to child sexual exploitation.

The Deputy Leader placed on record thanks to David McCallum for his work as the outgoing Chair of the Herefordshire Safeguarding Children Board.

**RESOLVED:**

- That**
- (a) the outcome of the Department for Education review conducted on 15 and 16 December 2014 be noted;**
  - (b) the outcome of the Herefordshire Safeguarding Children Board Local Government Association peer diagnostic conducted between 17-19 November 2014 be noted; and**
  - (c) progress to date on the Ofsted action plan be noted.**

**65. DELIVERING THE STRATEGIC APPROACH FOR CHILDREN AND YOUNG PEOPLE WITH DISABILITIES AND SPECIAL EDUCATIONAL NEEDS**

The Cabinet Member, Young People and Children's Services, introduced the report in consideration of the transformation programme for children and young people with disabilities and special educational needs.

The Assistant Director, Children's Wellbeing, presented the strategy which has had extensive consultation with families. The strategy forms part of the Children and Young People plan and has been commended for developing good practice. The key themes of the strategy are:

- enabling choice and empowerment in line with the Children and Families Act (2014) to meet aspirations to provide a high level of service to this group;
- Integrated pathways, which co-ordinate services and streamline the transition into adulthood by linking Children's and Adults' services in line with Department for Education recommendations;
- Advice and guidance for families to make choices around services to meet needs, for example short breaks; and
- working with the Clinical Commissioning Group to consider needs to support children to remain at home rather than using distant residential accommodation

A Member welcomed the approach detailed in the report and commented on the reduction of "silos". In answer to his question regarding resources, the Assistant Director, Children's Wellbeing, confirmed that some areas are progressing well, whilst other areas such as personalisation, require further work. At this stage clarity is required regarding the Clinical Commissioning Group's priorities in order to meet

families' complex needs and to enhance therapy services.

The Chair of the General Overview and Scrutiny Committee asked about the risk areas associated with the strategy. There is concern about avoiding overburdening families with consultation, instead focusing on positive change for the families affected.

The leader of the Independent group asked for confirmation that previous weaknesses in the partnership had been resolved. The Assistant Director, Children's Wellbeing, explained that the partnership could be stronger in some areas but it was important that it is held to account. It was noted that there is a strong partnership with Paediatrics.

The leader of the Liberal Democrats commented that there could be a significant financial impact from the Care Act which will need to be made clear to newly elected Members. This was noted for the attention of officers for inclusion in the induction programme for Members.

The leader of the Greens commented on the improvement programme's reporting to the Director and the Health and Wellbeing Board. She further commented that the detail of personalisation required development in order for implementation.

#### **RESOLVED:**

- That**
- (a) the 2015-2018 Children and young people with disabilities and special education needs services transformation programme be endorsed; and**
  - (b) the approval of the detailed work packages be delegated to the Director of Children's Wellbeing**

#### **66. APPROVAL TO UNDERTAKE A PROCUREMENT EXERCISE IN RESPECT OF PUPIL REFERRAL SERVICES FOR HEREFORDSHIRE**

The Cabinet Member, Young People and Children's Services, introduced the report. There has been a previous reorganisation of pupil referral services in Herefordshire, and now a more formal arrangement must be established to enable a clear plan to take the service forward and for an anticipated change in leadership in the next few years.

The Head of Additional Needs confirmed the success of the current arrangement. It is rated by Ofsted as "Good" and GCSE results have improved. There has also been a high success rate of the 25 hours' minimum attendance provision compared with other education providers. The governors have requested a more formalised arrangement to provide this service as the current arrangements are not sustainable.

In answer to a question from a Member about maintaining and improving outcomes, the Head of Additional Needs confirmed that referring schools value how the service is managed and work continues on improving long-term outcomes to reduce the risk of pupils becoming Not in Employment, Education or Training. The expected level of response to the tender is unknown.

The Director of Children's Wellbeing gave reassurance over concerns regarding continuous improvement, explaining that by undertaking a procurement exercise, it will allow the council to have more control over the outcome and future intervention to maintain the service. It is proposed to maintain the same level of service with the

same resource available rather than for the purposes of efficiency.

**RESOLVED:**

- That**
- (a) The council undertake a procurement exercise with a view to identifying a preferred provider of pupil referral services following the recent amalgamation of pupil referral services into a single pupil referral unit (PRU); and**
  - (b) Delegated authority is provided to enable the Director of Children's Wellbeing to conclude the procurement process and authorise award of the resulting contract on the basis it is within the financial envelope described in the report.**

**67. THE FUTURE OF COLWALL C OF E PRIMARY SCHOOL BUILDING**

A revision to recommendation (b) of the report was noted, in recognition of the School Estate Strategy.

The Head of Education Development presented the report. The school building is in poor condition and pupils are in temporary accommodation due to flooding and damp which had affected the fabric of the building. The damp is due to the water table and the nature of the ground at the site and it was concluded that this was not a suitable site for a school. The temporary accommodation required upgrading and so it was necessary to explore the viability of a new school. A bid was submitted to the Government's School Building Programme and it was agreed that it required major investment. Colwall was the only Herefordshire school successful in the bidding process.

A Member asked for reassurance regarding the financial implications described in the report. The Head of Education Development confirmed that the intention was to look at a Value for Money solution.

Responding to a Member's concern over the provision of capital, the Assistant Director, Children's Wellbeing, explained that there was limited funding and other schools including academies were able to bid. The estates strategy is key in terms of local opportunities to change the financial position for the next 5-10 years, as in for example, the relocation of Broadlands School which released capital for other priorities.

The Chief Financial Officer explained that this formed part of the overall funding strategy. The school is in temporary accommodation with high rental costs and urgent action is required. The report shows that it would not be value for money to return to the original site, due to further flooding risk, and so the intention would be to look at alternative provision in relation to the overall strategy. The school is included in the capital programme for rebuild and it is anticipated that government funding would reduce council borrowing.

In response to a Member's question regarding ongoing work with academies, the Director of Children's Wellbeing confirmed the requirement to join funding streams and whilst the council is not responsible for all buildings, it has a responsibility to provide a place for children to attend school.

The leader of It's Our County asked about the consequences of other schools claiming through the strategy which would present high risk regarding future

obligations. The Head of Education Development explained that this must be seen in the context of the estates strategy for the next 10-15 years and the release of capital and government grants and revenues.

A Member commented that the long-term solutions for the whole estate must be considered along with where the school places are and taking into account the needs of other schools.

The Chair of the General Overview and Scrutiny Committee confirmed that the estates strategy is scheduled for that Committee's agenda on 10 March 2015.

## RESOLVED

- THAT:**
- (a) it be noted that the existing Colwall school is considered unsuitable for repair;**
  - (b) subject to development of a satisfactory business case, and having regard to the schools estate strategy scheduled for Cabinet consideration in July 2015, a new school is built in Colwall to replace it, either on the existing site or at an alternative location in the parish; and**
  - (c) delegated authority be given to the director for children's wellbeing to undertake all feasibility work necessary to develop a business case to inform a future decision, with a view to enabling a new school to be operational by September 2018.**

## 68. CORPORATE PERFORMANCE REPORT 2014/15: QUARTER 3

The Deputy Leader introduced the report which sets out the council's performance for the third quarter of 2014-15.

In response to a number of questions from the leader of It's Our County group, the Director of Adults and Wellbeing confirmed that training has taken place for all frontline staff to improve ways of working. Secondment arrangements were changed in order to support provision of integrated care pathways for mental health in recognition of the differing criteria for providing mental health care between the different agencies.

In terms of nursing care, there are pressures through Accident and Emergency admissions and there was a surprising increase in nursing home admissions. The focus will be to ensure people are discharged to their own homes rather than to residential nursing care. The increase in admissions has peaked and is now stabilising. Should the needs change for an individual who initially had local authority funding, they would be assessed for continuing healthcare and then access free NHS care, for example, for dementia. It is therefore essential to ensure that people have access as soon as possible.

With regard to the Care Act, there is confidence that there will be implementation in some areas. The reaction from the public is yet unknown but if demand increases after 1 April 2015, there could be pressure on services. There has been training for staff. However, detailed guidance regarding the new duties is not yet available and so expectations are not clear at this stage. Despite this, Herefordshire is on par with other authorities and is on target.

With regard to affordable housing, there is confidence that the overall target will be met and exceeded, although this is dependent on planning decisions. The target was

met last year.

The leader of the Green group asked about the implications of greater demand on support for troubled families. The Director of Children's Wellbeing confirmed that if there were more than the anticipated number of families, demand could be met.

An incorrect figure quoted in paragraph 22 of the report was noted for amendment.

The leader of the Green group commented on waste collection with regard to addressing issues with storage space for bins. She added that in regard to devolved services, that the change process had been slow.

The leader of It's Our County commented on the quality of jobs in the city centre and the risk of zero hours contracts and low pay. He added that the digital strategy was not mentioned in the report and the Deputy Leader confirmed that this strategy was on track.

The Chair of the General Overview and Scrutiny Committee expressed concern over a reliance upon on-line services. The Deputy Leader confirmed that whilst customers will still be able to contact the council by telephone, we will continue to encourage them to access services online wherever possible.

The Cabinet Member for Infrastructure responded to a comment from the leader of It's Our County by clarifying the position of the core strategy following an examination which was completed on 25 February 2015. It was confirmed that the plan would be unaffected by the examination and further re-writing of policies is awaited, which would take place during the pre-election period. In response, concern was raised regarding the conditions of the pre-election period and that work would be taking place in relation to the core strategy during this time. It was confirmed that this exercise was at the behest of the inspector and that it would not be of a political nature nor have any impact on the Council's constitution.

#### **RESOLVED**

**That the report be noted.**

#### **69. BUDGET MONITORING REPORT**

The Chief Financial Officer provided an updated position on the projected outturn for 2014-2015. This reflects a more confident position as potential budget pressures have not materialised.

#### **RESOLVED**

**That the report be noted.**

The meeting ended at 3.57pm

**CHAIRMAN**





<b>MEETING:</b>	<b>CABINET</b>
<b>MEETING DATE:</b>	<b>19 March 2015</b>
<b>TITLE OF REPORT:</b>	<b>DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2014-15</b>
<b>REPORT BY:</b>	<b>DIRECTOR OF PUBLIC HEALTH (INTERIM)</b>

## Classification

Open

## Key Decision

This is not a key decision.

## Wards Affected

County-wide

## Purpose

To publish the statutory annual report of the Director of Public Health on the health of people of Herefordshire as required by the Health and Social Care Act 2012.

## Recommendation(s)

**THAT:**

- (a) **The Director of Public Health Annual Report 2014 is received by the Council and is published, as required by the Health and Social Care Act 2012.**

## Alternative options

1. There are no alternative options to receiving and publishing the Director of Public Health's Annual Report as the Annual Report is a statutory requirement.

## Reasons for recommendations

2. The report provides the Director of Public Health's view on important issues affecting the health of the population of Herefordshire and fulfils the requirement that the report is published by the local authority.

---

Further information on the subject of this report is available from  
Alison Merry on Tel (01432) 383431

3. The annual report has as its focus one of Herefordshire Health and Wellbeing Board's key themes – giving our children the best start in life.
4. The annual report supports the priorities of the Children and Young People's Partnership.
5. The Director of Public Health Annual Report is a statutory requirement.

## **Key considerations**

6. This is the second annual report of the Director of Public Health since the transition of public health responsibilities to the local authority under the Health and Social Care Act 2012.
7. The focus of the Director of Public Health's annual report this year is children and young people with a particular emphasis on improving outcomes for 0-5 year olds. In this report the Director of Public Health highlights what can be done to improve a wide range of outcomes for children including health, wellbeing, developmental and educational outcomes. The report has been informed by data in the Children's Integrated Needs Assessment (CINA) published in January and the Joint Strategic Needs Assessment, *Understanding Herefordshire (UH)*, and provides a range of practical advice on improving children's outcomes, thereby complementing the recommendations in the CINA and UH.
8. It contains an update on the recommendations from the 2013 Director of Public Health's annual report.
9. The topics highlighted in the report are important to the decision making process about local priorities for public health and the local authority for the next planning cycle and beyond.

## **Community impact**

10. The report emphasises the central role of parents, carers, families and communities in ensuring that children get the best possible start in life.
11. Addressing the issues highlighted in these reports has the potential to positively impact on the health and wellbeing of children and young people and the families and communities that they live in.

## **Equality and human rights**

12. The report is the Director of Public Health's view of the needs of the county's population experiencing greatest inequalities and poorest health outcomes. This includes examining equitable access to services. The recommendations support the Public Sector Equality Duty, under section 149 of the Equality Act 2010, which are to:
  - Eliminate discrimination, harassment and victimisation and any other conduct that is prohibited by or under the Act;
  - Advance equality of opportunity between people who share a relevant protected characteristic and people who do not share it;
  - Foster good relations between people who share a relevant protected characteristic and those who do not share it.

---

Further information on the subject of this report is available from  
Alison Merry on Tel (01432) 383431



## **Financial implications**

13. The report itself has no financial implications and commits no funding.

## **Legal implications**

14. Section 31 Health and Social Care Act 2012 provides that there is a duty for the Director of Public Health to prepare an annual report on the health of the people in the area of the local authority, and a duty on the local authority to publish the report.

## **Risk management**

15. Failure to produce the Director of Public Health Annual Report would mean as a local authority we are not fulfilling our statutory requirement.
16. Failure to receive the annual report and take action in its decision making could result in the council's failure to improve outcomes for children and young people in Herefordshire.

## **Consultees**

17. Children's Wellbeing Directorate.

## **Appendices**

18. Appendix A – Director of Public Health Annual Report

## **Background papers**

19. None identified.



# Herefordshire

## A great place to grow up



 @HfdsCouncil

 hfdscouncil

[www.herefordshire.gov.uk](http://www.herefordshire.gov.uk)

# Foreword by Councillor Graham Powell, Cabinet Member Adults and Wellbeing

The responsibility for public health transferred from the NHS to local authorities in April 2013 and brought with it a requirement to issue an annual report from the Director of Public Health. I'm



pleased to introduce this, the third annual report prepared by the Herefordshire public health team, which has as its focus one of the Herefordshire Health and Wellbeing Board's key themes – giving our children the best possible start in life.

The Health and Wellbeing Board has an overarching vision that:

“Herefordshire residents are resilient; lead fulfilling lives; are emotionally and physically healthy and feel safe and secure”.

In order to achieve that vision it is critical that we work together to give children and young people the best possible start in life and to put in place the building blocks that will lead them towards a safe and healthy lifestyle.

Herefordshire is a wonderful place for our children to grow up but there are significant differences in health and achievement as we look across the county. This is why I welcomed the publication in January of the Children's Integrated Needs Assessment, which will bring focus onto the provision of services that meet the real needs of our children and young people.

The health and social care system across Herefordshire will face many challenges over the next few years including reductions in funding and an increasing demand on services through population growth and ageing. The Health and Wellbeing strategy is being refreshed to recognise these challenges and to ensure that as commissioners, service providers and residents we work together to improve the health of the residents of Herefordshire.

I welcome this year's report from the Director of Public Health and in particular the focus on children and young people.

**Councillor Graham Powell**  
**Cabinet Member, Adults and Wellbeing**  
**Chair of Herefordshire Health and Wellbeing Board**

# Introduction by Councillor Jeremy Millar, Cabinet Member Children and Young People

I welcome this report and its focus on 0-5 year olds both as Cabinet Member for Children and Young People's Wellbeing and on behalf of Herefordshire's Children and Young People's Partnership.



Our vision in Herefordshire is that children and young people are raised with their health and wellbeing needs met, that they are kept safe from harm, and that they have the opportunities to make the most of their capabilities. Working together in partnership across the county to ensure that children get the best possible start in life is a fundamentally important part of how we will achieve this.

This report supports the priorities of the Children and Young People's Partnership which are to improve outcomes for our youngest children aged 0-5 years, improve outcomes for children with a disability, develop a "think family" approach and culture across

the partnership to target resources and support vulnerable families, improve the emotional and mental health and wellbeing of children, young people and their parents and carers, and reduce the number of young people offending.

This year's report reinforces the central role of families in shaping children's health, wellbeing and development. In addition to reporting on work that is in progress and planned, it provides suggestions for how families can help themselves to support their children in the early years and links to sources of further information. It also challenges us as a community to think about how we can "think family" and support all of our children to get off to a great start in life.

I hope that you will enjoy reading this year's Director of Public Health annual report.

**Councillor Jeremy Millar**  
**Cabinet Member, Children and Young People**  
**Chair of Herefordshire Children and Young People's Partnership Board**

## **Acknowledgments:**

With contributions from the Herefordshire Public Health Department: Rod Thomson, Alison Merry, Susan Lloyd, Sophie Young and Latha Unny

Designed by Herefordshire Council Design Team: Nick Winwood and Alun Herbert

With thanks to Jo Davidson, Councillor Graham Powell, Councillor Jeremy Millar, Helen Coombes, Arif Mahmood, Kristan Pritchard, Jean Masanyero-Bennie, Andy Hough, Gwen Ellison and Helun Sandifort



# Introduction by the Director of Public Health

The starting point for Herefordshire's Health and Wellbeing Strategy is the early childhood years and the importance of supportive communities and families. In recognising Herefordshire Council's commitment to the health and wellbeing of children and young people, my report this year is concentrating on how we can improve the health and wellbeing of our very youngest children.



From birth to 5 years old children grow more than they will at any other time of their lives. Giving a child the best start in life really does set them up for the future. Whilst most families are successful in supporting and caring for themselves and their children, families sometimes benefit from extra support to help children to achieve their full potential. In this report you will read how we are working with families, communities, service providers and the NHS across Herefordshire to ensure that families are able to care for themselves and so that children get the best possible start in life.

**Professor Rod Thomson, Director of Public Health (Interim), Herefordshire Council**







# Herefordshire: A great place to

Starting school is a big life event and we want all our children to be ready for that big day. This means that the first five years of a child's life are vitally important and we know that supporting our children to live in a home in which their health and wellbeing needs are met, where they are kept safe from harm, and where they are encouraged to maximise their capabilities is the key to having healthy and happy children in Herefordshire.

As a council we want to support children and families and to do this we need a good understanding about their lives and what their needs are. This year, with partners, we have undertaken a detailed assessment of the needs of children and young people in Herefordshire – the Children's Integrated Needs Assessment. This was published in January 2015 and is available to read on the council's website ([http://factsandfigures.herefordshire.gov.uk/CYP.aspx#Resource\\_box](http://factsandfigures.herefordshire.gov.uk/CYP.aspx#Resource_box)).

As a result we now have very good information about local children and families, their needs, what is going really well for children and young people and what some of the local challenges are.

From this work, we have identified three particular priorities for the future health and wellbeing of children in the 0-5 age group:

- achieving the best possible physical and mental health and wellbeing,
- ensuring that children are up-to-date with their immunisations, and
- keeping teeth healthy.

All these things will help to ensure that children develop as well as they can in these early years and get off to a great start at school.

## Starting well

Breastfeeding gives babies a great start in life and we are encouraging breastfeeding by promoting Start 4 Life, introducing the UNICEF baby friendly initiative, providing information about the benefits of breastfeeding to mums and dads, developing peer support by training mums to support others to breastfeed, and through the support that Health Visitors and Children's Centres provide to parents. Information about the benefits of breastfeeding and on where to find support with breastfeeding in Herefordshire can be found at:

<http://www.nhs.uk/start4life/Pages/breastfeeding-benefits.aspx>

<https://www.herefordshire.gov.uk/health-and-social-care/children-and-family-care/breastfeeding-support>

<http://www.wyevalley.nhs.uk/services/community-services/health-visiting.aspx>

A balanced diet is important for everyone, but pregnant women, new mums and young children may have additional needs and so may benefit from vitamin supplements. During the past year we have been working with the national Healthy Start programme to set up a Healthy Start vitamin scheme in Herefordshire which provides vitamin supplements for young children and pregnant women.



# grow up

We are now working towards increasing the number of outlets where Healthy Start vitamins are available. Parents can find more information about the Healthy Start programme from their Health Visitor, local Children's Centre or by visiting: <http://www.healthystart.nhs.uk>.

Many of the foods and drinks that children love to eat contain surprisingly high levels of sugar and as a result children often have too much sugar in their diet. This can lead to weight gain and an increased risk of developing diseases such as type 2 diabetes and heart disease in later life. Sugar is also responsible for causing tooth decay. Taking care to limit the amount of sugar that children consume is therefore a very important part of healthy eating and swapping sugary food and drinks for healthier alternatives is a great way to improve children's health and to help keep teeth strong and healthy. There are lots of ideas for sugar swaps here: <http://www.nhs.uk/Change4Life/Pages/low-sugar-healthy-snacks.aspx>

This year we are also supporting the NHS Sport and Physical Activity Challenge within primary schools.



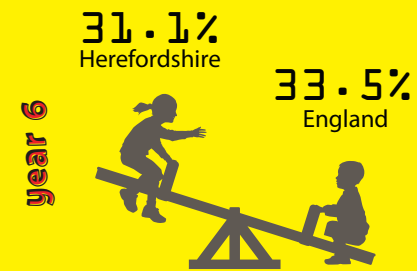
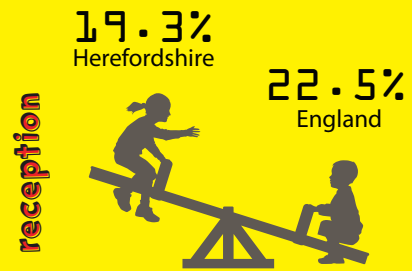
## Dental Health

Children in Herefordshire are more likely to have tooth decay at age three and age five than children in other regions of England. In our county around one in every five three year olds has signs of tooth decay and this increases to one in every three five-year-old children. We tend to see poorer dental health in areas of the county that are less economically advantaged.

We are working with Health Visitors and childcare providers to improve the dental health of young children in Herefordshire for example by promoting our "top tips for teeth", by providing dental packs to parents and by setting up supervised toothbrushing schemes.

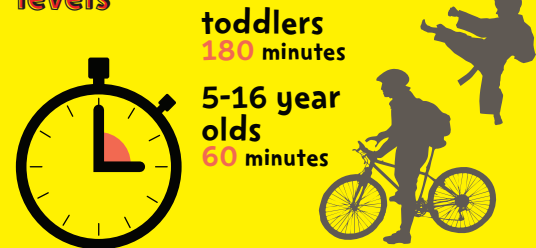


## percentage of children obese or overweight:



(Period: 2013/14 data)

## recommended daily activity levels



## keeping active

To find out how children can become more active search change 4 Life or visit the NHS Choices website



## Our top tips for teeth:

- Start brushing your child's teeth as soon as the first tooth comes through
  - Brush your child's teeth twice a day with a family fluoride toothpaste containing at least 1,000ppm fluoride (most toothpastes have 1,000ppm – 1,450ppm fluoride. Toothpastes with less than 1,000ppm fluoride are less effective at preventing decay)
  - Make "last thing at night before bed" one of the times when you brush
  - Children up to 3 years of age should only use a smear of toothpaste (see below)
  - Children aged 3-6 years should use no more than a pea sized blob of toothpaste (see below)
  - After brushing, encourage your child to "spit out and not rinse"
  - Children need to be helped to brush and supervised by an adult whilst brushing until they are at least 7 years old
  - Don't let your child eat or lick toothpaste from the tube.
- 
- Take children to see the dentist regularly
  - Start taking your child to the dentist as soon as the first tooth comes through
  - REMEMBER - NHS dental care is FREE for children and for pregnant women and for new mums (up to 12 months after birth)



Smear - under 3 years



Pea sized blob - 3 years +



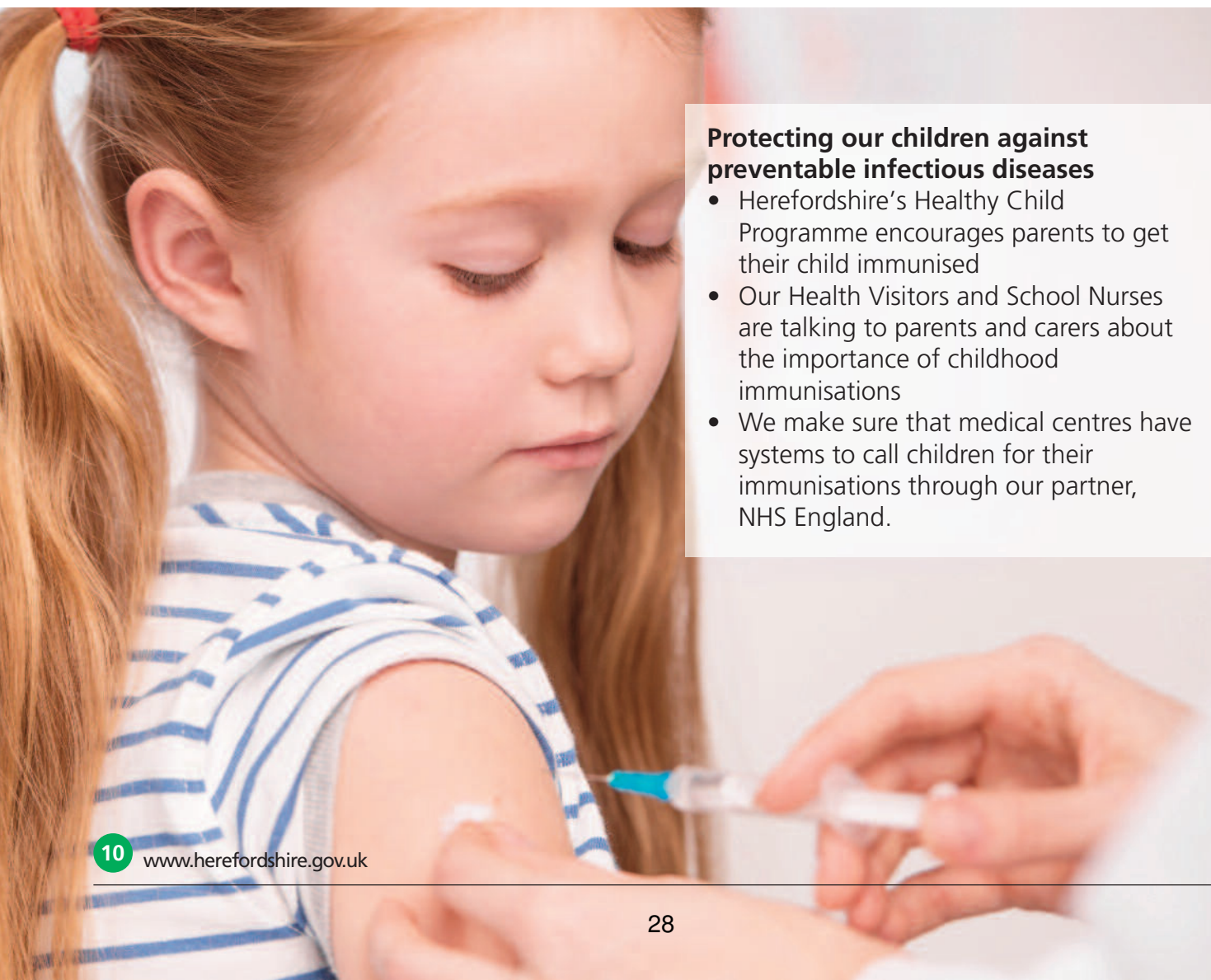
# Protecting our children from infectious diseases

The NHS provides a programme of routine vaccinations to all children in order to protect them against preventable infectious diseases. Vaccinations work on two important levels. Firstly they offer protection to the individual child who receives the vaccination, and secondly they protect the wider community by reducing the ability of an infection to spread, but only when 95 or more out of every 100 children have been vaccinated (this is called 'herd immunity'). In Herefordshire the percentage of children who are up-to-date with their routine vaccinations is lower than the 95% required to provide the best possible protection for everyone and we are working with the NHS to increase the numbers of local children who are immunised. Up to the age of one year, the majority of children in Herefordshire are immunised with approximately 94 in every 100 children receiving their vaccinations. However, at two years of age the

uptake of routine vaccinations for Meningitis C (MenC), Haemophilus influenza type B (Hib) and Pneumococcal vaccine booster (PCV) is lower than the England average. Unvaccinated children are at potential risk of catching these diseases each of which can lead to serious illness and potentially can be fatal.

Make sure your child is protected by taking them along for their routine vaccinations at the recommended time.

You can find out more about routine childhood vaccinations from your Health Visitor, School Nurse or GP practice or by visiting: <http://www.nhs.uk/Conditions/vaccinations/Page/s/vaccination-schedule-age-checklist.aspx>



## Protecting our children against preventable infectious diseases

- Herefordshire's Healthy Child Programme encourages parents to get their child immunised
- Our Health Visitors and School Nurses are talking to parents and carers about the importance of childhood immunisations
- We make sure that medical centres have systems to call children for their immunisations through our partner, NHS England.



## Being ready for school

A child who lives in a family and community in which their health and wellbeing needs are met and where they are kept safe from harm is likely to maximise his/her potential. It's important that before a child goes to school he or she has a basic understanding of speaking, listening and numbers, taking turns and sharing, that they are able to do everyday tasks such as using a knife and fork to eat and that they are toilet trained. This underpins a child's education, which in turn underpins their emotional wellbeing and their growth into a strong resilient adult.

education - early years  
foundation stage profile



**60% of Herefordshire pupils achieved a good level of development at reception age 4-5 years old**

In 2013/14, 60 out of every 100 Herefordshire children had achieved a 'good level of development'. This is better than the numbers for the West Midlands (58) and the same as the England average in the same period. However it still means that 4 in 10 children are not achieving a good level of development, hence the importance of helping children and their families.

## What are we doing to help children develop their speaking, listening and numbers skills?

We have expanded the number of places for 2 year olds entitled to free education.

We are promoting a campaign to encourage nursery rhymes and reading with children, including annual reading challenges and improved access to neighbourhood libraries. Our 10 children's centres are supporting parenting and coordinating support services in specific areas of the county.

We are training staff who work with pre-school children to help children to develop their speaking and listening skills and to use phonics to support the development of reading skills.

We deliver accredited parenting programmes in groups and on a one to one basis in children's centres, together with family learning programmes, including work related skills.

We support providers of early years' services to ensure that the transition to reception is as smooth as possible for the child and their family.

## What can parents do to help young children to develop their readiness for school?

Parents and families are children's first teachers and are the most important people when it comes to helping young children to develop the skills they will need when they start school. Here are some of the things that parents of pre-school children can do to develop their child's readiness for school:

- Playing with your child and encouraging them to play with other children helps to develop a wide range of skills including speaking and listening, sharing and taking turns, developing confidence and making friends
- Singing nursery rhymes and children's songs helps to develop speaking, listening and simple maths skills
- Introducing your child to books and stories from an early age will help to lay the foundations for reading and writing
- Attending nursery, play-group or other early years' provision helps children to develop many of the skills they will need to get off to a great start at school.

All three year olds and four year olds are entitled to 570 hours of free childcare per year and now some two year olds are also eligible for this. More information on childcare in Herefordshire is available at:

<https://www.herefordshire.gov.uk/education-and-learning/early-years-and-childcare/childcare>

# Mental health and wellbeing in children and young people

Supporting parents during pregnancy and the early years is known to impact positively on the mental health of children and young people and a secure parent/child relationship contributes to a positive attachment and helps to create emotional resilience in children.

There are five simple steps that everyone can use to improve their mental wellbeing – **“connect”, “be active”, “keep learning”, “give” and “take notice”**. We are using these **“Five Ways to Wellbeing”** in our approach to improving mental wellbeing in children.

We are keen to support the mental wellbeing of local children and young people and their families and the Children and Young People’s Partnership has developed a multi-agency strategy to support emotional wellbeing and mental health for children, young people and their families. We want children, young people and their families to:

- Be aware of their own emotional wellbeing and mental health, and that of others
- Develop good emotional wellbeing and mental health
- Be able to get further support, advice and access to more specialised assistance when they need it.

Children and young people with poor mental health are more likely to have poor educational attainment and employment prospects, social relationship difficulties, physical ill health and substance misuse problems and to become involved in offending. We also know from the 2014 Chief Medical Officer’s report that children and young people from the poorest households are three times more likely to have a mental health problem than those growing up in better-off homes.



# The Five Steps to Wellbeing:

## 1) Connect

There is strong evidence to show that feeling close to and valued by other people is a fundamental human need and contributes to functioning well. Social relationships are important for promoting wellbeing and can act as a buffer against mental ill health for people of all ages.

## 2) Be active

Regular physical activity promotes wellbeing and is associated with lower rates of depression and anxiety across all age groups. The activity doesn't need to be particularly intense to make a difference. For example walking provides some level of exercise and has the benefit of encouraging social interactions.

## 3) Keep learning

Continued learning through life enhances self-esteem and encourages social interaction and a more active life.

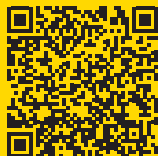
## 4) Give

Giving to others can improve mental wellbeing from small acts, such as a smile, thank you or kind word, through to larger acts, such as volunteering which can improve mental wellbeing and build social networks. Research into actions for promoting happiness has shown that committing an act of kindness once a week over a six-week period is associated with an increase in wellbeing.

## 5) Take notice

Taking notice, being aware of what is happening and "savoring the moment" can help to reaffirm life priorities, enhance self-understanding and can help people to make positive choices based on their own values and motivations. This is sometimes called "mindfulness", and it can positively change the way you feel about life and how you approach challenges.

<http://www.nhs.uk/Conditions/stress-anxiety-depression/Pages/improve-mental-wellbeing.aspx>  
#Evidence





# We provide extra support for Herefordshire families and children who are vulnerable

- We provide facilities/amenities for disabled children within their homes.
- We act early where children are at risk of homelessness.
- We work in partnership with a number of organisations such as West Mercia Women's Aid which provides outreach services to support children and young people affected by domestic abuse.
- We provide benefits and debt advice to parents in difficulty who need support.
- We have a dedicated team and service which works with looked after children.

For more information visit:

Children with disabilities and special needs:  
[www.herefordshire.gov.uk/health-and-social-care/children-and-family-care/disabilities-and-special-needs?q=disabled-children&type=suggestedpage](http://www.herefordshire.gov.uk/health-and-social-care/children-and-family-care/disabilities-and-special-needs?q=disabled-children&type=suggestedpage)

Homelessness:

[www.herefordshire.gov.uk/housing/homelessness-and-prevention/homelessness-advice-and-support](http://www.herefordshire.gov.uk/housing/homelessness-and-prevention/homelessness-advice-and-support)

Domestic abuse:

[www.westmerciawomensaid.org](http://www.westmerciawomensaid.org)





# The Healthy Child Programme

In Herefordshire we support the aims of the Healthy Child Programme which include:

- helping parents to develop a strong bond with their child
- encouraging breastfeeding
- encouraging children to stay healthy and safe
- reducing obesity in children by promoting healthy eating and physical activity
- identifying problems as early as possible so that any necessary help can be put in place at the earliest opportunity – for example problems with health and development such as learning difficulties or with a child's safety such as parental neglect
- protecting children from serious diseases, through screening and immunisation
- ensuring that children are prepared for school
- identifying and helping children with problems that might affect their chances later in life.

Health Visiting and School Nursing services are part of the Healthy Child Programme and provide support to children aged 0-5 (Health Visiting) and 5-19 (School Nursing) and to their families and carers.

Herefordshire Council took on commissioning responsibility for School Nursing in 2013 and since then we have worked closely with the local School Nurses to review, redesign and improve the services they offer to 5-19 year olds. In October 2015 the Council will become responsible for commissioning the Health Visiting service and we are already working with the Health Visitors to prepare for this transfer and to ensure that services for 0-5 and 5-19 year olds work efficiently together and are integrated with other services for children, young people and families.

You can find out more about the Healthy Child Programme and about Health Visitors and School Nurses in Herefordshire at the following websites:

<https://www.gov.uk/government/policies/giving-all-children-a-healthy-start-in-life>

<http://www.wyevalley.nhs.uk/services/community-services/health-visiting.aspx>

<http://www.wyevalley.nhs.uk/services/community-services/school-nursing.aspx>



# Public health in Herefordshire Council

At the end of March 2014 Herefordshire's public health team celebrated its first full year integrated into Herefordshire Council.

The move to the Local Authority has broadened the way in which health is seen in Herefordshire. Health is no longer the preserve of the NHS and Herefordshire Council has embraced its role particularly in preventing ill health, promoting good health and protecting residents from infectious disease. This has been a major change and has enabled the core public health team to work across the council in a way that has not happened previously, and to contribute to health in children's and adults' services including children's centres, housing and in many other departments.

Later in this report we have written an update on what we have delivered against the recommendations in last year's Director of Public Health Annual Report. In addition, in 2013/14 we also successfully set up the Herefordshire Health Protection Committee, a multi-agency group that assures that residents have appropriate access to immunisation, screening and protection against communicable diseases.

We ran a large number of health awareness campaigns across the county including HIV Testing week, Change 4 Life, Dry January, Sugar Swaps and many more.

Working with colleagues across health and social care has given us the opportunity to contribute an evidence-base where we would not have had the opportunity in the past, including producing the Children's Integrated Needs Assessment which this report is based on.

## Progress since last year

Last year the Director of Public Health's Annual report was on the topic of Collaborating for Health in Herefordshire and in it, the Director of Public Health made recommendations about:

1. Tackling health inequalities: a community based asset approach
2. Working together to reduce alcohol related harm
3. Public health and carers

We have chosen to change the format of this year's report and you will find recommendations for action this year in the Children's Integrated Needs Assessment. Below is an update on the public health progress against last year's recommendations.



RECOMMENDATION	PROGRESS
<b>Tackling health inequalities: a community asset based approach</b>	
<ul style="list-style-type: none"> <li>To seek out opportunities for collaboration and work together on lifestyle behaviour change.</li> </ul>	<p>The Council's Healthy Lifestyle Trainer Service supported a wide range of healthy summer events including promoting Change4Life "Disney 10 minute shake up", Wye Weight – group support programme for healthy weight, Walking for Health and Community Games (linked to the Olympic legacy).</p>
<ul style="list-style-type: none"> <li>To gain a better understanding of our communities and work with them to reduce the social gradient in health.</li> </ul>	<p>A pilot programme of work is being delivered by South Wye Regeneration Partnership to use community assets (people and community buildings) so that people get involved in making healthy lifestyle changes and tackle inequalities in health.</p>
<ul style="list-style-type: none"> <li>To develop our understanding of people's behaviours and influences on behaviour in Herefordshire, gaining insight through social marketing.</li> </ul>	<p>A number of social marketing campaigns have been promoted in Herefordshire including:  Change4Life  No Smoking Day  Stoptober  Alcohol Awareness Week  Sexual Health Awareness Week  and our local campaigns "Change a Little, Save a Lot".</p>
<ul style="list-style-type: none"> <li>To review existing services and commission healthy lifestyle behaviour change services such as for stop smoking and weight management.</li> </ul>	<p>We are recommissioning the current behaviour change services, including NHS Health Checks, a mandatory service, and Stop Smoking support. These will be in place for delivery in 2015/16.</p>
<b>Working together to reduce alcohol related harm</b>	
<ul style="list-style-type: none"> <li>That the Health and Wellbeing Board and partner organisations across Herefordshire continue to give priority to reducing alcohol related harm and to developing our strategic intelligence about the complexities of alcohol harm in our community, focusing on identifying areas of overlap where combined efforts have the potential to make the most impact.</li> </ul>	<p>We are in the process of re-commissioning an evidence based drug and alcohol service. The new service requires partners across the health and social care system to work jointly and reduce alcohol related harm.</p>
<ul style="list-style-type: none"> <li>That partner agencies commit to contributing their data and intelligence in order that we can build a comprehensive understanding of alcohol use and the consequences of alcohol misuse in Herefordshire.</li> </ul>	<p>Data continues to be shared at the Drug and Alcohol Operational Delivery Group (see below) providing a picture of alcohol related harm within the County.</p>
<ul style="list-style-type: none"> <li>That partner agencies commit to a more coordinated approach to working together to address alcohol related harm so that resources can be targeted following a strategic and evidence-based approach.</li> </ul>	<p>A new group, Drug and Alcohol Strategic Delivery Group, has been established to develop a drugs and alcohol strategy for Herefordshire.</p>
<ul style="list-style-type: none"> <li>That the Alcohol Harm Reduction Group provides a forum to bring together plans for tackling the influence of alcohol as it impacts on domestic violence and abuse, offender management and Families in Need.</li> </ul>	<p>The former Alcohol Harm Reduction Group has changed its terms of reference to include drugs, young people and public places in addition to its work on improving the night time economy and sharing data on alcohol related harm. The group is now called the Drug and Alcohol Operational Delivery Group.</p>

**RECOMMENDATION****PROGRESS****Public Health and carers**

- The needs of informal carers should be considered in the scoping of the 2013/14 Herefordshire Integrated Needs Assessment.
- Evidence of good practice should be reviewed for approaches to best support effective and sustainable informal care.
- When allocating resources, health economics principles should be applied to efficiently meet the needs of informal carers and benefit the wider health and social care system.

Close working with Hereford Carers Support. Needs Assessment to be progressed in 2014/15

Close working with Hereford Carers Support. Evidence base to be included in needs assessment to be progressed in 2014/15

The Herefordshire Carers Strategy 2012-2015 recognises the contribution that carers make to the lives of the person they are caring for and the wider society. The priorities within the strategy reflect the national priorities and the need to identify carers at the appropriate time and to support them to have a life of their own. Herefordshire Carers Support provides an element of this through the service they provide.



## Herefordshire: a great place to grow up

We are working in partnership with families, service providers and NHS Community groups across Herefordshire so that each child has the opportunity to grow up healthy and happy. There are still challenges, but here are some of Herefordshire's successes:

- Babies are less likely to be born with a low birth weight.
- Babies are more likely to have been breastfed at birth, although the numbers being breastfed at 6-8 weeks are average.
- Children generally are developmentally ready for school.
- Herefordshire's looked after children have better mental health than both the England average for looked after children and the 'norm' for British children who are not looked after.
- Children in reception and year six are less likely to be overweight or obese than children across the West Midlands and England, although two of every ten of our children are overweight or obese by the time they are measured in reception class which is a real cause for concern.
- Herefordshire's children have levels of immunisation coverage for Measles, Mumps and Rubella that are the same as coverage across England.
- Looked after children have better rates of immunisation compared to children in the general population; (92% in 2012-2013; 96% for children who were looked after for 12 months).<sup>3</sup>

## What you can do

You can find out more from these websites:



Change for life

<http://www.nhs.uk/change4life/Pages/change-for-life.aspx>



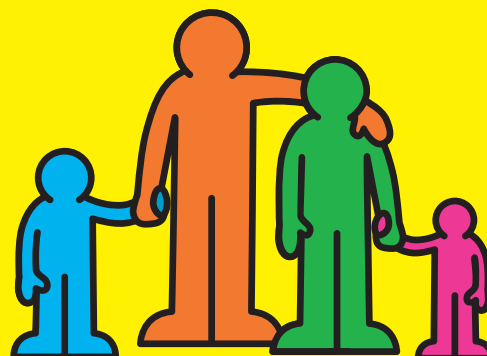
Herefordshire Council

<https://www.herefordshire.gov.uk/education-and-learning/early-years-and-childcare/supporting-parents-of-children-aged-0-4-years>



Start 4 Life

<http://www.nhs.uk/start4life/Pages/healthy-pregnancy-baby-advice.aspx>



<sup>3</sup> Comparisons are with the West Midlands and England norm.





<b>Meeting:</b>	<b>Cabinet</b>
<b>Meeting date:</b>	<b>19 March 2015</b>
<b>Title of report:</b>	<b>Herefordshire Older People's Housing Strategy and Pathway</b>
<b>Report by:</b>	<b>Programme Director (Housing and Growth)</b>

## Classification

Open

## Key Decision

This is a key decision because it is likely to be significant in terms of its effect on communities living or working in an area comprising one or more wards in the county.

NOTICE has been served in accordance with Part 3, Section 9 (Publicity in Connection with Key Decisions) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012

## Wards Affected

Countywide

## Purpose

To approve the Herefordshire Older People's Housing Strategy and Pathway.

## Recommendation(s)

**THAT:**

- (a) Cabinet approves the Herefordshire Older People's Housing Strategy and Pathway Action Plan (as attached at Appendix 1 of this report).**
- (b) Instruct the Programme Director, Housing and Growth, following consultation with the Cabinet Member, to undertake final minimum amendments as required, prior to publication.**

---

Further information on the subject of this report is available from  
Richard Gabb (Programme Director Housing and Growth) on Tel (01432) 261902



## Alternative options

- 1 Not to approve the Herefordshire Older People's Housing Strategy and Pathway Action Plan.
  - Advantages – There are no advantages in determining not to approve the Strategy Pathway Action Plan.
  - Disadvantages – The Older People's Housing Strategy and Pathway Action Plan forms a critical part of the transformation of Adult Wellbeing Services. In responding to the growing older population and funding challenges faced by Herefordshire's Health and Social Care partners it establishes the Council's approach to enabling residents to live healthily and independently for longer.

## Reasons for recommendations

- 2 Approving the Herefordshire Older People's Housing Strategy and Pathway Action Plan will provide clear guidance and endorsement on the housing and other related services that the Council proposes to develop in partnership with a range of partners to address the budgetary, housing and service challenges posed by our ageing population.

## Key considerations

- 3 Older households will make up a substantial proportion of Herefordshire's growing population over the next 20 years with 90% growth in households aged 85+ predicted by 2030.
- 4 Coupled with demographic changes Herefordshire is experiencing increases in people with dementia and other long term conditions. Generally, people with disabilities are living into older age and the rural nature of the County means that health and social care providers face greater costs in terms of service delivery. However, by 2014, Central Government funding for Councils, during the course of this Parliament, will have been cut by over 40%.
- 5 Herefordshire's rurality also means many older households are at an increased risk of social isolation with negative impacts on health and wellbeing as a result. The Herefordshire Council Healthy Housing Report 2012 highlighted that older households are more likely to live in older, larger housing with an increased risk of homes being non-decent and vulnerable, older households being in fuel poverty.
- 6 The Herefordshire Market Position Statement indicates that increasing demand for social care services, legislative changes within the Health and Wellbeing sector and reductions in funding to local government will require significant transformation in the social care market in Herefordshire. In particular, in meeting the requirements of the Care Act, there will be an increased need for the health and social care sector to integrate their approaches to care and support. This needs to be done in a way which helps reduce, prevent and delay the need for health and care services and supports people to maintain their independence for as long as possible. Housing and housing-related advice and support services are critical to helping provide greater choice and independence and reducing peoples reliance, in later life, on health and social care services.
- 7 Currently, there is an imbalance in the housing market in Herefordshire which limits

---

Further information on the subject of this report is available from  
Richard Gabb (Programme Director Housing and Growth) on Tel (01432) 261902



the housing options and choices available to people as they start to think about their future housing, health and wellbeing needs. This housing shortage applies across general needs and specialist housing for older people and there is a need to deliver more housing which is suitable for and able to adapt to, the changing needs our growing older population.

8. To inform this approach Peter Fletcher Associates and Arc4 were commissioned to carry out a comprehensive survey of households aged 50 and over and both qualitative and quantitative data was collected and analysed in relation to housing and support needs. Amongst key data recorded the survey found that:-
  - a. Just over 80% of households responding were home owners with two thirds of these mortgage free.
  - b. 67% were under-occupying their property.
  - c. The main needs for support related to cleaning, gardening and other maintenance tasks followed by personal care needs.
  - d. Up to 27% either intend to move in the next 5 years or are not sure of their moving intentions, however most want to move locally.
  - e. Better information and advice was identified as a key area for over one-fifth of the households surveyed.
9. The Herefordshire Older People's Housing Strategy and Pathway has been developed as an essential part of a broader transformation of the health and social care system, responding not only to the legislative changes, but also to the specific challenges for Herefordshire in relation to demographic changes and the lack of housing choices for older people.
10. The Strategy recognises the need to address the prevention agenda and identifies essential information, advice and guidance tools within a 'Pathway' for older people which promotes self-determination, independence, choice and control. Whilst elements of the Strategy Pathway centre on developing advice and housing-related support services, in partnership, it also sets out the approach to addressing the lack of housing market choice available to older people in Herefordshire.
11. Section 5 of the Strategy Pathway sets out the key actions required to turn the pathway into a reality for older people in Herefordshire. They are:-
  - f. Setting up the information and advice services and self-assessment tools for older people to make informed housing, service and support decisions in older age.
  - g. Developing the service offer to enable older people to stay at home
  - h. Developing the right housing mix to meet the housing need and demand of the ageing population.
12. Importantly, for the purposes of action (c) above, the Strategy Pathway identifies the housing delivery needs in the context of the 7 Housing Market Areas (HMA's) identified in the Herefordshire Local Housing Market Assessment, enabling regard to be given to addressing shortfalls at a local level.
13. Herefordshire Council will engage with a wide range of partners across the Housing,

---

Further information on the subject of this report is available from  
Richard Gabb (Programme Director Housing and Growth) on Tel (01432) 261902

Health and Social Care sectors to ensure the Housing Strategy Pathway Action Plan is delivered. This will include encouraging the development of capacity and capability within communities to connect with and support older people to live independently, working with developers to explore and deliver improved choice for older people within their local housing market areas. Market development will involve working with our partners to better understand the gaps and opportunities in the information, advice and guidance available and importantly, in the support options which help people to make the right decision as early as possible in preparing for older age.

## Community impact

14. The Strategy and Pathway Action Plan has been developed taking into account the findings of the Understanding Herefordshire evidence base and other data sources including the findings and recommendations of the Peter Fletcher and Arc4 study, the Local Housing Market Area Assessment and Healthy Housing Survey Report 2012.
15. It is framed within the context of a Herefordshire Adult Social Care Strategy that describes a new relationship with individuals and communities:

*In order to manage the funding challenge and to ensure the sustainable delivery of personalised care, we need to develop a new relationship with citizens and the local community. Changing the way that existing services are delivered will in most cases not be sufficient. There needs to be a fundamental change in expectations of individuals, communities and service providers if the most is to be made of available resources. The challenge is to develop an approach that benefits both the individual and the council, while discouraging behaviours that create user dependency and incur further costs.*

## Equality duty

16. The Older People's Housing Strategy and Pathway seeks to develop improved housing options for older people and create an environment in which older people are able to both consider, understand and access the right housing options to help ensure they live independently and healthily for longer.
17. This includes widening the quantity, quality and accessibility of information available and developing new housing which will improve the housing market choices available for the growing older population in Herefordshire.
18. In especially seeking to support people who are vulnerable or who would otherwise become vulnerable the Strategy and Pathway will advance the equality of opportunity of a significant proportion of the population of Herefordshire to live healthily and independently for as long as possible.

## Financial implications

19. The Actions proposed within this report will be taken forward within the existing budget envelope for Adults Wellbeing. For instance, it is anticipated that some advisory and signposting services can be adapted from pre-existing web-based systems used by other local authorities and some housing-related support services could be delivered on a charged-for basis, for instance, expanding Home Moving Services available from Voluntary Sector providers.
20. However, should the development of Information, Advice and Guidance services or

---

Further information on the subject of this report is available from  
Richard Gabb (Programme Director Housing and Growth) on Tel (01432) 261902

Support Services require additional funding, for instance on a spend-to-save basis, the financial implications will be brought for consideration as appropriate.

21. The report does not propose any financial commitment to fund Land or Capital development costs or in relation, for instance, to the delivery of mixed-tenure Extra Care Housing. Any such proposals which carry financial implications will be brought for consideration as appropriate.

## **Legal implications**

22. Proposal is in accordance with the Care Act 2014 which states that the provision of suitable accommodation can be an integral part of care and support and provides flexibility for local authorities to arrange different types of accommodation to meet a person's care and support needs. The Care Act places a duty on local authorities to provide information and advice about care including housing..

## **Risk management**

23. There are no significant risks for the Council in approving the attached Strategy Pathway. The first proposal in relation to the development of improved information, advice and guidance does not represent a significant risk to forecast budgets although it will be necessary to apply some additional staffing resource to evaluating and securing the required information systems and ensuring connectivity to existing Council information and advice systems.
24. Whilst implementing the Strategy and Pathway is expected to impact positively on the demand for Health and wellbeing Services over the medium to longer term, failure to approve will lead to continued and increasing budget risks over the same period as the goring older population requires greater and greater access to health and wellbeing services funded by the Council and its statutory partners. Any risks highlighted will be flagged up in the relevant departmental risk register.
25. The Strategy does propose the development of significant amounts of specialised housing for older people including Extra Care. Whilst this report does not identify any specific Capital schemes the Cabinet may, in future, be asked to consider specific opportunities for Council-owned land to be developed for the purpose of providing Extra Care housing and whether, for the purpose of enabling affordable housing within the development, the Council wishes to extract full market value for the land. Any such proposals will be considered on a case by case basis.

## **Consultees**

26. The Herefordshire Older People's Housing Strategy and Pathway was informed by the findings of both quantitative and qualitative survey data as part of the study of households undertaken by Peter Fletcher associates and their research partner Arc4. A sample of 12,268 households were contacted and 3,578 questionnaires were received in response
27. A Workshop event involving a range of providers and stakeholders was held in July 2014 for the purpose of informing the development of the Strategy and Pathway. Consultation with a smaller 'members working group' was held in October 2014. A further Workshop is due to be held prior to Cabinet's consideration of this report.

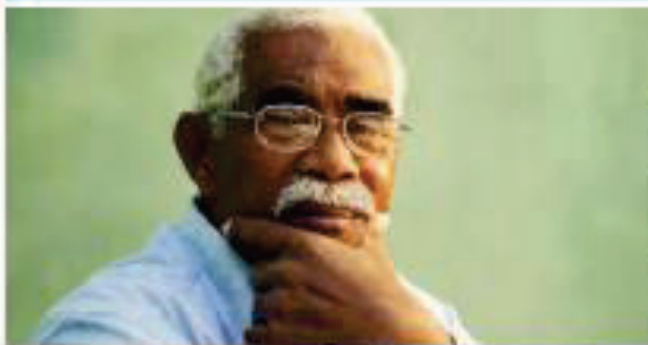
## **Appendices**

Appendix A – The Herefordshire Older People’s Housing Strategy and Pathway.

### **Background papers**

- Peter Fletcher Associates - Study of the Housing and Support Needs of Older People in Herefordshire (2012) Updated 2015.

# Herefordshire Older People's Housing Strategy and Pathway



Helping people make their housing decisions in older age  
Enabling older people to stay at home  
Developing the right housing mix to meet the needs of older people

## Herefordshire Older People's Housing Strategy and Pathway



### Foreword by Councillor Graham Powell, Cabinet Member Health and Wellbeing

This Housing Strategy and Pathway comes at a critical time in terms of our planning for the future of Adult Wellbeing services in Herefordshire.

During the period 2011 - 2015 core funding for local authorities will have reduced by 40% which will have an obvious impact on the capacity to deliver. Coupled with this financial pressure we have to add the challenges presented by a continuing increase in the numbers of older residents and new legislation. Herefordshire's Health and Social Care partners have all recognised these factors and are working together to transform the overall approach to the delivery of health and wellbeing outcomes.

This Older Peoples Housing Strategy and Pathway is a critical part of this transformation program. The pathway's strategic aims support the establishment of improved information, advice and self-assessment tools to help people make their housing decisions in a timely manner. The strategy also sets out proposals for the development of a range of flexible and accessible support services that will aid residents to live independent and healthy lifestyles in their own homes.

Herefordshire Council will work in partnership with housing developers to create the right mix of general needs and specialist housing to meet the demands of an ageing population. Older people are a key driver in Herefordshire's housing market but are currently poorly served by the imbalance in supply. Linked to Herefordshire's strategic housing plans this Strategy and Pathway aims to ensure that a significant proportion of the 16,500 housing target, as described in our emerging Local Plan, will be suitable for both the current and future needs of our demographic profile. This will be critical as we strive to allow older people to retain their independence for longer.

There will be challenges but delivery of this strategy will help to rebalance the housing, care and support system in Herefordshire. Individuals, families and communities, with support from Herefordshire Council, will work together to deliver outcomes that meet local need. Our approach will be founded upon the principles of 'help to help yourself, help when you need it and ongoing support for those who need it'.

The approaches set out in this strategy are essential to ensuring that all of the residents of Herefordshire have the opportunity to achieve the health and wellbeing outcomes that are important to them.

**Councillor Graham Powell**  
**Cabinet Member, Health and Wellbeing**



# Herefordshire Older People's Housing Strategy and Pathway

## Contents

<b>1.</b>	<b>Introduction and Purpose</b>	<b>3</b>
<b>2.</b>	<b>Context</b>	<b>4</b>
<b>3.</b>	<b>The Older population and housing aspirations</b>	<b>5</b>
	Figure 1: Herefordshire County 65+ Population Projections 2014-2030	6
	Figure 2: Wards within each Housing Market Area	6
	Figure 3: Buying a property by HMA	8
	Figure 4: House type preferences by HMA	8
	House type preferences also changed as people got older with fewer people wanting a house and more a bungalow or ground floor apartment	8
	Figure 5: House type preference by age	8
	Figure 6: No. of bedrooms preferred by age	9
	Figure 7: Size of dwelling by HMA	9
<b>4.</b>	<b>Developing the Housing Strategy and Pathway for Older People</b>	<b>11</b>
	Figure 8: Housing and Independent Living for Older People Pathway	12
<b>5.</b>	<b>Actions needed to turn the Housing Strategy and Pathway into reality for older people</b>	<b>13</b>
	Figure 9: Projecting future additional specialist older people's housing supply needed using the SHOP Toolkit model	17
<b>6.</b>	<b>Creating the right environment to make things happen</b>	<b>19</b>
<b>7.</b>	<b>What outcomes will we achieve?</b>	<b>20</b>
	<b>Appendix 1: Housing Pathway</b>	<b>21</b>
	<b>Appendix 2: Older Person's Housing Definitions and glossary</b>	<b>22</b>
	<b>Appendix 3: Older People's Housing Strategy and Pathway – Needs by HMA</b>	<b>35</b>

# Herefordshire Older People's Housing Strategy and Pathway

## 1. Introduction and Purpose

This Housing Strategy and Pathway aims to provide clear guidance on the housing and other related services that Herefordshire Council wishes to develop in partnership with a range of other organisations to address the housing and service challenges of our ageing population.

It builds on and updates the research in the *Study of the Housing and Support needs of Older People in Herefordshire* (Peter Fletcher Associates and Arc4 2012 Updated data report produced in January 2015 to take account of 2011 census) and takes account of many of the practical ideas discussed at the Strategic Partner workshop held on 1 July 2014. It also takes account of the evidence contained in the 'Understanding Herefordshire' integrated needs assessment (see Council website).

We are deliberately taking a broad rather than a prescriptive view of what defines older age. This recognises the fact that a growing number of older people are remaining active well into their 90's. Alongside this a growing number of adults with health conditions or disabilities are living into older age whilst other people may experience health problems as they approach or reach retirement. This is why the background data and research includes people aged 50+, and what is now termed older people in fact represents two or even three generations of the population. For the general needs housing market we are therefore talking about a broad age spectrum of households. More specialist housing will focus on the older age cohorts but also needs to include younger older people who need more specialist accommodation and support.

## 2. Context

### National context

The Housing Strategy for England (2011) identified that 60% of projected household growth to 2033 is from households aged 65+. Older people are therefore a major driver in the housing market, not just in relation to specialist housing but also general needs housing that is suitable for and attractive to older households.

Developing new housing for older people has a positive impact on both housing and health policy:

- Attractive housing choices for older people to move to smaller, more suitable accessible housing can free up family housing
- Good housing for older people can help reduce the number of older people moving into long-term care and reduce costs to the NHS and adult social care

In addition the Care Act sees housing as key to the provision of care and places a duty to provide information and advice about care, including housing.



## Local context

The Local Housing Market Assessment (LHMA) has identified the need for 16,500 new homes in the county by 2031. In addition, the major survey carried out in the county in 2011 of households aged 50+ (see further information later in this strategy pathway) highlights that 12% of older households intend to move in the next 5 years and a further 15% are not sure of their moving intentions. With older households making up a substantial proportion of projected household growth over the next 20 years (see Housing Strategy for England above) it is important that a significant proportion of these homes must be suitable for, and able to adapt to, the changing needs of our ageing population. This applies not only to the development of specialist housing but also mainstream housing, which is where 90% of older households live. This is why some mainstream national house builders, for example Barratts, who have previously focused on three and four bedroom homes aimed at families, are now also focusing on the retirement market as well and developing general needs housing and house types specifically aimed at older households aged 55+. The Council is already working with a major house builder to develop this approach on a site in the county.

New housing for older people can become a way of achieving market development through developing attractive smaller homes and addressing under occupation.

Alongside this, the Herefordshire Market Position Statement identifies that increasing demand for social care services, greater numbers of self-funders and personal budget holders, and restrictions in available local government expenditure will require significant changes in the social care market going forward. In particular, in line with the requirements of the Care Act, there will be an increased need for provision, including housing and housing-related services, which helps reduce, prevent and delay care and support needs and supports people to maintain their independence as much as possible.

The Better Care Fund (BCF) focuses on a transformational programme to build integration around care and support across health and social care. There are crossovers into housing and the BCF Plan approach, which includes the Disabled Facilities Grant (DFG), will be supported by the Housing Strategy and Pathway for Older People in terms of opportunities for greater choice and independence, which will result in reduced reliance, in later life, on health and social care services.

Working with individuals, communities and partners, our approach will encompass delivering the measures outlined in the strategy and pathway to manage demands for services. This supports a move away from a model of paternalistic care to an approach which promotes independence and manages risks with customers.

We have to use our limited resources to:

**The future of adult social care**  
planning a new journey together

- Help people take care of themselves better** by asking you what you need, then helping you make that happen (we won't do it for you, but we'll help you do it for yourself)
- Support communities and help them grow** so that they can support you better
- Change people's expectations** so that you can be realistic about what is available, who will provide it and how it will be paid for

 Herefordshire Council

### 3. The older population and housing aspirations

#### About Herefordshire

- Although the population aged 50-64 will only grow by 1.5% up to 2030, there is a rapidly growing older population aged 65+ (41%), and especially people 85+ (90% growth) over the same period – see Figure 1 below. The 2011 census shows growth lower than the 2001 census predicted, but still above the regional and national averages.
- More people with disabilities are living into older age; and the number of people with dementia is growing.
- 78.4% of pensioner householders are owner occupiers (72.8% in 2001).
- The average median house price in Herefordshire for the period January 2013 to June 2014 was £183,750.
- Herefordshire is a very rural county adding costs in terms of service delivery and increasing the risks and impacts on health and wellbeing caused by social isolation.
- 42% of 'vulnerable' households in Herefordshire are pensioners of which 25% comprise pensioner households living in non-decent housing. The Herefordshire Council Healthy Housing Report (2012) highlights the growth in older housing as a major issue in relation to future housing supply. It states that 17.1% of households are in non-decent homes because of fuel poverty and energy efficiency is a major factor in relation to affordability. In addition there are nearly 1000 householders who felt their illness had been caused by the condition of their home.
- There are 7 local housing market areas (HMAs) identified in Herefordshire – see Figure 2 below - and wide variations between these in terms of

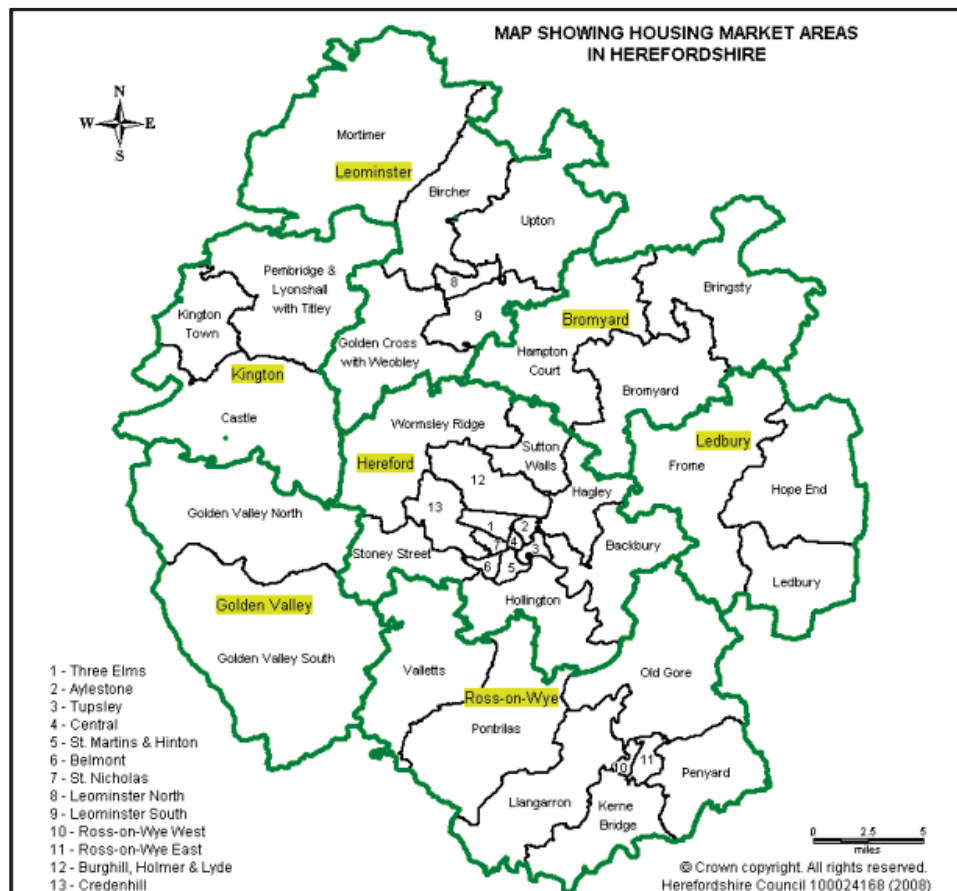
tenure, house price and rurality (see Appendix 3 for individual local HMA data). Understanding and responding to local housing need and demand specifically for each individual HMA is very important

Figure 1: Herefordshire County 65+ Population Projections 2014-2030

Age Group	Year of Projection				% Change 2014-2030
	2014	2020	2025	2030	
50-64	39,026	42,138	42,209	39,595	1.5
65-69	13,374	12,498	13,379	15,376	15.0
70-74	10,089	12,925	12,055	12,973	28.6
75-79	7,965	9,621	11,864	11,140	39.9
80-84	5,964	6,829	8,251	10,291	72.6
85-89	3,766	4,414	5,125	6,359	68.9
90+	2,147	2,917	3,775	4,858	126.3
<b>Total 50+</b>	<b>82,331</b>	<b>91,342</b>	<b>96,658</b>	<b>100,592</b>	<b>22.2</b>
<b>Total 65+</b>	<b>43,305</b>	<b>49,204</b>	<b>54,449</b>	<b>60,997</b>	<b>40.9</b>
<b>Total 75+</b>	<b>19842</b>	<b>23781</b>	<b>29015</b>	<b>32648</b>	<b>64.5</b>
<b>Total 85+</b>	<b>5,913</b>	<b>7,331</b>	<b>8,900</b>	<b>11,217</b>	<b>89.7</b>

Source: Herefordshire County Council Research Team, 2012 Hfds projections (Principal Projections A)

Figure 2: Wards within each Housing Market Area



Source:

Herefordshire Local Housing Market Assessment: 2012 Update Draft Report, January 2013

## What is the current housing situation of older people and what do they want in the future?

PFA and their research partners Arc4 carried out a major survey of households aged 50+ in the county in 2011. A sample of 12,268 households were contacted and 3,578 questionnaires were received, resulting in a very high response rate of 29.1%, and a very low sample error of +/-1.56%. Key findings included:

### Current home, tenure, and property and support needs

- Just over 80% were home owners, and of these over two-thirds (67.7%) were mortgage free and therefore had equity.
- Most people lived in 3 or 4 bedroom dwellings.
- 67% were under-occupying their property.
- 7.3% needed help to maintain their property.
- The main needs for support relate to: cleaning, gardening, decorating, shopping and low level maintenance; followed by personal care tasks such as getting in and out of the bath or shower,
- The main needs in relation to equipment and adaptations are for: adaptations to bathroom; grab rails (internal and external); improving access outside the home; stair-lift; and downstairs WC,
- Some older people needed more support in their local neighbourhood to engage in social activities or to address social isolation.
- Better information and advice was also identified as a key area for 21.6% of households in the survey.

### Staying or moving

- 73% want to stay in current home; most have lived there a long time.
- Up to 27% either intend to move in the next 5 years (12%) or are not sure of their moving intentions (15%).

Of the people who might want to move:

- Most want to move locally.
- The main reasons for wishing to move relate to the property itself or the location:
  - 44.9% - Need smaller property (current property difficult to manage).
  - 43.0% - Want smaller garden.
  - 31.2% - To be closer to facilities e.g. shops, doctors.
  - 19.1% - To be closer to family/friends to give or receive support.
  - 17.4% - To be closer to friends/family for social reasons.

- 79% were able to afford to purchase a new property outright or with a mortgage (the survey was undertaken during the housing market downturn). After the age of 80 the proportion of older households wishing to purchase reduces to 50%.

The tables below provide further data about older households who may wish to move home. Some of the tables break the data down by each of the 7 local HMAs. The figures for the Hereford HMA have been further split between Hereford City and its rural hinterland.

- The proportion of older households wishing to purchase varies between the local HMAs (see Figure 3 below)

Figure 3: Buying a property by HMA

Tenure preferences	HMA (%)								
	Bromyard	Golden Valley	Hereford	Hereford City	Kington	Ledbury	Leominster	Ross on Wye	Total
Buying a property outright or with a mortgage	59.0	92.7	77.9	77.0	83.5	80.3	79.4	80.2	78.8

- Figure 4 below shows that nearly 90% of people wanted a bungalow or a house. House type preferences varied between different HMAs

Figure 4: House type preferences by HMA

Property type would like	HMA (%)								
	Bromyard	Golden Valley	Hereford	Hereford City	Kington	Ledbury	Leominster	Ross on Wye	Total
House	40.9	47.4	36.8	29.6	52.5	49.3	37.5	31.2	37.8
Bungalow	50.0	47.4	47.4	51.9	41.0	36.2	48.6	61.0	49.7
Apartment (ground floor)	4.5	5.3	10.5	11.1	1.6	11.6	8.3	3.9	7.7
Apartment (above gr'd floor)	4.5	0.0	5.3	7.4	4.9	2.9	5.6	3.9	4.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

- Breaking down the total figures in the final column of Figure 4 by age cohort, Figure 5 below shows that house type preferences also changed as people got older, with fewer people wanting a house and more a bungalow or ground floor apartment

Figure 5: House type preference by age

Property type would like	Age Band (%)			
	50 to 64	65 to 79	80 and over	Total
House	51.5	28.8	4.9	37.8
Bungalow	41.7	57.7	58.0	49.7
Apartment (ground floor)	2.3	8.6	30.5	7.7
Apartment (above ground floor)	4.5	4.9	6.5	4.8
Total	100.0	100.0	100.0	100.0

- Figure 6 below shows that nearly half the people surveyed (47%) wanted a two bedroom dwelling, with the proportion increasing from 40% for people aged 50-64 to 60% for people aged 80+. Conversely, the proportion of older households wanting three bed properties reduces substantially as they get older from 45% for people aged 50-64 to only 7% for people aged 80+. The number of older households wanting one bedroom property remains very low (between 3 and 5%) up to the age of 80 and then increases to 24%.

Figure 6: No. of bedrooms preferred by age

Bedrooms would like	Age Band (%)			
	50 to 64	65 to 79	80 and over	Total
Studio/bedsit	0.0	1.3	4.0	0.9
One bedroom	3.3	5.3	24.1	6.3
Two bedrooms	40.4	51.6	64.4	47.3
Three bedrooms	45.5	37.0	7.5	38.2
More than three bedrooms	10.8	4.8	0.0	7.3
Total	100.0	100.0	100.0	100.0

- Figure 7 shows that there were also variations across the different HMAs in the size of dwelling older households wanted, with most households wanting 3 bedroom dwellings in Kington and most wanting two bedroom dwellings in the Hereford HMA

Figure 7: Size of dwelling by HMA

Bedrooms would like	HMA (%)								
	Bromyard	Golden Valley	Hereford	Hereford City	Kington	Ledbury	Leominster	Ross on Wye	Total
Studio/bedsit	0.0	0.0	0.0	0.0	0.0	1.4	2.8	1.3	0.9
One bedroom	13.3	3.4	0.0	7.4	1.6	7.2	8.3	6.6	6.3
Two bedrooms	44.4	44.8	63.2	55.6	36.1	33.3	40.3	50.0	47.3
Three bedrooms	35.6	46.6	26.3	37.0	55.7	43.5	38.9	34.2	38.2
More than three bedrooms	6.7	5.2	10.5	0.0	6.6	14.5	9.7	7.9	7.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Focus groups carried out with older people across Herefordshire reinforced some of the key messages from the household survey, including:

- The importance of domestic and maintenance services
- People are generally prepared to pay for services that they need and want if they are the right quality and price
- Preference for 2 bedroom bungalows if moving within the same neighbourhood, and the importance of maintaining contact with family and friends



## Summary

Most older people want to stay put but need better access to property and practical support services to be able to stay living independently in their own homes.

Over 25% of older households aged 50+ might want to move in the next 5 years (12%) or are not sure (15%). There are some 29,594 households aged 65+ in the county. If only 10% of them want to move in the next 5 years that equates to 2,959 households. If 25% want to move that means 7,399 older households. Either of these figures reflects that for a substantial proportion of the county's new homes, identified in the LHMA as being needed up to 2031, the demand will come from older people.

These figures highlight the potential of the older people's housing market if appropriate housing is developed to encourage older people to move home.

The survey also highlighted differences between different age cohorts of the older population in terms of:

- Tenure: nearly 80% of people in the survey were able to purchase a property outright or with a mortgage, with the proportion of those wishing to purchase reducing to 50% for people aged 80+.
- Number of bedrooms: highest demand for two bedroom properties across all age cohorts aged 50+; lessening demand for three bedroom properties amongst older households; and very low demand for one bedroom homes until households are aged 80+ and then only 24% of households in that age group.

The survey also highlights geographical differences between the 7 HMAs in terms of both:

- The proportion of older households wishing to purchase.
- House type preferences.

Both social housing and private developers will therefore need to take account of these age cohort and geographical differences when bringing forward proposals for new housing developments that reflect Herefordshire's ageing population.

General needs housing (including house types with larger rooms, bungalows and cottage type developments) need to all be two to three bedrooms.

Extra care type provision needs to be mostly two bedroom, given that only 24% of older people aged 80+ have indicated they would want a one bedroom property.

## 4. Developing the Housing Strategy and Pathway for Older People

The Housing Strategy and Pathway for older people has been developed to deliver on what older people say they want to meet their housing and related service needs to sustain quality of life and independent living in older age.

The strategy and pathway is based on providing older people with the information, housing and service options to put them in control of decisions about their future. Putting this into practice will also enable the Council and its partners to maintain essential health and social care services to those most in need.

There are 4 main stages to the Housing Strategy and Pathway for older people, which is set out in Figure 8 below. They are:

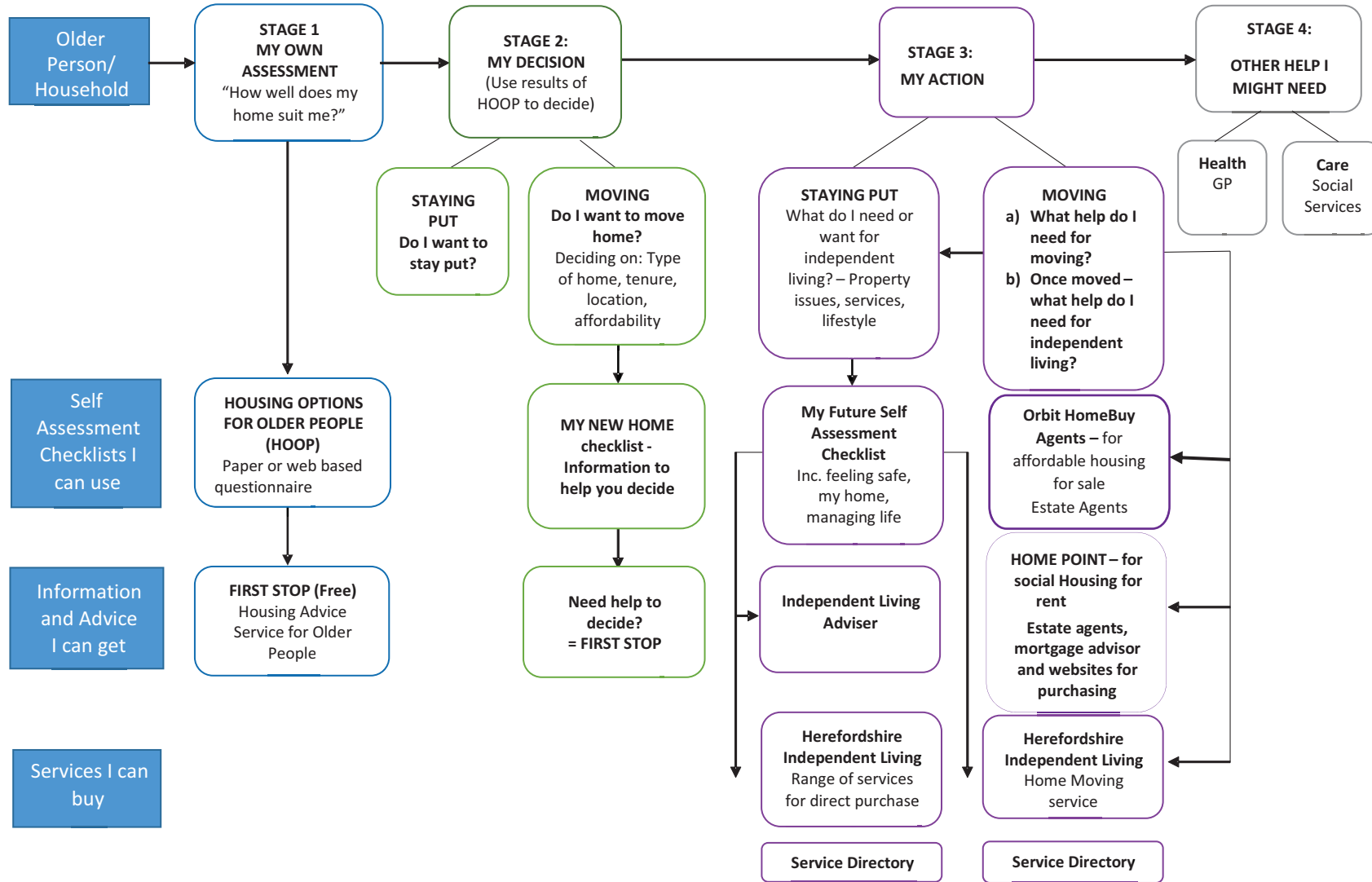
- Stage 1: assessing how well my home will suit me in older age.
- Stage 2: deciding on whether I want to stay or move.
- Stage 3: actions needed to put my decision into practice.
- Stage 4 other help I might need.

A more detailed pathway is provided in Appendix 1 that shows the pathway design in the context of understanding the 'fit' of different service responses and to help partner organisations understand where they may fit into the pathway.

[Figure 8: Housing and Independent Living for Older People Pathway](#)



**MY HOME, MY LIFESTYLE- Housing Independent Living in Older People Pathway**



57

## **5. Actions needed to turn the housing strategy and pathway into reality for older people**

The actions needed to turn the housing strategy and pathway into reality are divided into three areas, each of which is interdependent on the other two. They are:

- Information and advice to enable older people to make informed housing, service and support decisions in older age
- Developing the service offer to support independent living
- Developing the right housing mix to meet the housing need and demand of the ageing population

### **1. Setting up the information and advice services and self assessment tools for older people to make informed housing, service and support decisions in older age**

Herefordshire Council will work with a range of organisations to improve the information and advice available for older people to be able to make appropriate housing and service choices in older age. The actions will include:

- Promoting knowledge and use of First Stop, the national government funded independent, impartial and free advice service for older people, their families and carers about accommodation and services to sustain independence, choice and control in older age.
- Promoting the use of the First Stop HOOP (Housing Options for Older People) tool to assist older people decide about staying put or moving home in older age.
- Developing other self-assessment tools for older people, including my new Home checklist to support older people through the moving process; and My Future checklist to support independent living in older age.
- Working with local partners to link up First Stop with local information, advice and services.
- Developing and promoting an accessible database of current services, and housing schemes (across all tenures), for older people in each of the seven Housing market Areas and linking this to the First Stop national database.

### **2. Developing the service offer to support independent living**

Herefordshire Council will work with providers to ensure that a flexible and accessible range of services are available for older people to purchase to support their independence. These will complement services commissioned by the Council.

- First Contact alert and signposting service when going into an older person's home and spotting risk factors (e.g. cold home, slips and trips, no smoke detector).

- One-stop-shop Herefordshire Independent Living Services that older people can purchase for themselves in the market place (development funding from Herefordshire Council to pump prime with the aim of this becoming self-funding model). Services to include:
  - Community alarm/telecare access.
  - Property services: handyman, gardening, decorating, and other maintenance services.
  - Practical support: domestic services; bill paying; meals delivery.
  - Home moving service.
  - Social support: taking to the surgery, outings to the cinema, self-help befriending telephone networks to address social isolation.
  - Personal care.



Assistive Technology at Henffordd Gardens, Hereford

- Social support and befriending, using volunteer models such as telephone contact support.
- Link the development of the Independent Living model to the further development of services commissioned by Herefordshire Council and Health, which would also become key parts of the Independent Living approach:
  - Handyman and Staying Put services, linked to Aids and Adaptations services/DFGs.
  - Telecare to support people with long-term conditions and dementia, as well as preventing hospital admission and support post hospital discharge as part of reablement.
  - Access to breaks and other support for carers, including carers of people with dementia

### **3. Developing the right housing mix to meet the housing need and demand of the ageing population**

Herefordshire Council is looking to ensure going forward the right volume, tenure mix and types of general needs and specialist accommodation to meet the growing ageing population in the county. This relates to both existing and new housing.

Appendix 2 sets out definitions and terminology of older persons housing in Herefordshire.



Rose Gardens Extra Care, Hereford

## **New housing**

### How much housing is needed?

Herefordshire Council has undertaken further work to link the gap analysis carried out by PFA with other local factors in each of the 7 local HMAs (e.g. tenure mix; and rurality) to set out the types of general needs housing that are needed, as well as local targets for specialist housing.

(See Appendix 3 for key factors for each of the 7 local HMAs, such as tenure mix and house prices, and analysis by local HMA of targets for new specialist housing required up to 2030).

In addition the Local Development Framework (LDF) establishes housing targets for the strategic locations within Herefordshire with the result that there will inevitably be a need to moderate some targets to take account of the emerging LDF.

The overall key priorities for development are:

### ***General needs housing suitable for an ageing population***

There is a major shortage and lack of choice in the county of general needs housing suitable for older people that will encourage them to move from larger 3 and 4 bedroom family homes. The large scale older people's household survey (see section 3 of this strategy and pathway) highlighted the preference for older people of:

- Purchasing rather than renting (80% wish to purchase up to age 80 and 50% beyond that age). For general needs housing there should be an average mix of 80% sale/20% rent, depending on the local market.
- Minimum of two bedrooms (c.50%), with a significant proportion of three bedroom (c.40%) housing, depending on the local market, and with the preference being for 2 bedrooms as people get older – (see Figure 6 above and summary of research findings above on bedroom number preferences of older people).
- Dwelling types that are suitable for older people – see Figure 5 above: bungalows (50%) and houses (38%), with the preference growing for bungalows as people get older (58% of households aged 65+ want a bungalow). In particular Herefordshire Council is looking to see lifetime homes standard developments of:

- All housing is built to lifetime home standards (soon to be incorporated within building regulations), with room sizes that will attract older owners to move home.
- Bungalows.
- Cottages with at least one bedroom and accessible bathroom downstairs.
- Cohousing communities which are created and run by their residents. Each household has a self-contained, private home but residents come together to manage their community, support each other, share activities and eat together.

This is detailed further in Appendix 3, where the Council is specifically guiding developers to build a proportion of bungalows (or cottages which include a downstairs bedroom and bathroom) in their housing mix for new developments. Further guidance will be provided within an SPD.

### ***Specialist housing***

There is a major mismatch in the current supply of specialist housing against what is needed. Most existing retirement housing is for rent whereas most older households own their own homes and wish to continue to do so. There is a very limited amount of retirement housing for sale for older people to move to.

There is also a shortage of enhanced sheltered housing and extra care type housing across all tenures and specialist housing for people with dementia (see Appendix 2 for definitions).

A further factor is the rural nature of the county, where to achieve coverage across the villages as well as the larger market towns, small scale developments will be more appropriate to meet local needs than larger scale schemes.

There are already examples in Kington of care home providers developing 'Close Care' housing (housing in the grounds of a care/nursing home where care and other services can be accessed through the home) and for rural areas the Council would encourage small scale grouped developments of bungalows and cottages.

The table in Figure 9 below summarises the shortfall in specialist housing for Herefordshire as a whole, based on the gap analysis carried out. The figures exclude sheltered housing for rent as there is an over-supply of such housing in the county. The figures are net of, and therefore take account of, current supply. Appendix 3 breaks these figures down and provides more local shortfall targets for each of the seven local HMAs.

The gap analysis shows the shortfall of current supply of specialist accommodation for older people against the recommended levels from the (*SHOP*) *Strategic Housing for Older People Resource Pack* (ADASS, Housing LIN 2011) - see page 19 of Section A. This is the most commonly used model for benchmarking supply and the same model is also used in the *Housing in Later Life: planning ahead for specialist*

*housing for older people toolkit* (2012, NHF, Housing LIN, McCarthy & Stone, Contact Consulting, and Tetlow King).

The model sets out a series of “norms” for the levels of different specialist provision referencing them against the older population. The model is helpful as it looks across all tenures of specialist accommodation. In the past estimates have focused on specialist rented provision exclusively. The model therefore provides a way of looking across the specialist accommodation system and providing information for considering in what ways the volume and balance of specialist housing needs to change to meet future needs. The model is based on a suggested level of provision per 1000 of the population aged 75+. The total population aged 75+ in Herefordshire for the dates used in the gap analysis are set out earlier in Figure 1 of this report.

Figure 9: Projecting future additional specialist older people’s housing supply needed using the SHOP Toolkit model

Type of provision	Current supply (2011)	Suggested provision per 1000 of population 75+	Additional supply by 2020*	Further additional supply needed from 2020-2030*	Total additional supply by 2030
Housing based provision for dementia	30	6	+113	+53	+166
Extra care for rent	105	15	+252	+138	+390
Extra care for shared ownership and leasehold sale	92	30	+621	+267	+888
Enhanced sheltered housing for rent	0	10	+238	+88	+326
Enhanced sheltered housing for shared ownership and leasehold sale	0	10	+238	+88	+326
Sheltered for sale	534	120	+2320	+1064	+3384

\*additional supply figures are net of current supply (as at 2014) for all years

Further detail about the type of housing the Council is looking for is provided below:

#### Specialist retirement housing and extra care/assisted living/close care type housing

This housing should reflect the fact that it will generally attract an older age cohort than general needs housing. This housing should be:

- An average mix of two thirds (66%) leasehold sale and one third (33%) affordable (shared ownership/low cost market and rent), depending on the local market.
- An average of 75% two bedroom and 25% one bedroom, depending on the local market.
- Fully accessible housing where appropriate.
- Capable of supporting adults with long-term conditions or with physical or learning disabilities, or adults with mild to medium dementia, living into older age.
- Capable of acting as an alternative to residential care.

#### Housing models for people with dementia

There is a need for specialist housing models for people with dementia to provide greater choice in the market and reduce the number of people with dementia living in long-term care. This housing should be:

- Mainly for rent, because it is unlikely that many people with dementia will want the responsibility of owning their own home.
- Mainly one bedroom flats, but with a small proportion capable of housing couples where one person has dementia.
- The size of development will need to match local need in the area, but will need to balance having a domestic feel with achieving some economies of scale to achieve sustainability in terms of running costs.
- Models could include:
  - Specially designed wings/units in extra care schemes.
  - Group living schemes with units of 5-8 flats or en-suite rooms grouped together (perhaps round an enclosed courtyard) to achieve economies of scale.
  - Bungalows and apartments for couples linked to one of the above models.





Leadon Bank Extra Care, Ledbury

### **Existing sheltered housing for rent**

Although there is an over-supply currently of sheltered housing for rent in Herefordshire, the standard and therefore the sustainability varies considerably between different schemes. Challenges to be addressed to improve the overall quality of sheltered housing for rent in Herefordshire need to include:

- Agreeing a minimum accommodation sustainability standard for sheltered housing in the county.
- Retaining, and upgrading/re-modelling if needed, substandard schemes for rent where there is demand in the local market to make homes more suitable for the growing expectations of the ageing population. This might include providing lift access to upper floors, and conversion of bedsits into one bedroom flats with wider doorways and wet rooms.
- Decommission and re-build or change use (for example to extra care housing, or general housing depending on the wider housing market.) where either a suitable standard cannot be achieved or there is no longer local demand.
- Ensuring older people can access adaptations to stay at home.

## **6. Creating the right environment to make things happen**

Herefordshire Council is committed to ensuring that the Housing Strategy and Pathway is taken forward. To ensure this we will be proactive as an enabling authority to deliver on this strategy through:

- Market development: Promoting a market development approach.
- Partnership: Building an enabling partnership environment with a range of developers and providers built around trust and use of the respective skills of each organisation.
- Community Capacity: Encouraging the development of capacity and capability within Communities to support older people to live independently and avoid social isolation. Co-housing communities could provide suitable/sustainable models of housing with local support.
- Strengthening the Planning framework: Ensure that reference to the delivery of older persons housing pathway is within Supplementary Planning Document

- Internal co-ordination: Ensuring internal co-ordination within the council to support housing developers and service providers to achieve our joint goals of a wider housing and service choice for older people.
- Land and sites: The Council will engage with its partners across housing and health sectors to review opportunities for land and built assets, including Council owned land, where appropriate, to contribute towards delivering the strategy objective of developing the right housing mix to meet the housing need and demand of the ageing population’.

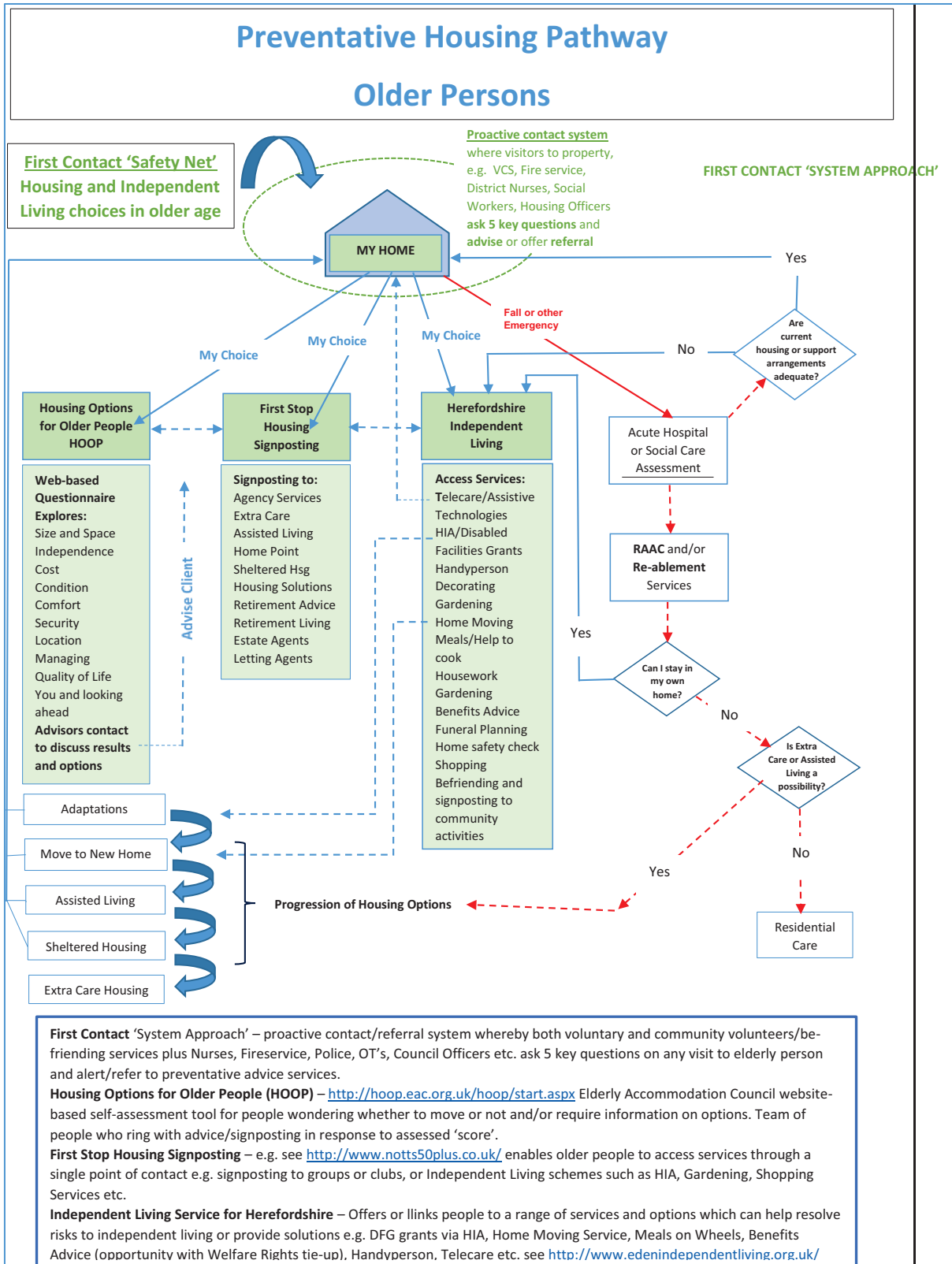
## 7. What outcomes will we achieve?

By delivering this strategy, together we will:

- Improve good quality information and advice to enable older people to make appropriate housing and service choices to support independence and quality of life in older age.
- Enable older people to plan ahead for ageing – not waiting till crisis point.
- Provide older households in the county with greater housing and tenure choice and proactively meet need and hidden demand.
- Ensure more older people live in property suitable to their needs.
- Reduce the use of long-term residential care (estimates by another shire county show that an extra care place saves the Council £5,800 compared with a placement in long-term residential care). 19% of older people receiving care at home go into institutional care compared to under 10% of those in extra care housing.
- Save the NHS around £75,000 per unit of supported housing (CLG estimate)
- Support more people with dementia in housing based settings.
- Make savings on health spend through prevention and early discharge of hospital stays. On average extra care residents spend less time in hospital.
- Reduce the level of falls through well designed level access accommodation – some 1 in 4 falls are from stairs, and the majority take place in the home. Falling is one of the main causes of hospitalisation in older and vulnerable people (international Longevity Centre UK (2008)
- Free up 3 and 4 bed housing for the wider housing market.
- Use public sector land more creatively.

Overall, investing in housing suitable for an ageing population and services to support independence in older age makes economic sense, supports people to plan for ageing better and enables more older people to live independently, where they choose with quality of life and dignity.

# Appendix 1: Housing Pathway



## Appendix 2: Older Person's Housing definitions and glossary

### Introduction

There are numerous interpretations of the terminology used to describe the various types of older person housing being offered either on the open market or through registered providers, and this plethora of often duplicating terms can act as an inhibitor to transparent partnership working and service delivery.

Therefore Herefordshire Council in this guidance note, have set out definitions of the terminology that it will use in its statutory roles as both a Local Planning Authority (LPA) and Strategic Housing Authority, and as a facilitator and commissioner of personal care, when describing older persons housing.

By setting out its understanding of these terms and definitions, the Council is not intending to prevent partner organisations using their own interpretations or meanings in the development, marketing and ongoing management of older persons housing schemes. However, the Council would ask that in all negotiations, partners are mindful of the Council's definitions set out below for the avoidance of any doubt or misunderstanding.

### Older Persons Housing: Definitions and Terminology

**Older Persons Housing** – is an umbrella term to describe any housing that has been purposefully designed and/or comprehensively remodelled to incorporate special features/adaptations to enable older people to live independently for as long as possible, aided by focused support and personal care being delivered from within their home if and as required. It can also cover general needs housing, within which older people live, with or without care and support, which is designed as accessible housing suitable to enable older people to age in place, sustain independence in older age, and reduce the likelihood of needing to move to specialist housing or a long-term care setting.

### Older Persons Housing falls into three broad groups

#### 1: Care based – this accommodation is always registered with the Care Quality Commission (CQC)

Care based accommodation is not in a legal sense 'housing', despite being in many cases the sole place of residence, as the occupancy is not secured through either ownership or a tenancy.

**Care Home** - a communal residential scheme where a number of older people live, usually in single en-suite rooms with access to shared facilities such as lounges, activity rooms, kitchenettes for snacks and often a garden area. Support staff are on call at all times to provide personal care services, and all meals are provided centrally. People may live in the service for short or long periods.

From the perspective of the CQC a care home is a place where personal care and accommodation are provided together, and both the care received and the premises are regulated by the CQC.

**Care Home with Nursing** – similar in almost all respects to a Care Home except that a qualified nurse will be on duty 24/7 to provide and/or supervise medical interventions which address more complex health/disability needs. Schemes can specialise in particular needs, for example dementia.

From the perspective of the CQC, as with a Care Home, both the care and the premises are regulated.

## **2: Housing with care/extra care – this type of accommodation may or may not be registered with the CQC**

**Assisted Living** - a term more frequently used to describe market provided specialist older person housing schemes (akin in many ways to Extra Care schemes) where personal care is either available on site and/or actively 'facilitated'. Assisted Living Schemes are usually offered either for leasehold purchase or market rent. Dependant on the format of the care and support offered, the Council will look to assess individual schemes against the criteria used to define supported living, sheltered housing, or extra care if there is genuine separation between the provision of the care and the accommodation. Only the care received is regulated by CQC, but the accommodation is not. However if the care is provided 'together with' the accommodation (as a condition of occupying the dwelling) then both need to be regulated as a care home or care home with nursing.

**Close Care** - is a relatively new concept where independent self-contained units are built within the grounds of a care home, and from which support, including personal care, can be provided. The individual close care units are offered on either tenancies or leaseholds. The range of support services and care offered by Close Care schemes varies very significantly between providers, therefore the Council will look to define individual schemes in terms of the actual services offered, and as such, they will be viewed as providing either sheltered housing, or extra care.

If there is genuine separation between the care and the accommodation, then only the care received is regulated by CQC. However if the care is provided 'together with' the accommodation (as a condition of occupying the dwelling) then both need to be regulated as a care home or care home with nursing.

**Enhanced Sheltered/Retirement Housing** – offers a greater range of facilities and support services than a sheltered scheme, but the offer falls short of the older person specific provisions found in Extra Care or assisted living.

**Very Sheltered/Retirement Housing (VSH)** – the Council considers this type of specialist older persons housing equal to, and/or equivalent in most instances, to the newer emerging Extra Care model, but recognises that some existing schemes are still referred to by this alternative term. As existing VSH schemes don't (generally) take tenants who have no care needs, the Council view them as less flexible than extra care in terms of offering long-term choice for older persons seeking specialist housing. If there is genuine separation between the care and the accommodation, the care received is regulated by CQC, but the accommodation is not.

**Extra Care** – is an evolved model of sheltered housing which has emerged in recent years in response to a growing older population whose life expectancy is increasing



and whose needs are becoming more complex, and can provide suitable accommodation for three main groups:

- People that have no care needs but have moved because they anticipate this might not be the case in the future and/or want to benefit from the general support offered by the scheme
- People that currently have low care needs, but with a recognition that these needs may grow in the future
- People with high or complex care needs, which can be met by the enhanced facilities of an Extra Care scheme as an alternative to full residential care, giving them greater independence.

Extra Care schemes comprise of self-contained one or two bedroomed units. Schemes may be for rent only, but increasingly offer a range of tenures including rent, shared ownership and leasehold sale. Schemes have flexible levels of on-site care and support services that are directed according to the personal needs of each individual resident. Residents also have access to communal facilities such as a lounge, TV room, hobby room and/or gardens. Larger schemes may also have hairdressers, a convenience store, activity room, shops, a library, restaurants and gyms on site. These facilities may be also shared with the local community, which helps to combat isolation and segregation for less mobile residents. There is onsite around the clock care and support, as well as the ability to provide meals.

If there is genuine separation between the care and the accommodation, the care received is regulated by CQC, but the accommodation is not.

**Specialist Housing models for people with dementia** - Some housing schemes additionally or exclusively are designed to be suitable for and to support people with a diagnosis of dementia. Models include: specially designed wings in extra care schemes; group living schemes with units of 5-8 flats or en-suite rooms, grouped together (perhaps around an enclosed courtyard) to achieve economies of scale; and bungalows and apartments for couples linked to one of the above or to a care home for people with dementia. Examples of the additional features over and above extra care housing, which the Council will expect to meet the needs of people with dementia include for example:

- Safe controlled internal and external areas, which actively support and promote recollection and aid independent movement whilst minimising risk of wandering.
- Telecare, including devices to monitor heat, movement and access in/out.

If there is genuine separation between the care and the accommodation, the care received is regulated by CQC, but the accommodation is not. However if the care is provided 'together with' the accommodation (as a condition of occupancy) then both need to be regulated.

**Supported living** - people remain within their own (existing) home and receive care and/or support in order to promote their independence. The support package is tailored to their individual needs. It aims to enable the person to be as autonomous and independent as possible, allowing them to remain active in their community.

Other than by adaptation, the property is not usually purpose built for the needs of older persons.

### 3: General Needs – there is no registration of these properties with the CQC

**Retirement Village / Retirement Community** – mostly used to describe private sector schemes, offering a range of housing types and tenures, with access to communal facilities, the level of available care and support varying between schemes. Some villages are very much housing focused. Others include housing with care/extra care type provision (see section 2 above), or care home/care home with nursing (see section 1 above) in addition to the housing provision.

**Sheltered/Retirement Housing** – gives older people a housing choice whereby they retain the independence of having their own self-contained accommodation, set within a controlled environment, with the security of having an alarm system and/or a scheme manager (formerly known as wardens). However on-site support is not available 24/7, and therefore they fall short of the level of provision found in Extra Care schemes. Schemes will usually have some communal facilities such as a lounge for residents to meet, a laundry and a garden. Schemes may be for rent, shared ownership or leasehold sale. Most sheltered accommodation can be classified as general needs housing as other than an age restriction on occupation, schemes tend not to feature a significant degree of older person specific adaptation.

**Virtual Extra Care** - a flexible model where in home care and community support is offered on a wider geographical basis. Access to Telecare is an important component in delivering this service, as is a hub arrangement (often in the form of a physical extra care scheme within the neighbourhood) from which carers can be called upon to give a 24/7 outreach cover. This is a more structured model than supported living and is intended to provide a network of support in a defined area through outreach, as opposed to the sporadic one off nature of supported living.

**Lifetime Homes Standards:** these are standards to make a property a home for life for a wide range of people including people with disabilities or older people. The standards (or features), commonly known as ‘Lifetime Homes Standards’, include flat thresholds, wider doorways, downstairs toilet (which has space to be adapted to take a low threshold shower), and stairway suitable to be able to take a stairlift. Some developers are also developing 2/3 bedroom house types specifically aimed at the older population, often with larger room sizes than family housing to encourage older households to downsize.

**Bungalows:** bungalows are single storey general needs housing which are designed to incorporate ‘Lifetime Homes’ features and whose purpose is designed to be suitable for older households.

**Cottages:** a variant on the bungalow, these are cottages with at least one bedroom and bathroom downstairs (and with a second, and possibly third bedroom upstairs). As with bungalows these are purpose designed to Lifetime Homes standards and to be suitable for older households.

## Social Care Glossary

*Note: This glossary does not seek to provide an exhaustive or definitively authoritative list of all the social care related terms, but is intended to highlight those most related to housing and older persons.*

**Care Quality Commission (CQC)** - is the independent regulator of health and social care services in England, charged with ensuring that essential standards of quality and safety are achieved within care homes and services provided in people's own homes, and elsewhere such as hospitals, dentists and transport services, whether they are provided by the NHS, local authorities, private companies or voluntary organisations. The functions they control are known as 'regulated activities' and providers of those activities need to be registered with the CQC.

**Domiciliary Care** – Is a regulated activity and covers services providing personal care for people living in their own homes. The needs of people using the services may vary greatly, but packages of care are designed to meet individual circumstances. The person is visited at various times of the day or, in some cases, care is provided over a full 24-hour period. Where care is provided intermittently throughout the day, the person lives independently, i.e. without continuous support or care between the visits.

**Provider** - There are several legal terms relating to the providers of services, such as Registered Person, Service Provider and Registered Manager. However in simple terms "provider" means anyone with a legal responsibility for ensuring the requirements of the law are met.

**Regulated Activities** – There are a number of regulated activities but for the purpose of this the two key ones relating to Older Persons housing are the provision of:

- Accommodation for persons who require nursing and/or personal care
- Personal care

Full details can be found on CQC website [www.cqc.org.uk](http://www.cqc.org.uk)

## General Glossary

*Note: This general glossary does not seek to provide an exhaustive or definitively authoritative list of all the housing related terms, but tries to cover those most frequently used by the Council.*

**Affordability** – A measurement of the overall costs, weighted to take into account lower quartile median local house prices and lower quartile median wages, needed to secure appropriate housing, whether through rent or purchase. The accepted benchmark to be considered as affordable is that the gross household income spent on housing should not exceed 33%.

**Affordable Housing** – The Council's published guidance states that affordable housing is provided at below market prices and allocated on the basis of need to people who live or work in Herefordshire or need to move to Herefordshire to receive/provide support, and who are unable to purchase or rent houses generally available on the open market without financial assistance, as their only home. It can be provided on Social Rented, Affordable Rented and Intermediate tenures. Affordable housing should include provisions to remain at an affordable price for future eligible households or for the subsidy to be recycled for alternative affordable housing provision.

**Affordable Rented** – has the same characteristics as Social Rented Housing, it is usually owned and managed by a Registered Provider, but is outside the National Rent Regime, and is subject to other rent controls that require it to be offered to eligible households at a rent of up to 80% of local market rents (including service charges, where applicable).

**Ancillary dwellings** (aka 'granny annexes') - are a sub-set of General Needs Housing, and usually take the form of self-contained units which are associated though either physical attachment or proximity to the principal residential unit. The limitation being that their occupants normally share a relationship with the main household. This type of accommodation can be particularly useful in allowing multi-generations of and/or extended family to live independently but in sufficiently close proximity to offer mutual care and support. Any residential unit let on a tenancy is not viewed as an ancillary dwelling.

**Best consideration** - This is usually thought of as the maximum amount of cash that can be realised by selling land or property. However, that consideration can also be the achievement of policy objectives, such as the delivery of affordable housing.

**Best Value** - A duty on local authorities to review the services they provide for local people and improve them by the best means available ensuring service quality and cost-effectiveness. This must be done in consultation with people who use the services and the wider community.

**Choice Based Lettings** – An allocation mechanism designed to give tenants (or prospective tenants) a degree of involvement in the choices made about where they might live. Eligible households are able to bid for specific properties that match their assessed needs.

**Code for Sustainable Homes** – The Code is a national standard against which the design and construction of new homes can be measured in terms of their environmental impact. The code is broken down into 6 levels, and affordable

housing schemes, which require Government subsidy via the HCA, must meet at least Code 3.

**Co-housing** – is a way of living, which brings individuals and families together in groups that share common aims while also enjoying their own self-contained accommodation and personal space. Despite international examples, to date there are no known older persons co-housing communities in the UK, however this can be expected to change over time.

**Concealed Households** - A concealed household (or emerging household) is anyone currently living within another household but wanting to move to their own accommodation and form a separate household, for example adult children living with their parents.

**COntinuous REcording of lettings (CORE)** - is a national information source funded by the Department for Communities and Local Government that records information about new lets and sales of affordable housing; it also records other data such as housing costs, affordability and household characteristics.

**Cross subsidy** - Profits from one part of a scheme (e.g. housing for market value sale) used to meet costs on another part (e.g. affordable housing).

**Decanting** - In certain cases, e.g. major adaptations such as extensions, it might be considered necessary for the tenant to be moved to temporary accommodation such as another dwelling, mobile home or caravan for the duration of the work.

**Decants** – properties held intentionally vacant, in order that they can be used to accommodate existing tenants, whose current properties are due for improvement, repair or other work.

**Decent Homes Standard** - A national standard set to ensure social housing is fit, has modern facilities, and is structurally sound and energy efficient.

**Design and Quality Standards** - means the requirements and recommendations for all new homes as defined by the Homes and Communities Agency ‘design and quality standards April 2007’.

**Disabled Facilities Grant (DFGs)** - are available for work that is needed to help a disabled person live more independently in their own home. DFGs are available to owners and tenants.

**Dwelling** – Since the 2001 census a dwelling is defined as a self-contained unit of accommodation. To be self-contained all the rooms used by the household (specifically core facilities such as a kitchen and bathroom) are behind a locked door beyond which only that household have free access. A dwelling can consist of one household space (self-contained) or more than one household space (shared).

**Economic Appraisal** - This is a key tool for achieving value for money (VFM) and satisfying public accountability requirements.

**Evidence Base** – a body of research and information that assists in the identification of issues and options, supports and informs the drafting and justification of policies and helps to facilitate the monitoring of implementation. The evidence base has to be updated periodically in order to remain effective.



**Freehold** – any land and/or building which is owned outright, whether or not there is a mortgage.

**General Needs Housing** – A general description, which covers any housing suitable for occupation by families, couples, and single people, including shared occupation. In most cases these properties can be adapted to suit the changing needs of their occupiers to allow them to remain independent, but older stock will be limited for example by door widths etc. General needs housing is provided by both the market and as affordable housing.

**Herefordshire Allocations Policy** – this is the Council's Policy for the allocation of Affordable Housing in its administrative area, which under the Housing Act 1996 as amended by the Homelessness Act 2002 and the Localism Act 2011, the Council has a duty to provide.

**Herefordshire Local Housing Allowance** - means the arrangements in effect now or at any time in the future to calculate housing benefit for people who rent from a private landlord

**Help to Buy** - A government-backed equity loan scheme available to first time buyers and home movers. The purchaser has to provide a 5% deposit; the government and house builder provide a 20% equity loan, which must be repaid when the house is sold; the purchaser obtains a mortgage of 75% of the purchase price. This scheme aims to overcome mortgage lenders' reluctance to lend when there is a loan to value ratio of greater than 75-80%.

**Homes and Communities Agency (HCA)** – is the Government's national housing and regeneration delivery agency for England. They provide investment to help deliver affordable housing and improve existing social housing, and they are the regulator of social housing providers in England.

**HomeBuy** -A government scheme to promote affordable home ownership through a suite of low cost home ownership options aimed at helping tenants in social housing and others in priority need to purchase their own home.

**Home Improvement Agency (HIA)** - provides support to occupiers to enable them to remain independent in their chosen home for the foreseeable future. Assistance may include instructing and supervising builders and providing advice on finding appropriate finance.

**Homelessness** - This covers a wide range of circumstances from being 'roofless' to being without a home of your own; many 'homeless' people are living with families or friends in temporary or inappropriate accommodation.

**Home Point** – is the agency, who on behalf of the Council, holds the common housing register and operates a Choice Based Lettings system, through which Affordable Housing in the County is advertised.

**Household** - A household comprises one person living alone, or a group of people (not necessarily related) living communally at the same address as their only or main place of residence.

**House in Multiple Occupation (HMO)** - is any housing which is occupied by more than one household who share (or lack self-contained) kitchen, bathroom or toilet facilities. If these facilities are for exclusive use but they are not self-contained within

the living accommodation, the property will still count as an HMO. A full definition can be found in the Housing Act 2004 (sections 254 to 259).

**Housing** - a general term which encompasses any building or part(s) of a building, constructed or adapted for human habitation, the form of which may take any number of configurations and design. Common names include bedsit(s), bungalow(s), flat(s), house(s), maisonettes or semi-detached (semi's), and includes caravans/mobile homes and boats where they are used as a main place of residence. For the avoidance of doubt when the term 'Housing' is used by the Council, it means reference to any self-contained dwelling, over which the tenant/owner has legal right of occupation

**Housing Associations** (see also Registered Providers) - are independent societies, bodies of trustees or companies established for the purpose of providing low-cost social housing for people in housing need on a non-profit-making basis, but where surpluses are reinvested by the organisation to maintain existing homes and to help finance new ones.

**Housing Market Area (HMA)** – Geographical expression referring to an area where common housing market conditions exist. Herefordshire Council has identified seven local housing market areas (HMAs) within the County, which are focused on the main settlements of Hereford City, Bromyard, Kington, Ledbury, Leominster and Ross on Wye along with the Golden Valley area.

**Housing Needs Survey** - This provides data on housing need within the County, and on a parish-by-parish basis demonstrates the level of affordable housing required by our local communities.

**Intermediate Housing** - is an umbrella term for a range of housing options available to help households on low to moderate incomes, and covers property for purchase and rent provided at a cost above social rent, but below market levels subject to the criteria in the Affordable Housing definition above. These can include homes for **Shared Ownership, Low Cost Market and Intermediate Rental**, but not affordable rented housing.

**Intermediate Housing Markets** - describes demand from households who have an income, but would struggle to afford to either rent or buy on the open market, but are ineligible for the allocation of affordable housing.

**Intermediate Rental** - Homes for rent provided at a cost above social rent, but below market levels. In Herefordshire, Intermediate Rents are set at 80% of the local housing allowance.

**Leasehold** - is a form of ownership; outright or with mortgage, which whilst giving a lawful right to occupy land or a building for a given length of time (often measured in decades or centuries) does not grant ownership of the freehold. Until the end of the lease period, the leaseholder has the right to remain in occupation, and they can sell their leasehold interest on the open market. In housing, this generally applies to flats or other forms of construction where there are common areas and facilities. The freeholder retains the responsibility for maintaining these common areas and services, the financial costs of which can be transferred to leaseholders in line with the terms of the original lease.

**Lease** - is a contract granting use or occupation of a property during a set period in exchange for a set rent.

**License** - license is a basic agreement giving someone permission to occupy a property, and does not afford the same security of tenure as a Tenancy.

**Lifetime Homes Standard** – is based on ‘Designing Lifetime Homes’ produced by the Joseph Rowntree Foundation, which is intended to ensure that any home is flexible, adaptable and accessible in response to the changing needs of occupants of housing throughout their lives

**Local Housing Allowance (LHA)** - is a flat rate allowance paid to households who are eligible for housing benefit, but who rent from a private landlords. The LHA is a flat rate allowance based on the size of the household, their ages and the area in which they live. Herefordshire Council use the rent levels set but LHA as benchmarks assesses the affordability of Intermediate Rental schemes.

**Low Cost Market:** Housing sold at a price lower than the open market value to eligible households in housing need who could not otherwise afford to purchase, as determined within the Technical Data supporting the Planning Obligations SPD (2008).

**Local Investment Plan (LIP)** – provides a strategic framework within which the organisations will work and invest together alongside key partners in the public and private sectors to deliver the key priorities in meeting the vision for Herefordshire for regeneration including transport, health, housing and education. The Herefordshire LIP has been developed in partnership with the Homes and Communities Agency.

**LSOA (Lower Layer Super Output Area)** – An ONS term given to a small area which is used for statistical analysis. LSOAs are made up of about 1,500 people, and there are 116 in Herefordshire. They nest into Herefordshire's current wards, and usually follow civil parish boundaries

**Market Housing - (also known as open market, the market)** – any housing to which the definition of affordable housing does not apply, of whatever tenure.

**Market Rent** – any housing rented at the going local rate, the upper limit of which is controlled only by what the local market forces will stand. There is no restriction on allocation except on a household's ability to pay rent.

**Market Value** - A formal valuation method set out in the RICS Red Book.

**Mixed Tenure** – describes schemes where there is a range of housing which is rented, part-owned, or purchased on leasehold.

**Mortgagee in Possession** – A clause which enables a Lender to sell a property without regard to local connection and or income restrictions should they need to repossess it.

**National Planning Policy Framework - March 2012 (NPPF)** – The government's condensed revision of almost all the previous existing government planning guidance in a single new guidance document. As far as housing is concerned, the key content of Planning Policy Statement 3 (PPS3) has been replicated in the NPPF.

**National Rent Regime** - generates “target rents”, with reference to local house prices and local earnings. The objective is for those target rents to be affordable for people in low paid employment or dependent entirely on state benefits.

**New Homes Bonus** – A cash incentive paid by central government to local planning authorities comprising matched funding of council tax raised on each new home for a six year period (based on national averages of council tax bands).

**Nomination Rights** - The ability of a local authority to nominate a household to be granted a tenancy.

**ONS** – The Office for National Statistics

**Owner occupation** – refers to any housing, occupied by the person(s) named on the freehold or leasehold, whether or not their interest is being bought with the aid of a mortgage

**Planning Obligations** – See Section 106 Agreement

**Planning Policy Statement 3 (PPS3:Housing)** - This document underpinned the delivery of the Government's strategic housing policy objectives and aimed to “ensure that everyone has the opportunity to live in a decent home, which they can afford in a community where they want to live”. This document was superseded by the NPPF in March 2012, but is still a useful reference.

**Private Housing (see also market housing)** is used to describe both owner-occupied dwellings and those privately rented, including properties where occupation is tied to the occupier's employment.

**Private Rented Sector (PRS)** – describes any housing, which is privately owned (not by a Registered Provider) and rented out, usually for profit. The PRS covers all forms of accommodation and varies in quantity and quality from place to place. The tenant will receive a tenancy agreement usually in the form of a 6 month assured shorthold tenancy.

**Procurement** - Public procurement is the process of the acquisition, usually by means of a contractual arrangement after public competition, of goods, services, works and other supplies by the public service.

**Registered Providers** - are government-funded not-for-profit organisations that provide affordable housing and are registered with the Homes and Communities Agency- the regulator. They include housing associations, trusts and co-operatives. They work with local authorities to provide homes for people meeting the affordable homes criteria. As well as developing land and building homes, they undertake a landlord function by maintaining properties and collecting rent. There are two types of RP's:

- Private Registered Provider - non-local authority organisation that provides affordable housing
- Public Registered Provider - A local authority that provides affordable housing

The differentiation between public and private relates to the fact that borrowing by local authorities counts as public sector borrowing, whereas that by Private Registered Providers does not.

**Registered Social Landlord (RSL)** - see Registered Provider.

**Rural Exception Sites** – Small sites, usually adjacent to rural settlements, on which open market housing development would not be permitted, that are developed solely for affordable housing. Development is subject to the support of the local parish or town council and with the active involvement of a Registered Provider.

**Section 106 Agreement** – A legal agreement made under Section 106 of the Town and Country Planning Act 1990. Such agreements represent a charge on the land for which planning permission is granted, which imposes obligations on both the current and any future owners of that land, and addresses matters that could not be dealt with through conditions on a planning permission. They are used amongst other things to control delivery of affordable housing. They are also referred to as Planning Obligations.

**Self-Contained Accommodation** - Any housing designed to allow a household exclusive use of bathroom and kitchen facilities in addition to living space. Some self-contained units, especially flats, may benefit from common services such as a central boiler for heating and/or hot water. It may be difficult, in some sheltered or supported housing, to draw the line between self-contained and communal accommodation. In these circumstances, it is necessary to take a view on the primary purpose behind the design. For example, if only rudimentary cooking facilities such as a hotplate are provided – on the assumption that residents' meals will be prepared elsewhere – then this is probably a non-self-contained bed space rather than a self-contained unit.

**Service charge** - Charges made to tenants or leaseholders, over and above their rent, to cover the cost of services associated with occupancy of their dwelling, for example, caretaking, cleaning, repairs and maintenance of communal areas. They can also cover concierge services, which in the case of older peoples housing takes the form of a Scheme Manger (formerly known as the Warden).

**Shared Housing** - Residential accommodation, other than self-contained accommodation, where there is a degree of sharing between individual tenants of some facilities e.g. kitchen, bathroom, living room.

**Shared Ownership** - Is a form of affordable housing which assist people into ownership where they cannot afford to buy outright on the open market, through part owning (up to 80% equity) with rent being paid to a Registered Provider for the remaining share. Shared ownership properties are held on a leasehold, but they can be resold. The discount is secured by a second charge (i.e. ranking after the mortgage lender's security) see also Mortgagee in Possession.

**Social Housing** – see Affordable Housing.

**Social Rented** – any affordable housing rented from a Registered Provider for which guideline target rents are determined in accordance with the National Rent Regime.

**Staircasing** - In the context of shared ownership, an option that is sometimes available to the lessees, which allows them to increase their overall stake of

ownership by purchasing additional equity from the Registered Provider, up to and including the balance, given them the freehold.

**Supported Housing** – Housing, usually occupied by a defined group, where varying degrees of support may be provided over and above that which would normally be provided in general needs housing.

**Temporary Accommodation** – Self-contained accommodation leased by the Council and provided for use by priority homeless applicants, as defined by legislation, on a temporary basis under licence or non-secure tenancy, until suitable alternative accommodation is secured. Leased by the Council from both Registered Providers and the open market.

**Tenancy agreement** - A tenancy agreement is a verbal or written contract entered into between a landlord and tenant. The tenant and the landlord both have rights and obligations for the duration of the tenancy.

**Tenant** - A tenant is a person who has the right to occupy land, building or property rented from the landlord, subject to the terms and conditions of a Tenancy agreement.

**Windfall Site** – A site not previously allocated for development or identified as part of the housing land supply for the area on which planning permission for an otherwise acceptable residential development may be acceptable for approval by the LPA.



## Appendix 3: Older Person's Housing Strategy Pathway - Needs and demand for additional older people's housing for each of the 7 local Herefordshire HMAs

### 1. Introduction

This Appendix provides guidance for social and private housing and care developers around the types and volumes of general needs and specialist housing for older people needed in each of the 7 local HMAs in Herefordshire.

It provides more local data for each of the 7 HMAs in Herefordshire, and takes account of the geographical differences between the local HMAs in order to provide a more local interpretation of future need and demand.

The need and demand figures are set within the overall context of the Herefordshire Older People's Housing Strategy and Pathway, which has highlighted:

- The projected high growth in the older population between 2014 and 2030 across the county – by an average of 41% for people aged 65+, 64.5% for people aged 75+, and 90% for people aged 85+. By contrast the 50-64 age group is only expected to grow by 1.5% during the same period. Population projections are not available at local HMA level.
- The Local Housing Market Assessment (LHMA) has identified the need for 16,500 new homes in the county by 2031, and that the growing population of retirement age households is a particular feature of Herefordshire where there is a strong retirement market.
- Older households will make up a substantial proportion of projected household growth over the next 20 years.
- Findings from the major 2011 survey of Households aged 50+ in Herefordshire, which identified that 12% of older households intend to move over the next 5 years and a further 15% are not sure of their moving intentions and might wish to move.
- Of the people who might want to move:
  - Most want to move locally, 45% find their property difficult to manage and need a smaller home, and 43% want a smaller garden.
  - 79% were able to purchase a home either outright or with a mortgage; though after the age of 80 the proportion of older households wishing to purchase reduces to 50%.
  - The dwelling types that older people want vary with age with over half the people aged 50-64 wanting a house, declining to 5% for people aged 80+; 41% of people aged 50-64 wanting a bungalow, with the proportion increasing to 58% for people aged 65+; and only 7% of people aged 50-64 wanting an apartment, rising to 13.5% for people aged 65-79 and 37% for people aged 80+ ( of whom 31% want a ground floor apartment).
  - The proportion of people wanting a three bedroom property reduces substantially as people get older, from 45% for people aged 50-64 to only 7% for people aged 80+. Most older (aged 65+) households want a two

bedroom property, and even for households aged 80+ only 24% want a one bedroom property.

Further background data on the 7 HMAs, and the county wide gap analysis of current supply against future demand is provided in the January 2015 updated data report, which takes account of the 2011 census findings, and which builds on the *Study of the Housing and Support Needs of Older People in Herefordshire* (Peter Fletcher Associates and Arc4 2012).

The future need and demand figures for the number of specialist housing units:

- Are net of current supply.
- Do not include retirement housing for rent as there is currently adequate or over supply in the county.
- Do not include accessible general needs housing for older people. However, given the rural nature of much of the county and the wish of most older households to move locally, what is identified as need for retirement housing for sale can also include (see text below for each of the 7 HMAs) accessible lifetime housing, or bungalows and cottages that are purpose designed to be suitable for older households as well, as traditional retirement housing schemes.

A map showing the seven housing market areas in Herefordshire is provided in Figure 1 below:

The seven housing market areas are:

1. Bromyard
2. Golden Valley
3. Hereford
4. Kington
5. Ledbury
6. Leominster
7. Ross-on-Wye

Figure 1: Wards within each Housing Market Area



Source: Herefordshire Local Housing Market Assessment: 2012 Update, November 2013

## 2. Analysis by the 7 local HMAs

### 2.1 Golden Valley Housing Market area summary

Housing Market Area	Summary
Golden Valley	<ul style="list-style-type: none"> <li>• 1,478 people aged 65+ in 2011.</li> <li>• 24.3% of the total population is aged 65+ (nearly the highest in the county), 2.9% is aged 85+.</li> <li>• An estimated 95 people aged 65+ have dementia in Golden Valley, the lowest amongst HMAs due to smaller population size.</li> <li>• 7.7% of the total population are limited 'a lot' by a long-term illness or disability. 11.2% are limited 'a little'.</li> <li>• A high proportion of pensioner households (81.3%) are owner-occupiers, whilst only 7.9% live in social-rented accommodation. 7.8% are living in private rented accommodation and 2.8% are living rent-free.</li> <li>• Overall average (median) property prices (Jan 2013 – June 2014) were £243,000, the highest amongst the HMAs. Detached properties sold for an average of £275,500 whilst semi-detached homes sold for £199,000, and terraced houses for £147,000. Only 1 flat was sold over the period, for £122,000.</li> <li>• Golden Valley does not contain any LSOAs that fall into the 25% most deprived in England for <u>income</u> deprivation amongst the 60+ population or barriers to housing.</li> <li>• Five of the ten LSOAs in the area are amongst the 25% most deprived in Herefordshire with respect to the <u>geographical</u> barriers to services (all ten are in the most deprived nationally). 'Black Mountains' and 'Arthur's Stone' are ranked 1st and 4th most deprived in Herefordshire in this respect (<a href="http://www.herefordshire.gov.uk">www.herefordshire.gov.uk</a>)</li> </ul>

#### Nature of the area and implications for future housing provision suitable for older people

Golden Valley is a very rural part of Herefordshire, which borders Wales to the south, the Kington HMA to the north and Hereford and Ross-on-Wye HMAs to the east. It has no market town as a centre of population, and the population is dispersed across the larger and smaller villages and hamlets. The LHMA states that the attractiveness of the area helps drive retirement moves.

Golden Valley has a high level of home ownership amongst pensioner households (81.3%), and the highest overall average (median) property price amongst HMAs at £243,000.

It is the smallest of the seven HMAs and houses under 4% of the older population in the county. In terms of future housing supply the rural nature of Golden Valley means that it is unlikely to be able to support large scale older people's schemes with communal facilities such as large scale retirement or extra care type housing.

It will be much more suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing
- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

Golden Valley has a high level of home ownership amongst pensioner households and the main need is housing for sale.

### **How much new specialist housing is needed**

#### By 2020:

- 106 units of retirement housing for sale
- 18 units of enhanced sheltered/retirement housing, mainly for sale
- 40 units of extra care housing/close care units, mainly for sale
- 5 units of specialist housing for people with dementia

#### By 2030 an additional:

- 39 units of retirement housing for sale
- 7 units of enhanced retirement housing for sale
- 15 units of extra care/close care units, mainly for sale
- 2 units of specialist housing for people with dementia

## 2.2 Bromyard Housing Market area summary

Housing Market Area	Summary
Bromyard	<ul style="list-style-type: none"> <li>• 2,780 people aged 65+ in 2011.</li> <li>• Has one of the highest proportions (24.4%) of the total population aged 65+, with 3.2% aged 85+.</li> <li>• An estimated 182 people aged 65+ have dementia in Bromyard, one of the lowest numbers amongst HMAs.</li> <li>• 9.1% of the total population are limited 'a lot' by a long-term illness or disability, the highest level amongst HMAs. 11.2% of the total population are limited 'a little'.</li> <li>• 77.8% of pensioner households are owner-occupiers, whereas 12.8% live in social-rented accommodation. 6.7% live in private rented accommodation and 2.2% are living rent-free.</li> <li>• Overall average (median) property prices (Jan 2013 – June 2014) were £210,000, one of the highest amongst the HMAs. Detached properties sold for an average of £265,000 whilst semis sold for £168,500, terraced houses for £147,750 and flats for £85,000.</li> <li>• Bromyard contains 1 LSOA that is amongst the 25% most deprived in England for income deprivation amongst the 60+ population. No areas of Bromyard rural are particularly deprived in a national context except in terms of geographical barriers to services and the indoor living environment.</li> </ul>

### Nature of the area and implications for future housing provision suitable for older people

The Bromyard HMA borders the Hereford HMA to the west, the Leominster HMA to the north, Ledbury HMA to the south and Worcestershire to the east. Bromyard is the local market town and centre of population (c.4500 people). It is the third smallest HMA and has less than 7% of the older population in the county. The LHMA states that the retirement market is not as strong as Ledbury or Ross-on-Wye.

Bromyard has a high level of home ownership amongst pensioner households (77.8%), and an overall average property price of £210,000.

In terms of future housing supply the rural nature of much of Bromyard means that it is unlikely to be able to support many large scale older people's schemes with communal facilities such as retirement or extra care type housing.

It will be much more suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a



second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing

- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

The main need is housing for sale.

### **How much new specialist housing is needed**

#### By 2020:

- 195 units of retirement housing for sale
- 32 units of enhanced sheltered/retirement housing, mainly for sale
- 73 units of extra care housing/close care units, mainly for sale
- 10 units of specialist housing for people with dementia

#### By 2030 an additional:

- 73 units of retirement housing for sale
- 12 units of enhanced sheltered/retirement housing, mainly for sale
- 28 units of extra care/close care units, mainly for sale
- 3 units of specialist housing for people with dementia

## 2.3 Hereford Housing Market area summary

Housing Market Area	Summary
Hereford	<ul style="list-style-type: none"> <li>• 15,094 people aged 65+ in 2011.</li> <li>• 18% of total population aged 65+ and 2.4% aged 85+ - both the lowest proportion amongst the HMAs.</li> <li>• An estimated 1,022 people aged 65+ have dementia in Hereford City – by far the highest due to the far greater population numbers in this HMA.</li> <li>• 8.4% of the total population are limited ‘a lot’ by a long-term illness or disability. 9.8% are limited ‘a little’, the lowest amongst HMAs.</li> <li>• 77% of pensioner households are owner-occupiers, one of the lowest rates amongst HMAs. 16% live in social-rented accommodation, the highest rate in the county. 4.4% of pensioner households are living in private rented accommodation whilst 2.2% live rent-free.</li> <li>• Overall average (median) property prices (Jan 2013 – June 2014) were £168,000, the lowest amongst HMAs. Detached properties sold for an average of £240,000 whilst semi-detached properties sold for £168,000, terraced properties for £138,000 and flats for £90,500.</li> <li>• South Hereford contains 6 LSOAs that are amongst the 25% most deprived in England for income deprivation affecting those aged 60+. North Hereford contains 1 LSOA.</li> <li>• 4 LSOAs in North Hereford are amongst the 25% most deprived in England for barriers to housing, whilst there are 2 LSOAs in South Hereford.</li> <li>• The entire Hereford Rural sub-locality area falls within the 25% most deprived nationally in terms of geographical barriers to services, although only ‘Hopsvally’, ‘The Slip’, ‘Rotherwas / Holme Lacy area’ and ‘Burghill’ LSOAs are deprived in the local context.</li> </ul>

### **Nature of the area and implications for future housing provision suitable for older people**

The Hereford HMA is in the centre of the county and is surrounded by all the other 6 HMAs. It is by far the largest HMA and houses around 40% of the older population in the county, although it has the lowest proportion of people aged 65 and over.

It has one of the lowest levels of home ownership amongst pensioner households (77%), and the lowest average property prices of all the seven HMAs at £168,000.

In terms of future housing supply, the urban nature of Hereford city means that this HMA will be able to support more larger scale older people’s schemes with communal facilities such as retirement or extra care type housing.

As with the other HMAs it will also be suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing
- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

The main need is a mixture of housing for sale and to rent. A proportion of housing for sale will need to be affordable shared ownership to meet the needs of older households with lower equity value homes who wish to continue owning their own homes.

### **How much new specialist housing is needed**

#### By 2020:

- 957 units of retirement housing for sale
- 188 units of enhanced sheltered/retirement housing, mainly for sale
- 331 units of extra care housing/close care units, mainly for sale
- 26 units of specialist housing for people with dementia

#### By 2030 an additional:

- 420 units of retirement housing for sale
- 69 units of enhanced sheltered/retirement housing, mainly for sale
- 160 units of extra care/close care units, mainly for sale
- 21 units of specialist housing for people with dementia

## 2.4 Kington Housing Market area summary

Housing Market Area	Summary
Kington	<ul style="list-style-type: none"> <li>• 2,392 people aged 65+ in 2011.</li> <li>• 25.3% of the total population is aged 65+, the highest proportion amongst HMAs. 3.1% are aged 85+.</li> <li>• An estimated 156 people aged 65+ have dementia in Kington.</li> <li>• 8.3% of the total population are limited 'a lot' by a long-term illness or disability. 11.5% are limited 'a little' – the highest proportion amongst HMAs.</li> <li>• 75.5% of pensioner households are owner-occupiers, the lowest rate amongst HMAs, whilst 12.3% live in social-rented accommodation. 7.8% of pensioner households are living in private rented accommodation and 3.6% are living rent-free.</li> <li>• The overall average (median) property price (Jan 2013 – June 2014) was £226,250, one of the highest amongst the HMAs. Detached properties sold for an average of £285,000 whilst semi-detached homes sold for £162,000, and terraced properties for £135,000. Only 1 flat was sold over the period, for £92,500.</li> <li>• Kington does not contain any LSOA that fall into the 25% most deprived for income deprivation and barriers to housing.</li> <li>• Kington has relatively little deprivation in terms of geographical barriers to services.</li> </ul>

### **Nature of the area and implications for future housing provision suitable for older people**

The Kington HMA borders the Hereford HMA to the east, the Leominster HMA to the north, the Golden Valley HMA to the south and Wales to the west. Kington is the local market town and centre of population (c.2626 people).

It is the second smallest HMA and has around 6% of the older population in the county.

Kington has the lowest level of home ownership amongst pensioner households (75.5%) yet one of the highest overall average property prices (£226,250).

In terms of future housing supply the rural nature of much of Kington means that it is unlikely to be able to support many large scale older people's schemes with communal facilities such as retirement or extra care type housing.

It will be much more suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing
- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

The main need is housing for sale, of which a small proportion will need to be affordable shared ownership to meet the needs of older households with lower equity value homes who wish to continue owning their own homes

### **How much new specialist housing is needed**

#### By 2020:

- 171 units of retirement housing for sale
- 29 units of enhanced sheltered/retirement housing, mainly for sale
- 42 units of extra care housing/close care units, mainly for sale
- 9 units of specialist housing for people with dementia

#### By 2030 an additional:

- 64 units of retirement housing for sale
- 11 units of enhanced sheltered/retirement housing, mainly for sale
- 24 units of extra care/close care units, mainly for sale
- 3 units of specialist housing for people with dementia

## 2.5 Ledbury Housing Market area summary

Housing Market Area	Summary
Ledbury	<ul style="list-style-type: none"> <li>• 4,542 people aged 65+ in 2011.</li> <li>• 24.3% of the total population is aged 65+ and 3.8% is aged 85+ - the highest proportion amongst HMAs.</li> <li>• An estimated 310 people aged 65+ have dementia in Ledbury.</li> <li>• 7.7% of the total population is limited 'a lot' by a long-term illness or disability, 10.3% is limited 'a little'.</li> <li>• 78.8% of pensioner households are owner-occupiers, whilst 11.1% live in social rented accommodation. 7.4% of pensioner households live in private rented accommodation and 1.7% are living rent-free.</li> <li>• Overall average (median) property price (Jan 2013 – June 2014) was £207,500. Detached properties sold for an average of £289,000 whilst semi-detached homes sold for £175,000, terraced properties for £162,500 and flats for £95,000.</li> <li>• Ledbury contains 1 LSOA that is amongst the 25% most deprived in England for barriers to housing.</li> <li>• The 'Trumpet', 'Greater Bosbury' 'The Slip' and 'Hopsvalley' LSOAs (Ledbury Rural sub-locality) are all in the 25% most deprived in Herefordshire in terms of geographical barriers to services (all areas are in the 10% most deprived nationally). 'Trumpet' and 'Hopsvalley' are most deprived (10% most deprived in the county).</li> </ul>

### **Nature of the area and implications for future housing provision suitable for older people**

The Ledbury HMA borders the Hereford HMA to the west, the Bromyard HMA to the north, the Ross-on-Wye HMA to the south and Worcestershire to the east. Ledbury is the local market town and centre of population (c.9900 people).

It is the fourth largest HMA and nearly 12% of the older population in the county live in it. The LHMA states that the retirement market is a particular feature of this LHMA.

Ledbury has a relatively high level of owner-occupation amongst pensioner households (78.8%) alongside mid-range overall average property prices (£207,500).

In terms of future housing supply the rural nature of much of the Ledbury HMA means that it is unlikely to be able to support many large scale older people's schemes with communal facilities such as retirement or extra care type housing. However, the area does have the highest proportion of people aged 85+ and this



combined with the higher rate of dementia within this age group, suggests a need for such accommodation in Ledbury itself.

It will be also be suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing
- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

The main housing need is for sale, with a need for a small proportion for sale being affordable shared ownership to meet the needs of older households with lower equity value homes who wish to continue owning their own homes.

### **How much new specialist housing is needed**

#### By 2020:

- 209 units of retirement housing, mainly for sale
- 56 units of enhanced sheltered/retirement housing, an even mix of rent and sale
- 72 units of extra care housing/close care units, an even mix of rent and sale  
17 units of specialist housing for people with dementia

#### By 2030 an additional:

- 125 units of retirement housing, mainly for sale
- 21 units of enhanced sheltered/retirement housing, an even mix of rent and sale
- 48 units of extra care/close care units, an even mix of rent and sale
- 6 units of specialist housing for people with dementia

## 2.6 Leominster Housing Market area summary

Housing Market Area	Summary
Leominster	<ul style="list-style-type: none"> <li>• 5,590 people aged 65+ in 2011.</li> <li>• 23.8% of the total population is aged 65+ whilst 3.3% is aged 85+.</li> <li>• An estimated 373 people aged 65+ in Leominster have dementia.</li> <li>• 9% of the total population are limited 'a lot' by a long-term illness or disability, whilst 11.1% are limited 'a little'.</li> <li>• 79.5% of pensioner households are owner-occupiers, a relatively high rate amongst HMAs. 10.1% live in social-rented accommodation, whilst 7.5% are living in private rented homes and 2.4% are living rent-free.</li> <li>• Overall average (median) property price (Jan 2013 – June 2014) was £182,500, one of the lowest amongst the HMAs. Detached properties sold for an average of £245,000 whilst semis sold for £159,500, terraced properties for £130,000 and flats for £81,500.</li> <li>• Leominster contains 2 LSOAs that are amongst the 25% most deprived in England for 60+ income deprivation.</li> <li>• Within the Leominster Rural sub-locality, all but 'Berrington' are in the 25% most deprived in Herefordshire in terms of geographical barriers to services (all are in the 10% most deprived in England). 'Greater Docklow' and 'Hopebodenham'* are the most deprived being in the 10% most deprived in Herefordshire. (* Some LSOA's comprise district areas of more than one Parish therefore labels may be a combination of two names).</li> </ul>

### **Nature of the area and implications for future housing provision suitable for older people**

The Leominster HMA borders Wales to the west, Shropshire to the north, the Bromyard HMA to the east and the Kington and Hereford HMAs the south. Leominster is the local market town and centre of population (c.11,700 people) and is the largest of the five market towns surrounding Hereford city.

It is the third largest HMA and has over 14% of the older population in the county, but one of the lowest proportions of the older population in the county.

Leominster has a relatively high level of home ownership amongst pensioner households (79.5%), but one of the lowest overall average property prices (£182,500).

In terms of future housing supply the rural nature of much of the Leominster HMA means that larger scale older people's schemes with communal facilities such as retirement or extra care type housing should be located in Leominster itself.

Outside Leominster it will be much more suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing
- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

The main housing need is for sale. However, a proportion of the housing for sale will need to be affordable shared ownership to meet the needs of older households with lower equity value homes who wish to continue owning their own homes.

### **How much new specialist housing is needed**

#### By 2020:

- 322 units of retirement housing, mainly for sale
- 68 units of enhanced sheltered/retirement housing, an even mix of rent and sale
- 124 units of extra care housing/close care units, an even mix of rent and sale  
20 units of specialist housing for people with dementia

#### By 2030 an additional:

- 153 units of retirement housing, mainly for sale
- 25 units of enhanced sheltered/retirement housing, an even mix of rent and sale
- 58 units of extra care/close care units, an even mix of rent and sale
- 8 units of specialist housing for people with dementia

## 2.7 Ross on Wye Housing Market area summary

Housing Market Area	Summary
Ross on Wye	<ul style="list-style-type: none"> <li>• 7,140 people aged 65+ in 2011.</li> <li>• 23.4% of the total population is aged 65+, and 3.2% are aged 85+.</li> <li>• An estimated 469 people aged 65+ have dementia in Ross on Wye.</li> <li>• 8.1% of the total population are limited 'a lot' by a long-term illness or disability, 10.6% are limited 'a little'.</li> <li>• A high proportion of pensioner households (80.8%) are owner-occupiers whilst 9.6% are living in social-rented accommodation. 6.3% are living in private rented accommodation and 2.7% are living rent-free.</li> <li>• The overall average (median) property price (Jan 2013 – June 2014) was £225,000, one of the highest amongst the HMAs. Detached properties sold for an average of £280,000 semis sold for £179,500, terraced properties for £145,000, and flats for £106,750.</li> <li>• Ross on Wye contains 1 LSOA that is amongst the 25% most deprived in England for income deprivation affecting people aged 60+.</li> <li>• Ross has relatively good access to services and residents are amongst the least likely to find it difficult to access a range of services.</li> </ul>

### **Nature of the area and implications for future housing provision suitable for older people**

The Ross-on-Wye HMA borders the Hereford HMA to the north, the Golden Valley HMA to the west, Wales to the south, the Ledbury HMA to the north-east and Gloucestershire to the east. Ross-on-Wye is the main market town and centre of population (c.10,600 people). The LHMA states that the retirement market is more pronounced in this area than other parts of the county and that there is good sales demand.

It is the second largest HMA and nearly 18% of the older population in the county live in it. Ross-on-Wye has one of the highest levels of home ownership amongst pensioner households (80.8%), and one of the highest average property prices in the county (£225,000).

In terms of future housing supply the Ross-on-Wye HMA will be able to support a mix of small and larger scale older people's schemes with communal facilities such as sheltered or extra care type housing.

It will also be suited to developments of:

- Small scale developments of lifetime homes standard two bedroom bungalows and/or cottages (one bedroom and bathroom downstairs and a second bedroom and bathroom upstairs), either grouped together in small estates (5-20 units) as older people's housing, or interspersed into general needs estates with family housing
- The same types of bungalow or cottage type housing in the grounds of care homes which have spare land – close care housing
- Accessible 2-3 bedroom lifetime homes standards general needs housing, which will be suitable for older people as they age, or for families of all ages and which might include a disabled person or child living in the households

The main need is housing for sale and a proportion of the housing for sale will need to be affordable shared ownership to meet the needs of older households with lower equity value homes who wish to continue owning their own homes.

### **How much new specialist housing is needed**

#### By 2020:

- 360 units of retirement housing for sale
- 85 units of enhanced sheltered/retirement housing, mainly for sale
- 191 units of extra care housing/close care units, mainly for sale  
26 units of specialist housing for people with dementia

#### By 2030 an additional:

- 190 units of retirement housing for sale
- 31 units of enhanced sheltered/retirement housing, mainly for sale
- 72 units of extra care/close care units, mainly for sale
- 10 units of specialist housing for people with dementia



<b>MEETING:</b>	<b>Cabinet</b>
<b>MEETING DATE:</b>	<b>19 March 2015</b>
<b>TITLE OF REPORT:</b>	<b>Staying Put Strategy</b>
<b>REPORT BY:</b>	<b>Head of looked after children</b>

## Classification

Open

## Key Decision

This is not a key decision

## Wards Affected

Countywide

## Purpose

To approve the staying put policy and procedures.

## Recommendation(s)

**THAT:**

- (a) **the Staying Put policy and procedures at Appendix A and B are approved and implemented with immediate effect.**

## Alternative options

1. To continue working as we are, whereby young people can remain with foster carers, but this would be under a supported lodging arrangement and does not meet the needs of young people who go into employment at 18. This option would result in Herefordshire Council not being compliant with objectives set out under the Children Act 1989 and the Children (Leaving Care) Act 2000.

## Reasons for recommendations

2. The staying put strategy meets objectives within the Children Act 1989 and the Children (Leaving Care) Act 2000 to improve the life chances of young people in and leaving local authority care.

---

Further information on the subject of this report is available from  
Joanna King – head of looked after children 4 November 2014



## Key considerations

3. The staying put strategy will aim to build on and improve the existing arrangements for young people in foster care to remain with their carers after the age of 18.
4. The aim is for young people to remain with their former foster carers until they reach 21 years of age, or for a substantial period beyond their 18th birthday. The council's current criteria to be able to remain in supported lodgings with former foster carers after the age of 18 requires a young person to be engaged in, or actively seeking to be engaged in education or training or exempt from doing so as a consequence of ill health. The Staying Put Strategy will help to meet the needs of those that do not meet these criteria e.g. those in employment. This approach is conducive to the stability of the placement, and consistent with wanting the young person to achieve economic wellbeing by offering the young person continuity of support to improve their life chances.
5. The Staying Put Strategy promotes the Act's main aims, which are:
  - To delay young people's discharge from care until they are ready and prepared;
  - To improve the assessment, preparation and planning for leaving care;
  - To provide better personal support for young people after leaving care;
  - To improve the financial arrangements for care leavers.

This project also fits within the Public Service Agreement 2 National Indicators 147 and 148, which identify whether:

  - The young person is living in suitable accommodation;
  - The young person is in education, training or employment.
6. The strategy supports the council's care leavers' strategy and in particular gives young people who are in stable, supportive placements the opportunity to pursue education, training and employment in order to participate both socially and economically as citizens, without the disruption of having to move into 'independence' during this critical period of their lives.
7. Both the green paper "Care Matters - Transforming the Lives of Children in Care" and the white paper "Care Matters - Time for Change" refer to the importance for young people of 'entering adult life at the right time'. To remain with foster carers beyond 18 is identified as an area for development.
8. Many young people who have been looked after by the local authority experience a compressed transition from childhood to adulthood (Professor Mike Stein - University of York), and the option to 'stay put' seeks to protract and normalise the young person's experience of moving into adulthood. The staying put ethos supports the council's aspiration to be a good corporate parent to all young people to whom it has acted as a substitute family.
9. The project also provides a framework to allow care leavers at university to return to their former carers during vacation time, and young people who commence basic training with the armed services to return to their carers during breaks, reflecting the ongoing support which would be available to young people living in supportive families.

10. Staying put can also contribute to 'decreasing' the role of the personal advisors who work with these young people, by taking into account the relationship and support provided by the former foster carer to the young person, enabling the personal adviser to work with other care leavers who may be living independently with less support and in more disadvantaged circumstances.
11. Staying put will offer carers improved training opportunities and prepare them to support teenagers into adulthood in a planned and individual way. The training offered will complement the induction standards for children's workforce training requirements for foster carers. The investment and commitment of foster carers is acknowledged through better levels of remuneration and support and increases the retention of foster carers who find their task rewarding and fulfilling.
12. The staying put Strategy reflects the government's determination to improve the experiences of children in care, to challenge the poor outcomes historically experienced and to reduce the gap between the quality of life of young people in the care of the local authority and those raised in supportive families.

## **Community impact**

13. A means of measuring outcome achieved through families first. The families first cost calculator can be used to ascertain reduction in spend as a result of young people remaining in care until they are 21.
14. Reduction in young people becoming homeless.
15. Young people are better prepared to move into independence.
16. Young people are supported to remain in education, employment and training which therefore impacts on those accessing the benefits system.
17. Retaining contact with young people via foster carers is an opportunity to link them with apprenticeship opportunities within the council and the concept of the 'family firm'.
18. At this time we are unable to ascertain the financial impact on partners in DWP, housing, health and education of the staying put strategy. Whilst we can forecast the number of Herefordshire young people remaining in placement there is no duty for other local authorities to notify the host local authority that a young person is staying put?

## **Equality and human rights**

19. The Public Sector Equality Duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrates that we paying "due regard" to our decision making in the design of policies and in the delivery of services of which we have in proposing the Staying Put project.
20. The Equality Duty 2010 has 3 aims (general duty)
  - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the act;

- Advance equality of opportunity between people who share a protected characteristic and those who do not; and
- Foster good relations between people who share a protected characteristic and those that who do not.

## Financial implications

21. The financial implications of the Staying Put Strategy will be that Herefordshire Council will be responsible for ongoing placement costs from 18- 21 years of age.
22. The costs for 2014/15 of staying put arrangements are included within the budget, at £70k. For 2015-16 the full year cost of those currently in staying put arrangements plus the additional arrangements required will be £142k. Those residing in a staying put arrangement qualify for housing benefit reducing the staying put cost by £37k to £105k.

Staying Put Costs	2014-15		2015-16	
	Numbers	£000's	Numbers	£000's
<b>Current Arrangements:</b>				
Internal	5	47	5	71
External	1	23	1	38
<b>Total Current</b>	<b>6</b>	<b>70</b>	<b>6</b>	<b>109</b>
Additional for 15-16			2	33
<b>Total payments</b>			<b>8</b>	<b>142</b>
Housing Benefit Contribution				37
<b>Total for 2015-16</b>			<b>8</b>	<b>105</b>

23. There are 8 staying put arrangements currently in place for 2015/16. This is subject to change. The cohort of 16+ in foster placements is monitored to identify future requests for staying put arrangements and the associated costs.
24. For those young people who are in employment and remaining with carers a £50.00 per week contribution will be made towards the placement.

## Legal implication

25. From the age of eighteen young people are no longer legally 'in care' or 'looked after' and therefore fostering arrangements and legislation relating to children placed with foster carers no longer applies. In circumstances where a young person remains with their former foster carer/s after their eighteenth birthday, the arrangement should therefore be arranged under the Staying Put Strategy.
26. Following a young person's eighteenth birthday, the legal basis on which they occupy the property (former foster care home) changes and they become an 'excluded licensee' who is effectively lodging in the "Staying Put" carer/s home.

## Risk management

27. Financial pressure of ongoing placement provision until the age of 18. At the point of data being collected from each local authority, Herefordshire Council had a

---

Further information on the subject of this report is available from  
Joanna King – head of looked after children 4 November 2014

small number of looked after children between the age of 16 and 18 years of age resulting in the council only receiving £13,000 from the government to support the project. We are appealing this decision. The cost of these arrangements will have to come from the specialist lodgings budget which also covers supported lodging arrangements and young people aged 16+ in residential placements.

28. There will a reduction in foster carer capacity. Based on the current cohort of young people turning 18 in 2015/16 8 young people could choose to remain with their carers. Herefordshire Council has reviewed the recruitment strategy and sufficiency strategy and within the care placement strategy will be looking to increase the number of fostering households approved each year by 14 and adolescent carers / Supported Lodging Providers by 4 year on year. Because the young person will no longer be classed as looked after a carer can choose to still foster up to 3 children and the young person previously looked after will become a member of the fostering household and subject to safeguard checks.

## **Consultees**

29. The care ambassador, 16+, fostering, Safeguarding and Family Support Senior Management Team, Director for Children's Wellbeing and Cabinet Member for Children's Services have been consulted and their comments have been incorporated within the policy and procedures.
30. Some young people have stated that the day before their 18<sup>th</sup> birthday is an anxious time, as they do not feel ready to move on. When parents have their own children the door is always open to them and staying put is an extension of the corporate parenting role.

## **Appendices**

Appendix A Staying Put Policy.

Appendix B Staying Put Procedure.

## **Background papers**

- None identified.



# Staying Put Policy

## 1. Introduction

The Staying Put Project will aim to build on and improve the existing arrangements for young people in foster care to remain with their carers after the age of 18.

The aim is for young people to remain with their former foster carers until they reach 21 years of age (or for a substantial period beyond their 18th birthday HC current criteria to remain in supported lodgings with former foster carers after the age of 18 required a young person to be engaged in, or actively seeking to be engaged in ETE, or exempt from doing so as a consequence of ill health. Young people Staying Put will also meet this criteria. This is conducive to the stability of the placement, and consistent with wanting the young person to achieve economic well-being by offering the young person continuity of support to improve their life chances.

## 2. Aims

The key aims are:

- Enable young people to build on and nurture their attachments to their carers, so that they can move to independence at their own pace and be supported to make the transition to adulthood in a more gradual way just like the other young people who can rely on their own families for this support;
- Provide the stability and support necessary for young people to achieve in education, training and employment; and
- Give weight to young people's views about the timing of moves to greater independence from their final care placement.

## 3. Objectives

The Staying Put Project meets objectives within the Children Act 1989 and the Children (Leaving Care) Act 2000 to improve the life chances of young people in and leaving local authority care. The guidance of Children (Leaving Care) Act recommends converting foster placements at 18 into supported lodgings. The Staying Put arrangement promotes the Acts main aims to young people, which are:

- To delay young people's discharge from care until they are ready and prepared;
- To improve the assessment, preparation and planning for leaving care;
- To provide better personal support for young people after leaving care;
- To improve the financial arrangements for care leavers.



This project also fits within the Public Service Agreement 2 National Indicators 147 and 148, which identify whether:

- The young person is living in suitable accommodation;
- The young person is in Education Training or Employment.

***Staying Put supports HC's Children and Young People's Plan*** and in particular gives young people who are in stable, supportive placements the opportunity to pursue education, training and employment in order to participate both socially and economically as citizens, without the disruption of having to move into 'independence' during this critical period of their lives.

Both The Green Paper "Care Matters - Transforming the Lives of Children in Care" and the White Paper "Care Matters - Time for Change" refer to the importance for young people of 'entering adult life at the right time'. To remain with foster carers beyond 18 is identified as an area for development.

Many young people who have been looked after by the local authority experience a compressed transition from childhood to adulthood (Professor Mike Stein - University of York), and the option to Stay Put seeks to protract and normalise the young person's experience of moving into adulthood. Staying Put fits within HC's aspiration to be a good corporate parent to all young people to whom it has acted as a substitute family.

The project also provides a framework to allow care leavers at university to return to their former carers during vacation time, and young people who commence basic training with the armed services to return to their carers during breaks, reflecting the ongoing support which would be available to young people living in supportive families.

Staying Put can also contribute to 'decreasing' the role of the Personal Adviser with these young people, by taking into account the relationship and support provided by the former foster carer to the young person, enabling the Personal Adviser to work with other Care Leavers who may be living independently with less support and in more disadvantaged circumstances.

Staying Put will offer carers improved training opportunities and prepare them to support teenagers into adulthood in a planned and individual way. The training offered will complement the Induction Standards for Children's Workforce training requirements for foster carers. The investment and commitment of the foster carers is acknowledged through better levels of remuneration and support, increasing the retention of foster carers who find their task rewarding and fulfilling.

The Staying Put Project reflects the Government's determination to improve the experiences of children in care, to challenge the poor outcomes historically experienced by young people in care, and to reduce the gap between the quality of life of young people in the care of the local authority and those raised in supportive families.

End

# Staying Put Procedures

## 1. Entitlement to Stay Put

In Herefordshire a young person is entitled to Stay Put in their foster placement if on reaching 18 years of age they are engaged in Education, Training or Employment (ETE).

Exceptionally a young person, who is not engaged in ETE but is actively seeking to be engaged, may Stay Put. Young people not in ETE have a 3 month window of opportunity to secure their engagement in ETE. After the 3 months of not being engaged in ETE has elapsed the opportunity to Stay Put maybe extended for a further 3 months through a process of referral to the Head of Looked After Children (LAC). The Head of LAC may only extend the opportunity to Stay Put for a further maximum period of 3 months in order to provide the young person with the support and stability to become engaged in ETE.

After a 6 month consecutive period of not being engaged in ETE the young person will be helped to move on from their Staying Put arrangement within 28 days.

If those opportunities for education, training or employment are not available then consideration will be given to extend the placement beyond six months. However, the young person should be actively encouraged to involve themselves in community activities, voluntary work or a self improvement course.

Young people in foster placements who are assessed as not being able to live independently at 21 years of age will be assisted by their Social Worker, to identify alternative choices/options by their 18th birthday.

## 2, Establishing a Staying Put Arrangement

The option of Staying Put should be identified within the young person's Care Planning/Pathway Planning process no less than 6 months before their 18th birthday. The 16+ advisor should inform the 16+ Team Manager if a Staying Put arrangement has been identified as an option and is being considered by the young person and foster carers.

An arrangement to Stay Put must be agreed by both the young person and the foster carers. Advice about the differences between a foster placement and a Staying Put arrangement should be given to the Young Person and Carers by the 16+ advisor and the Fostering Supervising Social Worker, in order for both parties to make an informed decision about proceeding with the arrangement.

Occasionally young people or carers may change their minds after making an initial decision about Staying Put. The system should always allow both young people and foster carers to change their minds about establishing a Staying Put arrangement, but care should be taken to avoid disruption to a young person's education at a critical time.

The 16+ advisor/ 16+ SW should forward a copy of the young person's Pathway Plan to the 16+ team manager no less than 6 weeks before the young person's 18th birthday.

The 16+ advisor/16+ SW will work with the young person to assess whether they will have to make a financial contribution to the cost of Staying Put. The 16+ advisor/ 16+ SW will also work with the young person to maximise their entitlement to benefits and calculate the amount required from the Staying Put budget. Consideration should also be given to ensure that applications for benefits do not discourage a young person from obtaining or maintaining part or full-time employment.

The 16+ advisor/16+ SW will ensure that all claims for benefits are submitted in a timely fashion that minimises any potential disruption in allowances being received by the former carer. The 16+ advisor/16+ SW will in conjunction with the young person follow up these claims for benefits until a decision has been made and a payment commences. In certain circumstances it may be necessary for the 16+ advisor/16+ SW to agree with the 16+ Team manager/Fostering Team Manager a contingency arrangements so that the former carer's level of remuneration is not disrupted.

The 16+ advisor/16+ SW will in collaboration with the Fostering Supervising Social Worker convene a Staying Put support meeting immediately prior to the young person's 18th birthday, and in collaboration with the young person and foster carer and the 16+ Team Manager complete a Staying Put agreement. The purpose of the Staying Put agreement meeting is for both the former carers and the young person to appreciate what is expected of each other.

The 16+ Team Manager will authorise Staying Put complete a notification to finance form no less than 4 weeks before the young person's 18th birthday. And will forward this form onto the relevant person in Children's Social Care Finance.

### **3, Professional Roles**

The 16+ advisor/16+ SW will continue to provide support to the young person throughout the Staying Put process. They will complete Pathway Plans and support the young person within the new arrangement with the former carers. The 16+ advisor/16+ SW will ensure that the young person understands the terms of the Staying Put agreement. This may include reinforcing what the young person is expected to purchase from their Income Maintenance (JSA/Income Support or equivalent) Supporting the young person to apply for relevant funding and benefits, and helping them to establish a method of making any regular payments such as Local Housing Allowance to the former carer according to the terms of the agreement.

For Herefordshire Foster Carers, if other children are in placement, the Fostering Supervising Social Worker will continue to provide support to the carer for those children. Their role will also involve supporting the carer to understand the nature of the Staying Put arrangement and their entitlement to funding, and advise the carer about their changing role with the young person under the Staying Put arrangement. The Fostering Supervising Social Worker will be able to provide ongoing advice about tax and national insurance implications, and about personal liability insurance.

For Foster Carers who work for an Independent Fostering Agency, in most circumstances the **16+ advisor/16+ SW** will provide the support to the former carer, rather than the Agency Worker. The support and advice provided will be similar to that described in 3.2 above, and will reflect that the

Independent Fostering Agency is no longer actively involved in supporting the former carers to provide ongoing care and support to the young person who is Staying Put.

Former carers should be given information about the **income tax and national insurance implications of the Staying Put arrangement**. There are a number of tax concessions for Adult Placement schemes.

HMRC have stated that the same arrangements that apply to Adult Placement scheme carers should apply to former foster placements if the carer continues to provide support, and continues to receive the same level of payment.

Adult placement' Carers are treated as self-employed for tax purposes and can pay Class 2 National Insurance contributions in order to qualify for basic state pension.

For carers who are in receipt of welfare benefits, advice should be given about whether Staying Put payments will be disregarded or considered as income for means tested benefits. These payments may include:

- Rent payments paid to the carer;
- Payments from the young person to the carer;
- Payments from LCC to the carer (made under The Children Act 1989).

A young person may not be able to claim Local Housing Allowance if the Carers are already in receipt of Housing Benefit or Local Housing Allowance to meet their own housing costs.

***In circumstances where all the funding for a Staying Put arrangement comes from the Staying Put budget, the payment can be made under Section 24 of The Children Act 1989. In these circumstances, a letter should be written to the former carer by the 16+ Team Manager confirming that payments are being made under Section 24 of the Children Act 1989 to support the young person in education, and that the payment should be disregarded for income tax and benefit purposes.***

Legislation regarding the treatment of payments to the carer is complex, and individual financial circumstances vary, and it may be necessary to advise the carer to seek specialist advice (from Citizens Advice Bureau, for example) about their specific circumstances and the effect of the Staying Put arrangement on their tax, national insurance, welfare benefits, and working tax credit or child tax credit.

If the carers are tenants themselves, it is advisable for them to check their tenancy agreement and ensure that their lease allows them to have a lodger.

If the carers are mortgage payers it is advisable for them to check whether having a lodger is within the terms and conditions of their mortgage lender and insurer.

It is advisable for carers to inform the Insurance Company providing their household insurance when a young person is no longer a fostered child but remaining in their home as an adult lodger, and to

check that existing insurance arrangements still provide adequate household cover under this arrangement.

***Foster Carers are currently covered for legal protection insurance provided and paid for by LCC in the case of an allegation made against them by a foster child. Carers must be informed that this legal protection insurance cover does not continue under a Staying Put arrangement.***

Key information and training will be offered to carers in the lead up to a post 18 Staying Put arrangement. Carers will continue to be registered as carers and under go an annual review and comply with the National Standards.

### **Paperwork**

- The Pathway Plan should identify an intention to establish a Staying Put arrangement.
- ***A Staying Put Agreement*** should be completed before the Staying Put arrangement begins.
- The 16+ Team Manager will forward payment authorisation no less than four weeks before the young person's 18th birthday, this will need to have been signed off by the Head of LAC. The 16+ Team Manager will then forward the finance form to the relevant person in Children's Social Care Finance.
- ***Staying Put agreements which will include a Licence Agreement should be completed prior to the commencement of the Staying Put Arrangement.***

### **5. Finance and Funding Sources**

The total package of financial support will generally match fostering allowances made to carers when they were fostering.

Where the young person has commenced their thirteenth year of education in the academic year in which they turn 18, foster carers will continue to receive the same level of remuneration as before the young person was 18.

This will continue from the young person's 18th birthday until two weeks after the completion of the final examination in year 13. After this period the funding would then reduce to the standard Staying Put allowance. If young people are assisted to claim benefits the timing of these claims should not disrupt their education or exam period.

Specialist fostering or independent sector fostering rates will only be paid if:

- The former carer is prevented from taking another foster child because the young person is converting to a Staying Put arrangement; and
- The young person is in their thirteenth year of education;
- The retainer fee will apply when the young person is absent in this case.

The young person will retain the JSA/Income Support level of this financial package. This will enable them to purchase things that would previously have been included in the fostering allowance, and is intended to enable the young person to develop budgeting skills. This would include clothes and toiletries, and should cover social and leisure activities.

The young person's income may come from:

- Income support/JSA;
- Employment.

If the young person's total average income over a 6 week period exceeds £50pw they will be expected to contribute 50% of their income over £50 towards the placement costs, up to a maximum of £50pw contribution.

The financial package for the former carer will be equivalent to that received through fostering allowances minus the allowance made to the young person.

This is made up of funding from:

- Local Housing Allowance (LHA) - the amount varies according to area;
- Any contribution from the young person, from income or entitlement to grants, allowances or benefits;
- LCC Staying Put funding will make up the balance of the cost.

The young person may be able to claim income support or be entitled to EMA if they are in full-time education.

The young person can usually claim Local Housing Allowance and as a Care Leaver will be exempt from the single room rent restriction.

Local Housing Allowance will usually be paid direct to the young person and they will be expected to maintain arrangements to pay this to the former carer.

The young person should be advised that if they do not make these payments of LHA to the carers:

- It will result in the placement ending;
- It may impact on their future ability to claim LHA;
- If the failure to pay results in the Staying Put arrangement being terminated the young person may be considered to be 'intentionally homeless' by the local housing authority.

In certain circumstances LHA can be paid direct to the landlord if the claimant is likely to have difficulty in managing their financial affairs or if the tenant has built up rent arrears of eight weeks or more.



If the young person cannot claim Local Housing Allowance the Local Authority will compensate by paying an amount equivalent to LHA to the former carers.

## **6. Young Persons Contribution**

If the young person is employed or has an income of more than £50 per week they will be expected to make a contribution to the Staying Put arrangement. If a young person's income varies on a weekly basis, it may be averaged over a six week period to determine the level of the young person's contribution to the Staying Put arrangement.

The young person will keep the equivalent JSA of their income. It is intended that this money will be managed by the young person and used for things like toiletries and clothes, which will previously have been provided for the young person by the foster carer, from the fostering allowance.

They would be expected to contribute 50% of the next £100 of their income, up to a maximum contribution of £50 per week.

The 16+ advisor will continue to encourage Young Person to access employment. This may mean the contribution from the Staying Put budget is higher as they may be unable to claim Local Housing Allowance.

Where a young person's level of income is so low that they are unable to contribute the former carer will suffer no detriment, and if necessary the council will make the provision where it cannot be found from another source.

Financial arrangements will be reviewed at a minimum on an annual basis, or earlier if there is a significant change in financial circumstances.

## **7. Retainer/Allowance**

A retainer can be paid in certain situations.

Young people are not expected to make a contribution to the retainer.

When a young person returns to stay for a period of time, the former carers will be paid at the current Staying Put rate. The young person will be expected to make a contribution to this depending on their income.

If the young person returns, the young person will be expected to make a contribution to this depending on their income.

### **Retainer - Armed Services**

If a young person joins the armed services the former carer can be paid a retainer while the young person completes the first three months of basic training.

## **Retainer - University**

A retainer can be paid to the former carer of a young person who is at university during term time. During the breaks from University the former carer will receive a flat rate (the retainer).

The bursary which University Students receive from the Council is classed as income (currently £150 p/w) and the young person will be expected to contribute towards the cost of returning to their former carers during periods of vacation from this and any other source of income.

## **8. Police Checks**

If the former carer is going to continue to work as a Foster Carer the young person in the Staying Put arrangement will need to have a DBS Check as they become an adult living in the home. This will require sensitive management and sensible negotiation.

If the former carers are still registered with LCC as foster carers the DBS checks will continue routinely.

## **9. The Independent Sector**

The Independent Fostering Agencies which have been awarded a contract to make provision Herefordshire Council are required to adhere to the Council's policy with respect to post 18 arrangements.

If the young person and carer are willing to convert the placement to a supported lodgings arrangement and be paid the current Staying Put rate then the IFA should not do anything to obstruct this arrangement.

The Pathway Plan should set out what support should be provided, as in effect the role of the IFA ends at 18. A young person cannot legally be 'looked after' after their 18th birthday. Ongoing support to former carers in the independent sector will usually be provided by the Fostering Supervising Social Worker.

## **10. Young Parent**

If a young person in a Staying Put arrangement has a child living with them, the former carer will be entitled to the current boarding out rate.

## **11. Monitoring and Reviewing Arrangements**

Staying Put Arrangements should be reviewed as part of the Pathway Plan Review a minimum of every six months. This should include a review of any problems or difficulties which have emerged, and what is working well.

A review can be arranged earlier by agreement between the young person, carers, and the professionals involved.

The young person and carers can also access advice at other times from the 16+ advisor/16+ SW or the Fostering Supervising Social Worker.

## 12. Ending the Staying Put Arrangement

The Staying Put arrangements can be ended before the young person's 21st birthday, by the young person or former carer giving relevant notice. Both parties should give as much notice as possible, and this should in most circumstances be a minimum of 28 days notice. The licence agreement allows for the ending of the arrangement with 7 days notice for a breach of the agreement, but this minimum should only be used in exceptional circumstances.

The Staying Put arrangements will end when the young person becomes 21. If a young person will be at a critical time in their education (e.g. final exam period) at the time when they reach 21 years they will be able to Stay Put until after this period.

Planning will be undertaken to ensure young person can move on into suitable accommodation.

When planning to end a Staying Put arrangement as a young person approaches 21, it needs to be considered that a young person will no longer be classed as in "priority need" for social housing when they reach 21 years. It may be necessary to plan for the young person to move shortly before this time if social housing is to be accessed.

End



<b>Meeting:</b>	<b>Cabinet</b>
<b>Meeting date:</b>	<b>19 March 2015</b>
<b>Title of report:</b>	<b>Waste management services contract update</b>
<b>Report by:</b>	<b>Head of Corporate Finance</b>

## Classification

Open

## Key Decision

This is a key decision because it is likely to result in the council incurring expenditure which is, or the making of savings which are, significant having regard to the council's budget for the service or function to which the decision relates.

and

because it is likely to be significant in terms of its effect on communities living or working in an area comprising one or more wards in the county.

Notice has been served in accordance with Part 3, Section 9 (Publicity in Connection with Key Decisions) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

## Wards Affected

Countywide

## Purpose

To approve the deferral of the payment for the purchase of the Energy from Waste plant site in Hartlebury and provide an update on the outcome of the execution of joint waste PFI contract variation concluded in May 2014.

## Recommendation(s)

**THAT:**

- (a) the conclusion of the agreed joint waste PFI contract variation and associated joint working agreement be noted; and**
- (b) the deferral, until December 2023, of the purchase of Herefordshire's share of the Hartlebury waste site be approved.**

---

Further information on the subject of this report is available from  
 Josie Rushgrove, Head of corporate finance on Tel (01432) 261867

## Alternative options

- 1 The following alternative option has been considered:

**To purchase 24.2% of the Hartlebury waste site now.** This would incur immediate costs of £1.9m and is not recommended.

## Reasons for recommendations

### Conclusion of the PFI Contract Variation

- 2 Final agreement between Herefordshire Council, Worcestershire County Council and Mercia Waste Management Ltd was reached on 21 May 2014. Construction of the energy from waste (EfW) facility began soon afterwards.
- 3 Herefordshire will save an average of £1.6m pa as a result of its decision to invest in the EfW plant (£41m over the expected life of the plant of 25 years), an improvement of £0.4m pa on the expected savings approved by Cabinet in December 2013, achieved through successful final contract variation negotiations.
- 4 The Cabinet decision in December 2013 compared agreeing to construct an EfW with continuing to send waste to landfill. Doing nothing included the increasing costs of landfill, e.g., landfill tax has risen from £8 per tonne in 1996 to £80 per tonne in 2014. In addition, not building the EfW would have resulted in no confirmed capacity for treating or disposing of non-recyclable municipal waste after 2023.
- 5 The table below compares the final agreed contract cost over the life of the plant, 25 years, with the “as is” option of continuing to landfill waste. The final position agreed is substantially better than that reported to Cabinet in December 2013.

Option	Final Net Present Cost to Herefordshire (25%)	Dec 13 Net Present Cost to Herefordshire (25%)
	Whole Life £m	Whole Life £m
Energy from Waste Plant	170	175
Continuing as is	211	207
<b>Saving</b>	<b>41</b>	<b>32</b>

- 6 The business case, with financial data prepared by Deloitte, re-enforced the decision to execute the contract variation, providing the best value for money solution for Herefordshire residents. Full details were published in the final Variation Business Case available through the following web link:

[http://www.worcestershire.gov.uk/downloads/file/4157/variation\\_business\\_case\\_v40\\_june\\_2014](http://www.worcestershire.gov.uk/downloads/file/4157/variation_business_case_v40_june_2014)

## Revised Joint Working Agreement (JWA) with Worcester County Council

- 7 The JWA has been updated as a result of the joint PFI contract variation to include:
- a. Herefordshire’s share of the contract cost to be based on the proportion of

---

Further information on the subject of this report is available from  
Josie Rushgrove, Head of corporate finance on Tel (01432) 261867

contract waste flows arising from 1 September 2013. This was previously paid based on population share. This new split will generate annual savings to Herefordshire of approximately £0.6m.

- b. Confirmation of Herefordshire's share of the EfW funding at 24.2%.
- c. Agreement to the holding of a maintenance reserve account balance of £0.4m on expiry of the PFI, December 2023.
- d. Clarification of terms of reference, governance, roles and responsibilities of the JWA through a Joint Waste Advisory Board and Joint Review Board.
- e. Agreement for the Joint Review Board to meet to discuss the desirability of extending the contract no later than 22 June 2018.
- f. The right and commitment to provide the EfW plant with 48,400 tonnes of suitable waste for a period of twenty five years. Herefordshire currently produces this level of tonnage of waste. By the time the plant opens in 2017, allowing for forecast new homes and the ability to obtain waste from the commercial sector, this commitment is easily achievable. The commitment is a valuable interest which could be sold to other authorities or the commercial sector.
- g. Property purchase options of the EfW and recycling site both located in Worcestershire, as described below.

### **Purchase of Herefordshire's share of the Hartlebury waste site**

- 8 On execution of the waste PFI contract variation for the EfW plant (EnviRecover) a Deed of Trust was entered into over its Hartlebury site. Worcestershire holds all its interest in EnviRecover on trust for both Councils in the same proportion as their respective funding percentages, being 24.2% for Herefordshire. Herefordshire has also registered a Restriction against Worcestershire's title to record and protect Herefordshire's interest in relation to the EnviRecover site pursuant to The Deed of Trust. This protection negates the need to purchase Herefordshire's share now.
- 9 The JWA included a commitment from Herefordshire to acquire its 24.2% share in the Hartlebury site either within twelve months of the contract variation being signed (May 2015) or on expiry of the contract (December 2023).
- 10 The cost of the acquisition is based on Herefordshire's share of the acquisition cost plus debt charges incurred by Worcestershire from the date of acquisition until Herefordshire's date of purchase.
- 11 This gives a total estimated total acquisition cost of £1.7m in 2023, which will be funded by the waste disposal reserve balance expected to be held at that date.
- 12 It is recommended that the purchase of Herefordshire's share of the Hartlebury site is deferred until December 2023. This allows for the maintaining of a waste disposal reserve balance during the period of construction of the EfW and avoids the need to utilise prudential borrowing to fund the purchase cost.

### **Key considerations**

- 13 In December 2013 Cabinet authorised a variation to the council's Joint (Herefordshire and Worcestershire) Waste Management Service Contract with Mercia Waste

---

Further information on the subject of this report is available from  
Josie Rushgrove, Head of corporate finance on Tel (01432) 261867



Management Ltd, to construct and operate an EfW plant to treat residual household waste from the two councils (Cabinet report 12 December 2013).

- 14 In February 2014 Council approved the budget consequences of the contract variation. This approval included the financing arrangements for the new facility where Herefordshire Council and Worcestershire County Council lend to the contractor the funds to construct the EfW plant (Council report 7 February 2014).

## Community impact

- 15 The previous approval will significantly reduce the amount of waste sent to landfill which has been collected by Herefordshire Council. The deferral of the site purchase will contribute to the following council corporate objectives:

**Managing our finances effectively to secure value for money and deliver a balanced budget**

**Making best use of the resources available to us in order to meet the council's priorities** (includes money, buildings, IT, information)

## Equality duty

- 16 The report and its recommendations do not have an impact on Equality or Human Rights.

## Financial implications

- 17 The conclusion of the contract variation has resulted in savings that have been reflected in the Medium Term Financial Strategy approved by Council 7 February 2015.
- 18 The delay of site acquisition will result in the retention of the waste disposal reserve during the construction of the Energy from Waste plant as a contingency balance for risk mitigation.

## Legal implications

- 19 The revised JWA improves governance and ensures value for money is delivered to both authorities.

## Risk management

- 20 Deferring the site purchase entails a risk of interest rate increases. However, this risk has been reviewed and is considered to be a low risk. Deferring the purchase also entails a risk of the open market value of the recycling site changing over time. However, if it this value is higher in 2023, it will mean the EfW site acquisition cost would be reduced further. Based on historic property price indices, the decision to defer is considered to be of least financial risk.

## Consultees

None

---

Further information on the subject of this report is available from  
Josie Rushgrove, Head of corporate finance on Tel (01432) 261867

## **Appendices**

None

## **Background papers**

None identified

---

Further information on the subject of this report is available from  
Josie Rushgrove, Head of corporate finance on Tel (01432) 261867





<b>MEETING:</b>	<b>CABINET</b>
<b>MEETING DATE:</b>	<b>19 MARCH 2015</b>
<b>TITLE OF REPORT:</b>	<b>2015/16 corporate delivery plan</b>
<b>REPORT BY:</b>	<b>Assistant director, place based commissioning</b>

## Classification

Open

## Key Decision

This is not a key decision.

## Wards Affected

County-wide

## Purpose

To agree the projects and measures within the 2015/16 corporate delivery plan.

## Recommendation(s)

**THAT:**

- (a) **the 2015/16 corporate delivery plan be approved.**

## Alternative Options

- 1 Cabinet may: amend or revise the proposals, but in doing so regard must be made to ensuring any changes continue to demonstrate how the corporate plan is to be implemented and that the proposals can be delivered within the agreed budget.

## Reasons for Recommendations

- 2 Cabinet is asked to approve the key activity that will be used to demonstrate how the priorities for the council are to be delivered. Quarterly reports will be presented to Cabinet on performance against delivery of the key activity and achievement of the measures.

---

Further information on the subject of this report is available from  
Richard Ball, Assistant Director Place Based Commissioning on Tel (01432) 260965

## **Key Considerations**

- 3 The draft 2015/16 corporate delivery plan is attached at Appendix A. The plan will remain a live document and will continue to evolve through the year. This will enable Cabinet to assure itself that resources are being appropriately applied to meet priorities.
- 4 The 2015/16 corporate delivery plan has been aligned to the two corporate priorities agreed in the corporate plan 2013-15 of: enabling residents to be independent and lead fulfilling lives with resources focussed on supporting the most vulnerable; and creating and maintaining a successful economy.
- 5 The corporate plan 2013-15 has been rolled forward for the period 2015/16. Following the elections in May 2015 it is likely that a 'refresh' of the delivery plan will be necessary in the early summer to reflect any changes to priorities that may be required, prior to the development of a new corporate plan to cover the period 2016-2020.

## **Community Impact**

- 6 The 2015/16 corporate delivery plan demonstrates how the council intends to achieve its vision for the people of Herefordshire and continues to draw from the evidence base available through Understanding Herefordshire.

## **Equality and Human Rights**

- 7 Increasing equality of opportunity and access, and reducing inequalities are clearly articulated outcomes within the agreed corporate plan. Individual elements of activity within the delivery plan undergo equality impact assessments as an integral part of their planning and implementation.

## **Financial Implications**

- 8 Proposals within the 2015/16 corporate delivery plan will be delivered within the 2015/16 budget agreed by Council in February 2015, and include projects and activity to deliver the savings required for a balanced budget.

## **Legal Implications**

- 9 There are no legal implications arising directly from the recommendations of this report. The legal implications of any decisions to be taken by the executive in implementing the delivery plan will be set out within the relevant decision report.

## **Risk Management**

- 10 The corporate plan and its delivery plan are integral elements of the council's risk management framework. Risks associated with each objective and project are entered onto the relevant service or directorate risk register and escalated as appropriate. The corporate risk register is a living document and is formally reviewed quarterly by management board. Any significant risks are reported to Cabinet as part of the corporate performance report.

## **Consultees**

- 11 None in relation to this report. The development of the 2015/16 corporate delivery plan was informed by the evidence base already gathered during the year and which includes user, resident and partner feedback where available.

## **Appendices**

Appendix A – 2015/16 corporate delivery plan

## **Background Papers**

- None identified.





# HEREFORDSHIRE COUNCIL

## DELIVERY PLAN 2015/16

The following pages provide an overview of the priorities for each of the directorates, describing what each aims to achieve over the coming year, along with an outline of the key actions that will be undertaken to achieve these goals. The document also describes how success against the aims and actions will be measured.

Progress against the priorities as described in the corporate plan will be reported on a quarterly basis and published in a transparent and open manner. Where there are challenges, these will be described and any necessary changes to the actions will also be reported and published.

## ADULTS WELLBEING

### DIRECTORATE PRIORITIES 2015/16

<p><b>Corporate Plan Priorities</b></p> <ul style="list-style-type: none"> <li>• <b>Enable Residents to be independent and lead fulfilling lives</b></li> <li>• <b>Create and maintain a successful economy</b> <ul style="list-style-type: none"> <li>- Encourage individuals, communities and organisations do more for themselves and for their local area.</li> <li>- Good quality housing to meet everyone's needs.</li> <li>- People are physically and mentally healthy and stay safe for longer.</li> <li>- Increased equality of opportunity and access to reduce inequality in health and wellbeing outcomes.</li> <li>- Public services are prioritised to support those in need of services to maintain their independence of stay safe.</li> <li>- People are active in their communities and look out for the more vulnerable so they can live more independently.</li> </ul> </li> </ul> <p><b>Key Outcomes</b></p> <ul style="list-style-type: none"> <li>• More vulnerable people living safely, independently and remaining healthy (HC.01).</li> <li>• The proportion of people who use services and carers who find it easy to find information about support (HC.02).</li> <li>• Build homes for all tenures (HC.09).</li> <li>• Value for money will increase (HC.03).</li> </ul>		
<p><b>What we want to achieve</b></p>	<p><b>Key actions</b></p>	<p><b>How success will be measured:</b></p>
<p><b>Wellbeing, Prevention and Demand Management – improve the wellbeing of our population, strengthen our community resilience and promote choice and independence for all residents</b></p>	<p><b>Refresh the Health &amp; Wellbeing Strategy and implement the delivery plan, including:</b></p> <ul style="list-style-type: none"> <li>• Mental Health and Well Being Strategy;</li> <li>• Older People Housing Strategy and Pathway;</li> <li>• Delivery of the Assist Programme (reduction in smoking prevalence programme in secondary schools);</li> <li>• Community Co-ordination Strategy;</li> <li>• Lifestyle and behavioural change strategy; and</li> <li>• Build supportive and resilient communities by using the Wellbeing Innovation Fund.</li> </ul> <p><b>Design and Commission Integrated Children's</b></p>	<ul style="list-style-type: none"> <li>• H&amp;WB Strategy published.</li> <li>• Measurable improvements in Health outcomes evidenced through the JSNA, PH, NHS and ASC Outcomes framework.</li> </ul>
	<p><b>Design and Commission Integrated Children's</b></p>	<ul style="list-style-type: none"> <li>• Provider in place and new contract.</li> </ul>

	<p><b>Health Pathways:</b></p> <ul style="list-style-type: none"> <li>Develop and implement a pathway for Health Visitor, School Nursing and Children’s Centres.</li> </ul> <p><b>Develop and implement a refreshed Adult Social Care strategy and Customer Journey that is compliant with the Care Act:</b></p> <ul style="list-style-type: none"> <li>Refresh the Community Care Policy;</li> <li>Implement a new operating model for adult social care operations; and</li> <li>Review options for support planning and brokerage externally.</li> </ul> <p><b>Implement the Care Act and new duties on wellbeing, to include the following areas:</b></p> <ul style="list-style-type: none"> <li>Information Advice and Guidance;</li> <li>Safeguarding;</li> <li>Carers;</li> <li>Care Market; and</li> <li>Personal budgets.</li> </ul> <p><b>Refresh the Carers Strategy.</b></p> <p><b>Develop and implement a range of housing pathways:</b></p> <ul style="list-style-type: none"> <li>Implement the Older Persons Housing Pathway;</li> <li>Complete pathways for other specialist need housing; and</li> <li>Refresh approach to housing solutions and homelessness.</li> </ul> <p><b>Deliver a range of affordable housing:</b></p> <ul style="list-style-type: none"> <li>Work with developers to deliver affordable housing in rural areas and within Hereford</li> </ul>	<ul style="list-style-type: none"> <li>Improved timeliness of assessment.</li> <li>ASCOF 3A - Overall satisfaction of people who use services with their care and support.</li> </ul> <ul style="list-style-type: none"> <li>Percentage of clients undertaking self-assessment.</li> <li>Number of carer assessments increased.</li> <li>Number of clients signposted.</li> <li>Percentage of clients progressing to referral.</li> <li>Number of people on direct payments.</li> <li>ASCOF 3D – The proportion of people who use services and carers who find it easy to find information about support.</li> </ul> <ul style="list-style-type: none"> <li>Percentage of carers receiving services.</li> <li>Implement Pathway Action Plan to establish and launch integrated Information, Advice and Guidance self-assessment tools for Older People by end 2015/16.</li> </ul> <ul style="list-style-type: none"> <li>Increase affordable housing by 200 units.</li> </ul>
--	--	---

	<p>city.</p> <p><b>Promote and deliver effective housing solutions including the prevention of homelessness.</b></p> <p><b>Development of Home Improvement Agency service to support prevention.</b></p> <p><b>Transform services and pathways through Technology:</b></p> <ul style="list-style-type: none"> <li>• To grow the Telecare and Telehealth offer;</li> <li>• Implement a range of web-based self-care and information, advice and guidance opportunities (e-market, community hubs);</li> <li>• To explore and roll out mobile working for our workforce and Pop Up Adults and Wellbeing clinics; and</li> <li>• To review and develop our case management system (Frameworkki) and plan for its succession.</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce numbers of Rough Sleepers.</li> <li>• Reduce Temporary accommodation (except for use in emergency).</li> <li>• Bed &amp; Breakfast usage.</li> <li>• Number of major adaptations completed.</li> <li>• Reduction on number of people on the accessible housing register.</li> <li>• Percentage of clients supported by Assistive technology.</li> <li>• Number of assessments undertaken.</li> <li>• Reduction in waiting lists.</li> <li>• Take up of technology (e.g. hits on IAG website).</li> <li>• Number of pop-up clinics held.</li> </ul>
<p><b>Integration – working more closely with our partner agencies to improve clients experience of care services</b></p>	<p><b>Expand our range of co-commissioning activities with Health to offer a more joined up service to clients, to include:</b></p> <ul style="list-style-type: none"> <li>• Residential and Nursing provision;</li> <li>• Mental Health services;</li> <li>• Learning Disability services;</li> <li>• Integrated Personal Budgets; and</li> <li>• Intermediate Care and Hospital admission prevention.</li> </ul> <p><b>Implement the Better Care Fund.</b></p>	<ul style="list-style-type: none"> <li>• ASCOF 1G – LD client living at home or with family.</li> <li>• ASCOF 2A – rate of permanent admissions to residential and nursing.</li> <li>• ASCOF 1C – Proportion of people using social care services who receive self-directed support, and those receiving Direct Payments.</li> </ul>
		<ul style="list-style-type: none"> <li>• ASCOF 2C – Delayed Transfers of Care.</li> <li>• Non-elective admissions aged 65+ per 1000 population.</li> </ul>

	<p><b>Implement an improved transitions pathway and be compliant with both the Care Act and Children's &amp; Families Act</b></p> <p><b>Develop Commissioning Plans for:</b></p> <ul style="list-style-type: none"> <li>• Obesity;</li> <li>• Physical Activity;</li> <li>• Public Mental Wellbeing; and</li> <li>• Support Planning including peer support planning.</li> </ul>	<ul style="list-style-type: none"> <li>• Permanent admissions to residential and nursing homes.</li> <li>• ASCOF 2B - Older people who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.</li> <li>• Customer Satisfaction/User Survey.</li> <li>• Reduction in falls related admissions.</li> </ul>
<p><b>Commissioning – ensuring that all services procured are based on needs data and can demonstrate value for money</b></p>	<p><b>Promote Co-production, engagement and co-working with communities, service users and carers:</b></p> <ul style="list-style-type: none"> <li>• Continuation of Adult Social Care discussion about future strategy.</li> </ul> <p><b>Complete market testing and re-commission the following contracts:</b></p> <ul style="list-style-type: none"> <li>• Sexual Health;</li> <li>• Substance Misuse Services;</li> <li>• Carers Health &amp; Wellbeing Services (Carers Breaks);</li> <li>• Day Opportunities; and</li> <li>• Block contracts up for renewal.</li> </ul> <p><b>To work with service users and providers to increase market resilience, to promote a diverse market and improve access and choice of</b></p>	<ul style="list-style-type: none"> <li>• Produce an annual 'Making it Real Board' report.</li> <li>• Produce the Local Account.</li> </ul> <ul style="list-style-type: none"> <li>• Reduce the Alcohol attributable admissions DSR per 100,000 (NI39).</li> <li>• Reduce rates of syphilis and HIV.</li> <li>• Increase the percentage of carers taking short breaks.</li> <li>• Increase the number of residents accessing day opportunities.</li> </ul> <ul style="list-style-type: none"> <li>• ASCOF -1C – Proportion of people using social care who receive self-directed support, and those receiving direct payments.</li> </ul>

	<p><b>services:</b></p> <ul style="list-style-type: none"> <li>● Personalisation;</li> <li>● Virtual Personal Assistant pool;</li> <li>● Autism, LD etc. Partnership Boards;</li> <li>● Coordinate Provider Forums; and</li> <li>● Facilitate 3 market development days.</li> </ul> <p><b>Redesign and implement stronger contract management and quality assurance function:</b></p> <ul style="list-style-type: none"> <li>● To deliver a supportive quality compliance framework with care providers in Herefordshire, ensuring strong and equitable contract management; using both hard and soft intelligence, sharing good practice between providers and involving providers to improve the standards of care; and</li> <li>● Implementation and embedding of electronic monitoring system (EMS) by Home Care Providers.</li> </ul>	<ul style="list-style-type: none"> <li>● To improve the percentage of compliant providers.</li> <li>● Percentage of service users with EMS installed.</li> </ul>
<p><b>Operations quality, efficiency and Statutory duty delivery</b></p>	<p><b>Embed visible and credible leadership and management across our directorate:</b></p> <ul style="list-style-type: none"> <li>● Embed new structures;</li> <li>● Improve visible leadership;</li> <li>● Succession and continuity plans in place;</li> <li>● Implement new performance management and supervision guidance;</li> <li>● Senior and middle management coaching in place; and</li> <li>● Team delivery plans and audit assurance framework monitored on a quarterly basis.</li> </ul> <p><b>Deliver a range of initiatives to support and develop our workforce:</b></p> <ul style="list-style-type: none"> <li>● Implement the Supervision policy;</li> </ul>	<ul style="list-style-type: none"> <li>● Audit Supervision Policy implementation on a quarterly basis.</li> <li>● Senior Management posts recruited.</li> <li>● Improvements in staff survey feedback.</li> <li>● Directorate targets and outcomes achieved.</li> </ul>
		<ul style="list-style-type: none"> <li>● Percentage of cases audited as good/excellent</li> <li>● Improvement staff survey.</li> <li>● Reduction in staff sickness.</li> </ul>

	<ul style="list-style-type: none"> <li>● Roll out Quality Assurance Framework to monitor and improve the quality of our social work; and</li> <li>● Monitoring and evaluating employee opinions.</li> </ul> <p><b>Strengthen our Health Protection arrangements:</b></p> <ul style="list-style-type: none"> <li>● Compliance with Health Protection local authority duties; and</li> <li>● Deliver the local authority Public Health statutory duties.</li> </ul> <p><b>Implement Making Safeguarding Personal.</b></p>	<ul style="list-style-type: none"> <li>● Improvements in retention of staff.</li> </ul> <ul style="list-style-type: none"> <li>● Quarterly Health Protection Committee meetings.</li> <li>● Quarterly West Mercia LHRP.</li> <li>● Quarterly reports to the Health and Wellbeing Board.</li> </ul> <ul style="list-style-type: none"> <li>● Percentage of safeguarding assessments completed in 28 days.</li> <li>● Percentage of safeguarding cases where client feels safer as a result of the safeguarding intervention.</li> <li>● Percentage of cases where safeguarding decision is made within 2 days.</li> </ul> <ul style="list-style-type: none"> <li>● On or under budget for 2015/16.</li> <li>● Dynamic budget management in place.</li> <li>● Devolved budgets in place.</li> </ul> <ul style="list-style-type: none"> <li>● Quarterly performance reviews.</li> <li>● Individual performance reviews.</li> <li>● Spotlight on performance quarterly in each team.</li> </ul>
	<p><b>Deliver a sustainable financial position, and achieve savings targets:</b></p> <ul style="list-style-type: none"> <li>● Continue to monitor our financial position so that we can meet the reduced budget position.</li> </ul> <p><b>Improve data quality and record management to enable evidenced based commissioning and provide outcome focussed performance management:</b></p> <ul style="list-style-type: none"> <li>● Regular audit of case records;</li> <li>● Additional training for all staff; and</li> <li>● Include as core objective in all staff PDP's delivery of good data quality.</li> </ul>	



## CHILDREN'S WELLBEING

### DIRECTORATE PRIORITIES 2015/16

<p><b>Corporate Plan Priorities</b></p> <ul style="list-style-type: none"> <li>• <b>Enable Residents to be independent and lead fulfilling lives</b> <ul style="list-style-type: none"> <li>- Protecting children and giving them a great start in life.</li> <li>- Access to excellent education and learning opportunities at all levels.</li> <li>- Outcomes for children and young people improve.</li> <li>- Increased equality of opportunity and access to reduce inequality in health and wellbeing outcomes.</li> <li>- Public services are prioritised to support those in need of services to maintain their independence of stay safe.</li> <li>- People are active in their communities and look out for the more vulnerable so they can live more independently</li> </ul> </li> </ul>		
<p><b>Key Outcomes</b></p> <ul style="list-style-type: none"> <li>• Proportion of pupils attaining 5 GCSE's A-C including English and Maths (Top quartile nationally by 2016) (HC.04).</li> <li>• The attainment gap at age 16 between free school meal pupils and their peers (Top quartile nationally by 2016) (HC.05).</li> <li>• Improve Ofsted rating of Safeguarding Children to be good by 2016 (HC.06).</li> <li>• Value for money will increase (HC.03).</li> </ul>		
<p><b>What we want to achieve</b></p> <p><b>Education Outcomes</b>            Improve the educational attainment and progress so that Herefordshire is in the top quartile in 2016/17.             This includes Looked After Children and other vulnerable groups particularly in relation to progress gaps compared to their peers.</p>	<p><b>Key actions</b></p> <ul style="list-style-type: none"> <li>• Continue developing the school to school support carried out in partnership with the Herefordshire School Improvement Partnership.</li> <li>• Continue developing the 'Closing the gap approach' so children/young people identified as vulnerable and/or who are not achieving are tracked. Where settings are not confident that the child/young person will meet the expected level at the next key stage, a multi-disciplinary plan is put in place and monitored.</li> <li>• Proactively monitor and evaluate the implementation of the Marches Skills plan</li> </ul>	<p><b>How success will be measured:</b></p> <ul style="list-style-type: none"> <li>• An annual report on attainment and progress which includes analysis of all vulnerable groups and schools.</li> <li>• Percentage of pupils attending a school and or setting that is good and or outstanding:               <ul style="list-style-type: none"> <li>- Primary – 90%</li> <li>- Secondary – 95%</li> </ul> </li> </ul>
<p>Reduce the number of young people who are not in education, employment or training so we are in</p>	<p>Proactively monitor and evaluate the implementation of the Marches Skills plan</p>	<p>Percentage of young people not in employment education or training is less than</p>

<p>the top quartile of performance nationally and those whose destination is not known across Herefordshire to less than 2% locally.</p>	<ul style="list-style-type: none"> <li>with particular reference to Herefordshire. <ul style="list-style-type: none"> <li>Review the experiences of young people and the impact of programmes to inform and develop practice on a monthly basis. Include evidence from public health lifestyles survey on those Not in Education Employment or Training.</li> <li>For those with learning difficulties and disabilities, the development of a wider range of support into employment through the work of the 16-25 Development Group.</li> </ul> </li> </ul>	<p>5.5%.</p> <ul style="list-style-type: none"> <li>Percentage of young people whose destination is not known is less than 2%.</li> </ul>
<p>High quality, financially sustainable schools across Herefordshire.</p>	<ul style="list-style-type: none"> <li>Develop long term proposals for school provision to include capital options. (Education Capital Investment Strategy to be agreed autumn 2015).</li> <li>Continue to review implications for revised national school funding formula in particular its relevance to the demographics of Herefordshire, including specialist provision.</li> </ul>	<ul style="list-style-type: none"> <li>Via termly reports on the numbers placed in specialist provision.</li> <li>Per capita spend.</li> <li>No schools going in to deficit.</li> </ul>
<p><b>Implementation of Children's &amp; Families Act/Children with Disabilities</b> Implement the Children with Disabilities strategy that incorporates the delivery of the education, health &amp; care plan.</p>	<ul style="list-style-type: none"> <li>Implement personal budgets.</li> <li>Continue to improve the high quality 'Local Offer' of information, services/provision in collaboration families and providers in liaison with the development of information and advice guidance services with Adults Wellbeing.</li> </ul>	<ul style="list-style-type: none"> <li>Statutory requirement met for Education Health and Social Care plans.</li> <li>All eligible young people offered personal budget – to be reported termly.</li> <li>Education health and care plans are produced to 20 week timescale.</li> </ul>
<p>Redesign of a Children with Disabilities service that is fit for purpose and meets statutory requirements.</p>	<ul style="list-style-type: none"> <li>Implementation of Children with Disabilities service redesign to ensure the appropriate targeting of services to meet the needs of the client group.</li> </ul>	<ul style="list-style-type: none"> <li>Support more young people in to local services.</li> <li>A reduction in use of institutionalised care/spend.</li> <li>16-18 cases being worked on by each social worker.</li> </ul>

<p><b>Re-shaping integrated services for families</b> Implement the families first (troubled families) programme across Herefordshire to target the most vulnerable families.</p>	<ul style="list-style-type: none"> <li>• Improve data sharing, to provide greater understanding of needs to improve/commission services across the partnership.</li> <li>• Implement next 5 year programme and significantly increase in the number of families supported and evidence improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of families turned around – to be advised as part of the phase 2 implementation (1,060 families over 5 year period).</li> </ul>
<p>Develop and implement a whole systems framework to manage family pathways from early help to statutory intervention.</p>	<ul style="list-style-type: none"> <li>• Continue to embed the new level of needs guidance.</li> <li>• Consult develop and agree the priorities/actions needed to manage the family pathways.</li> <li>• Market and community development to increase the effectiveness of universal services in dealing with family issues.</li> <li>• Review and develop Information Advice and Guidance so families can help themselves.</li> <li>• Ongoing review and evaluation of effectiveness of preventative/early intervention approach.</li> <li>• Establishment of Integrated Early Years Strategy.</li> </ul>	<ul style="list-style-type: none"> <li>• Reduction in the number of families being referred to higher level of need services.</li> <li>• 16-18 cases being worked on by each social worker.</li> <li>• 70% of audits demonstrate that there is a consistent application of thresholds across agencies.</li> <li>• Improvement in Education and health outcomes at age 5 years.</li> </ul>
<p>The delivery of a 16+ service that is fit for purpose and meets statutory requirements.</p>	<ul style="list-style-type: none"> <li>• Establish scope of a transformed service including the potential to merge with complementary services to provide an integrated model.</li> <li>• Implementation of an integrated youth support service to reduce duplication of service provision to young people; improving the quality and continuity of service provision.</li> </ul>	<ul style="list-style-type: none"> <li>• A number of young people in appropriate housing, in employment education or training.</li> <li>• Number of Children accessing work experience and interview support provided by the businesses of Herefordshire.</li> </ul>
<p>Placing looked after children locally wherever</p>	<ul style="list-style-type: none"> <li>• Herefordshire Intensive Placement Support</li> </ul>	<ul style="list-style-type: none"> <li>• Children will be placed in family based</li> </ul>

<p>possible through the development of placement and support services, including the development of an integrated mental health pathway.</p>	<p>service delivers a reduction in the number of children in residential and out of county placements, and reduce the associated costs and deliver savings</p>	<p>settings in county to enable them to experience the best possible care and achieve their full potential.</p>
<p><b>Operational Improvement</b> Ensure improvement in the timeliness and quality of practice within Safeguarding &amp; Early Help.</p>	<ul style="list-style-type: none"> <li>● Decision making on the same working day of the contact, through the recommendation of a Qualified Social Worker, and to achieve completion of assessments within timescale.</li> <li>● Decisions made within agreed timescales within the whole system; i.e. within the multi-agency safeguarding hub, the children in need teams and the looked after children teams.</li> <li>● Children receive the support and protection they need in a timely manner.</li> </ul>	<ul style="list-style-type: none"> <li>● 95% of contacts and referrals received progressed within 24 hours.</li> <li>● CP visits completed within timescale.</li> <li>● LAC visits completed within timescale.</li> </ul>
<p>Implement an overall workforce strategy that delivers a capable, stable, sustainable and affordable workforce in order to improve the quality and continuity of social care experienced by children and families.</p>	<p>Implement phase 2 of the workforce development strategy and 15/16 Workforce Training programme across Children's Wellbeing. To include:</p> <ul style="list-style-type: none"> <li>● Recruitment and retention plans;</li> <li>● Workforce induction and development;</li> <li>● Leadership and engagement;</li> <li>● Working tools, equipment and environment;</li> <li>● Workload and case allocation; and</li> <li>● Supervision and performance management.</li> </ul>	<ul style="list-style-type: none"> <li>● Increased average tenure (leavers and current interim and permanent staff).</li> <li>● Profile - % of established roles filled by interim staff (reduced to &lt;30%).</li> <li>● Fewer than 5 permanent Social Worker leavers.</li> <li>● 16-18 cases being worked on by each social worker.</li> </ul>

## ECONOMY, COMMUNITIES & CORPORATE

### DIRECTORATE PRIORITIES 2015/16

Corporate Plan Priorities		Key actions	How success will be measured:
<ul style="list-style-type: none"> <li>• <b>Create and maintain a successful economy</b> <ul style="list-style-type: none"> <li>- Encourage individuals, communities and organisations do more for themselves and for their local area.</li> <li>- Supports economic growth and connectivity (includes broadband, local infrastructure, transport and economic development).</li> <li>- Supports the improvement in quality of our natural and built environment.</li> <li>- Embraces new ways of responding to changing pressures (includes sustainable and more local water, fuel and food supplies).</li> <li>- Has vibrant town centres with shops, restaurants and leisure facilities that keep people spending locally.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Improved road conditions (HC.07).</li> <li>• Increase median wages in the county faster than the West Midlands region (HC.08).</li> <li>• Build more homes for all tenures (HC.09).</li> <li>• Value for money will increase (HC.03).</li> </ul>		
<p><b>What we want to achieve</b></p> <p><b>Better maintenance of existing roads</b> Major investment in the highway asset to deliver sustained improvement in road condition.</p>	<ul style="list-style-type: none"> <li>• Continue to implement a programme of road condition improvements across the county through a targeted asset management strategy.</li> <li>• Deliver Public Realm Annual Plan 2015/16 with Balfour Beatty Living Places.</li> <li>• Commence construction works in Spring 2015.</li> </ul>	<ul style="list-style-type: none"> <li>• Improved road conditions.</li> <li>• Reduction in number of people killed and seriously injured in road traffic collisions in Herefordshire.</li> </ul>	
<p><b>Build new road infrastructure to support growth</b> Complete the Hereford City Centre Link Road scheme which supports/enables regeneration of the urban village by providing access to development area that will eventually deliver 800 houses and 760 jobs. Develop South Wye Package which will include a new road link from the A49 – B4349 (1st phase of Western Relief Road) to support development of</p>	<ul style="list-style-type: none"> <li>• Secure planning permission for new road during 2015/16.</li> <li>• Prepare for CPO process.</li> </ul>	<ul style="list-style-type: none"> <li>• Road complete and open in 2016.</li> <li>• Achievement of planning permission.</li> </ul>	

<p>the Hereford Enterprise Zone. This will eventually deliver 1,100 houses and 1,100 jobs.</p>	<p><b>Revise and deliver transport strategy</b> Review and deliver transport strategy to support access and economic growth and to support the Core Strategy and secure funding.</p>	<ul style="list-style-type: none"> <li>Develop new Local Transport Plan (LTP) 2016/17, and adopt by full council.</li> </ul>	<ul style="list-style-type: none"> <li>Adopted LTP.</li> <li>Increased levels of cycling.</li> <li>Improved average journey time per mile in Hereford City during the morning peak.</li> <li>Improved local bus punctuality.</li> </ul>
<p><b>Deliver waste strategy improvement to reduce cost and increase recycling, and reduce CO2 emissions through reduced energy consumption and associated carbon emissions</b></p>	<ul style="list-style-type: none"> <li>Commission, on schedule, a Joint Energy from Waste facility with Worcestershire County Council.</li> <li>Promote the service to increase the capture of recycling and reduce residual waste.</li> <li>Deliver energy efficiency and renewable schemes on an invest to save basis: <ul style="list-style-type: none"> <li>LED streetlight investment programme;</li> <li>Solar PV investment programme; and</li> <li>Building efficiency improvement programme.</li> </ul> </li> <li>Refresh and extend the council's carbon management strategy.</li> </ul>	<ul style="list-style-type: none"> <li>Reduction in residual waste per household.</li> <li>Maximise the % of household waste sent for reuse, recycling and composting.</li> <li>Reduction in % of municipal waste going to landfill.</li> <li>Reduction in CO2 emissions from Herefordshire Council operations.</li> <li>Maximise income from renewable energy sources.</li> <li>Minimise the council's energy spend.</li> </ul>	
<p><b>The Marches (Hereford) Enterprise Zone</b> We will manage the development of the Hereford Enterprise Zone in Rotherwas. Create employment and facilitate business expansion through provision of serviced employment land.</p>	<p>Manage the development of the Hereford Enterprise Zone including:</p> <ul style="list-style-type: none"> <li>The provision of serviced employment land to the market.</li> <li>The promotion and sales of development plots.</li> <li>The creation of a range of business support networks and activities.</li> </ul>	<ul style="list-style-type: none"> <li>17 acres of land sold.</li> <li>180,000 sq. ft. of workspace under construction.</li> <li>150 job opportunities identified in investment commitments.</li> </ul>	
<p><b>Improve the skills/knowledge base within the county</b></p>	<ul style="list-style-type: none"> <li>Support development of a Herefordshire University, developing the business case and confirm site opportunities.</li> </ul>	<ul style="list-style-type: none"> <li>Sites being available to the University.</li> </ul>	
<p><b>Influence the increase in employment</b></p>	<ul style="list-style-type: none"> <li>Work with local businesses, partners and</li> </ul>	<ul style="list-style-type: none"> <li>Increase the % of the working population in</li> </ul>	



<p><b>throughout Herefordshire and increase in the average wage levels</b></p>	<p>agencies across Herefordshire and the West Midlands to increase employment.</p> <ul style="list-style-type: none"> <li>• Work with local businesses, partners and agencies across Herefordshire and the West Midlands to increase the average wage levels.</li> </ul>	<p>employment.</p> <ul style="list-style-type: none"> <li>• Increase earnings (workplace based) and narrow the gap between the county and the region.</li> </ul>
<p><b>Local Development Framework</b> Progress towards the preparation of an up to date and comprehensive planning policy framework for the county. The Framework will comply with the National Planning Policy Framework and enable housing and economic growth in Herefordshire whilst protecting its unique environment of Herefordshire.</p>	<ul style="list-style-type: none"> <li>• Prepare plan for adoption of Core Strategy (by summer/autumn 2015).</li> <li>• Publication of Annual Monitoring Report (AMR) by end of 2015.</li> <li>• Draft Community Infrastructure Levy (CIL) Charging Schedule published for consultation summer 2015.</li> </ul>	<ul style="list-style-type: none"> <li>• Adoption of Core Strategy.</li> <li>• During the period up to 2031, this will eventually enable the: <ul style="list-style-type: none"> <li>– Development of 16,500 houses (600 in 2015/16)</li> <li>– Delivery of 148 hectares of employment land (37 hectares to be available during 2015/16)</li> <li>– Completion of a Hereford Transport Strategy, including a Hereford Relief Road.</li> </ul> </li> <li>• Adoption of CIL.</li> </ul>
<p><b>Broadband.</b> Provide greater Broadband coverage and take up by residents and businesses, by the delivery of broadband infrastructure.</p>	<ul style="list-style-type: none"> <li>• Oversee the roll-out of the fibre broadband network.</li> <li>• Raise awareness of the new broadband network to generate up take.</li> <li>• Seek additional funding for greater coverage and maximise coverage in deeply rural areas.</li> <li>• Operate a voucher scheme to invest in additional connectivity where need is demonstrated.</li> <li>• Operate the CREATE international programme to stimulate business support.</li> <li>• Operate the Digital Inclusion Programme that encourages greater use of broadband to enable access to services and facilities.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase the % of premises with the potential to access &gt;2Mbps broadband across the county by end of 2016.</li> <li>• % of premises with the potential to access NGA broadband services by the end of 2016.</li> <li>• % of premises with the potential to access fibre broadband services by end of 2018.</li> </ul>



<p><b>Improve Residents Interaction</b> To enable residents and businesses to access service in the most effective and cost efficient way.</p>	<ul style="list-style-type: none"> <li>• Support increased 2G coverage in not-spot in the county.</li> <li>• Increased self-service options for customers via web and pay points, and self-issue for libraries.</li> <li>• Provide a range of services in the market towns and Hereford City operated by the local authority and different organisations.</li> <li>• Provide opportunity for customers to establish a personal on-line account for services such as Council Tax.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase the number of web and pay point transactions.</li> <li>• Progress co-location of services in the market towns and Hereford city.</li> <li>• Improve web satisfaction.</li> <li>• Implement Digital Strategy.</li> </ul>
<p><b>Community Development.</b> Support people to be active in their community by encouraging greater involvement in local decision making and service delivery.</p>	<ul style="list-style-type: none"> <li>• Devolve services and transfer assets to local councils and voluntary sector organisations.</li> <li>• Aid establishment and operation of community and partnership libraries.</li> <li>• Provide development support for social enterprises, statutory partners and voluntary groups</li> <li>• Manage grant programmes and accessing external funding.</li> <li>• Support communities and neighbourhoods to increase self-reliance.</li> <li>• Promote community cohesion and address anti-social behaviour.</li> </ul>	<ul style="list-style-type: none"> <li>• Maintain the level of people who feel safe in their local area.</li> <li>• Increase the amount of external funding secured.</li> <li>• Increase the % of parish and town councils part of the lengthsman scheme.</li> </ul>
<p><b>Resources</b> Make best use of the resources available to us.</p>	<ul style="list-style-type: none"> <li>• Manage our finances effectively to secure value for money and deliver a balanced budget.</li> </ul>	<ul style="list-style-type: none"> <li>• Spend within the council's overall budget.</li> <li>• Any Directorate overspend to be approved by Cabinet with a compensating underspend.</li> <li>• 98.5% of Council Tax and Business rates are collected.</li> <li>• For housing benefits, reduce the number of days taken to: <ul style="list-style-type: none"> <li>- deal with new claims and changes of</li> </ul> </li> </ul>

<p><b>Improve capability, including use of technology; ensuring we have the skills, knowledge and tools to do the job well.</b></p>	<ul style="list-style-type: none"> <li>• Technology improvements to simplify processes and enable shift to digital.</li> <li>• Define and implement new recruitment framework.</li> <li>• Review and refresh HR policies.</li> <li>• Develop performance and engagement culture and improved performance tools.</li> <li>• Deliver a leadership and management development programme including the review and refresh of mandatory training.</li> <li>• Develop employee health and wellbeing strategy and plan to improve employee physical and mental health.</li> </ul>	<p>circumstance;</p> <ul style="list-style-type: none"> <li>- deal with new claims; and</li> <li>- deal with changes of circumstance.</li> </ul> <ul style="list-style-type: none"> <li>• Processes are streamlined and automated, reducing overhead costs.</li> <li>• Reduction in substantive posts being filled by agency workers, reducing overhead costs.</li> <li>• HR policies and procedures refreshed, communicated and easily accessible, ensuring consistency and reducing risk of error.</li> <li>• Improvement in employee engagement (measured through staff survey) from 33% and appraisal completion from 59% to 80%.</li> <li>• 100% mandatory training compliance for all staff with over four weeks' service.</li> <li>• Reduce sickness absence from 4%.</li> </ul>
<p><b>Support the democratic governance of the Council</b></p>	<ul style="list-style-type: none"> <li>• Manage elections 2015.</li> <li>• Induct new members.</li> <li>• Review constitution.</li> </ul>	<ul style="list-style-type: none"> <li>• Elections held without successful challenge.</li> <li>• 100% of members complete mandatory training within agreed timescales.</li> <li>• Constitution reviewed and approved by Council by the end of May 2016.</li> </ul>
<p><b>Further improve the utilisation and efficiency of property assets</b></p>	<ul style="list-style-type: none"> <li>• Develop next stage of Accommodation Strategy.</li> </ul>	<ul style="list-style-type: none"> <li>• Reduction in buildings and maintenance liabilities.</li> </ul>