



AGENDA

SUPPORTING PEOPLE IN KENT COMMISSIONING BODY

Thursday, 20th January, 2011, at 2.00 pm

Ask for: **Geoff Mills/Andy Ballard**

Medway Room, Sessions House, County Hall, Maidstone

Telephone **(01622) 694289/69497**

1. Election of Vice Chair
2. Apologies
3. Declarations of interest
4. Minutes of meeting -21 September 2010 and matters arising (Pages 1 - 4)
5. Minutes of the Core Strategy Group (Pages 5 - 10)
6. Memorandum of Understanding (Pages 11 - 16)
7. Delivering the Savings Proposal (Pages 17 - 28)
8. Performance Management in 2011/12 & 2012/13 (Pages 29 - 74)
9. Administration Grant (Pages 75 - 78)
10. Glossary (Pages 79 - 84)
11. Any other business
12. Date of the Next Meeting

MOTION TO EXCLUDE THE PRESS AND PUBLIC

That under Section 100A of the Local Government Act 1972, the press and public be excluded from the meeting for the following business on the grounds that it involves the likely disclosure of exempt information as defined in paragraph 1 & 2 of Part 1 of Schedule 12A of the Act.

EXEMPT ITEMS

(During these items the meeting is likely NOT to be open to the public)

13. Administration of the Supporting People Programme (Pages 85 - 88)

Contact: Geoff Mills, Secretary, Room 1.95 Sessions House, County Hall, Maidstone ME14 1XQ, Tel (01622) 694289 e-mail: geoff.mills@kent.gov.uk

KENT COUNTY COUNCIL

SUPPORTING PEOPLE IN KENT COMMISSIONING BODY

MINUTES of a meeting of the Supporting People Commissioning Body held in the Darent Room, Sessions House, County Hall, Maidstone on 21 September 2010

Present:

Ashford Borough Council	Ms T Kerly
Canterbury City Council:	Cllr Mr T Austin and Mr G Peskett
Dartford Borough Council	Mrs A Haines
Dover District Council:	Cllr Mrs S Chandler and Mr P Whitfield
Gravesham Borough Council	Mr W Adetoro
Kent County Council:	Mr M Hill (Chairman of the Commissioning Body)
Maidstone Borough Council	Cllr Mr M Gree and Mr J Littlemore
Sevenoaks District Council	Cllr Mrs C Clark and Mr G Missons
Shepway District Council:	Cllr Mrs K Belcourt and Mr B Porter
Swale Borough Council	Ms A Christou
Thanet D C	Ms L Hemsley
Tonbridge & Malling	Cllr Mrs J Anderson and Mrs J Walton
Tunbridge Wells B C	Mr K Hetherington
Kent Probation:	Mr H Cohn

Also Present: Mr M Angell, Deputy Cabinet Member for Adult Social Services

KCC Officers:

Ms A Slaven, KCC Director of Community and Support Services. Ms C Martin, Kent Supporting People Team; Ms U Vann, Kent Supporting People Team, Mr H Manuel, Kent Supporting People Team, Mr D Martinez, CFE, Ms K Grant, Kent Adult Social Services, and Mr G Mills, KCC Democratic Services.

UNRESTRICTED ITEMS

1. Apologies

(Item 2)

Noted.

2. Minutes of meeting - of 24 June 2010 and matters arising

(Item 4)

The minutes of the meeting of the Commissioning Body held on 24 June 2010 were agreed as a true record. Matters arising were dealt with as appropriate.

3. Financial Situation

Mr Hill said that until the outcomes from the Comprehensive Spending Review were known it would not be possible to begin to assess its likely impact. However it

would be unrealistic to think that the SPCB budget would not be affected in some way and it was agreed, that at the next meeting there would be a report and discussion in the light of the CSR and KCC's expected budget for 2011/12

4. Supporting People Finance Report (Claire Martin)

(Item 5 - report by Mrs Angela Slaven – Director of Youth and Community Support Services, Communities)

(1) As the Communities and Local Government Department had withdrawn funding, the Commissioning Body needed to consider and agree a methodology which would enable the Programme to continue being administered by the Team.

(2) The Supporting People Team had been funded since its implementation by the Communities and Local Government Department (CLG). However the administration grant which amounted to £735,000 was removed in June 2010 although the CLG still expected the Programme to be managed by administering authorities. As a result of this cut in grant the report reviewed the costs required to fund the Supporting People Team and put forward proposals for meeting those costs into the future.

(3) During the course of discussion it was said that whilst it was understood the withdrawal of the administration grant would be difficult nonetheless it presented an opportunity to review the role, structure and future direction of the Programme against a backdrop of reduced resources across the public sector.

(4) Discussion concluded with it being agreed that funding for the Supporting People Team should be met within the expenditure of the designated funding resource in line with other baseline budget management within Kent County Council. However this matter would be discussed again at the meeting in January 2011 when the general budget situation for the Programme could be discussed in the light of the outcomes of the Comprehensive Spending Review.

5. Review of Core Strategy Development Group (Claire Martin)

(Item 6 - report by Mrs Angela Slaven – Director of Youth and Community Support Services, Communities)

(1) This report presented the findings and conclusions of the task and finish group established to review the role and functioning of the Core Strategy Development Group. The report made recommendations on the way forward and presented revised Terms of Reference for agreement by the Commissioning Body.

(2) During the course of discussion it was said and agreed that the local authority membership of the Commissioning Body should, as far as was possible, always comprise of elected council members.

(3) It was also agreed that a review would be undertaken of the Memorandum of Understanding with a report being submitted to the Commissioning Body at its meeting in January 2011.

(4) Following discussion the Commissioning Body:

- (i) endorsed the view on local authority membership as set out in paragraph 5 (2) above;

- (ii) approved the model for the creation of a newly constituted Core Strategy Development Group together with revised Terms of Reference, as detailed in the report; and,
- (iii) requested a report putting forward proposed revisions to the Memorandum of Understanding be submitted to the next meeting.

6. Supporting People Achievements (Claire Martin)

(Item 7 – report by Mrs Angela Slaven – Director of Youth and Community Support Services, Communities)

(1) This report set out the achievements of the Kent Supporting People Programme since its inception and commented on the anticipated future direction of travel as agreed in the Kent Five Year Supporting People Strategy 2010/15

(2) Following discussion the Commissioning Body noted the contents of the report

7. Commissioning Body and Core Strategy Development Group Work Plan 2010-11

(Item 8 report by Mrs Angela Slaven – Director of Youth and Community Support Services, Communities)

(1) This report detailed how it was proposed the work of the Supporting People Team, Commissioning Body and Core Strategy Development Group would be coordinated over the coming year.

(2) The Commissioning Body agreed the 2010/11 Work plan as presented in the report

8. Next meeting to be held Thursday 20 January, Darent Room, Sessions House, County Hall

(Item 11)

The next meeting of the Commissioning Body would be held **on Thursday 20 January 2011 at Sessions House, County Hall commencing at 2.00 PM**

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Core Strategy Group
Thursday, 16 December 2010
14.00 – 16.00 Waterton Lee, Invicta House

Meeting	Core Strategy Group	
Date & Time:	16 December 2010	Meeting No:
Meeting Place:	Waterton Lee, IH	Minutes By: Pam Bower
Present:	Job Title:	
Angela Slaven	Director of Youth Offending and Substance Misuse	
Claire Martin	Head of Supporting People	
Joanna Wainwright	Director, Commissioning & Partnerships, CFE	
Kevin Hetherington	Tonbridge Wells Borough Council	
Janet Walton	Tonbridge & Malling Borough Council	
Amber Christou	Swale Borough Council	
Bob Porter	Shepway District Council	
Gavin Missons	Sevenoaks District Council (on behalf of Pat Smith)	
John Littlemore	Maidstone Borough Council	
Hud Manuel	Finance Manager	
Howard Cohn	Kent Probation	
Pam Bower	PA to Angela Slaven	
Apologies:		
Paul Whitfield	Dover District Council	
Gary Peskett	Canterbury City Council	
Margaret Howard	Director of Operations, KASS	
Tracey Kerly	Ashford Borough Council	
Next Meeting:	Monday 28 February 2011, Pendragon room, Invicta House, Maidstone at 10am.	
Distribution	As above	
Date Issued		

Item No	Details of the Item/decisions taken	CSG Member responsible for action
1.	<p>Welcome & Apologies</p> <p>Apologies were received from Paul Whitfield, Gary Peskett, Margaret Howard and Tracey Kerly.</p>	
3.	<p>Minutes of meeting – 2 November 2010</p> <p>The minutes were agreed as accurate.</p> <p>Matters arising:</p> <p>3(i) <u>Terms of Reference</u> This related to developing links with providers</p> <p>3(ii) <u>Terms of Reference</u> This work is on-going and a report will go to the February 2011 meeting of the CSG.</p> <p>5 <u>Comprehensive Spending Review</u> This is on the agenda for this meeting. CM advised that only one suggestion had been received from Ashford Borough Council which was a request to revisit extra care sheltered housing and the amount of money paid per week.</p> <p>Concern was expressed that the table indicating a level of spend for 2011/2012 that was distributed to attendees at the last meeting, was not emailed out to those who were unable to attend that meeting. Apologies were extended for this oversight. The meeting was advised that the situation has now changed and this would be covered under Item 5 of this agenda.</p>	
4.	<p>Commissioning Body Memorandum of Understanding</p> <p>The Group were advised that this document reflects the basis of the discussion at the last meeting which was to endeavour to streamline it and reflect that changes that that been made in grant conditions.</p>	

Item No	Details of the Item/decisions taken	CSG Member responsible for action
4. cont.	<p>During discussion the following questions/issues were raised:</p> <ul style="list-style-type: none"> • Does the document need to be more explicit about the relationship with the Districts and Boroughs and who has the authority to spend. Portfolio holders in the Districts/Boroughs may express surprise that this document is all there is. • Districts/Boroughs have no power to veto any money being taken out of the SP budget by KCC. In addition KCC have sole discretion on how the money is spent and the size of the allocation to each District/Borough. <p>The group were reassured that at the last Commissioning Body there was consensus amongst the members that they were happy to work within the existing model for the time being and they also accepted that the MOU was not rigorous. It was agreed that the MOU needed a statement of words to the effect that the Commissioning Body aims to ensure the level of investment in the Supporting People Programme meets the needs of the people in Kent within a collaborative arrangement and in linking with the Locality Boards.</p> <ul style="list-style-type: none"> • Kent Probation needs to be referred to as well as the Districts/Boroughs • If the MOU is changed does it need to come back to this group before it goes to the Commissioning Body in January? • Would we have to take the changed MOU to the Leader of the Council? <p>The group were advised that a substantive piece of work was carried out for the Leader of KCC and interested Cabinet Members to enable them to understand the SP Programme prior to any decision being made re budget cuts. The paper was very well received and Members were astounded by the level of investment in both the public and the private sector and the span of services users. Very strong arguments were put forward and members now fully understand the agenda, particularly with regard to older people and mental health. It was agreed that a statement of purpose would be drafted and added to the MOU and that the MOU should be in the form of a document rather than a table.</p> <ul style="list-style-type: none"> • Was it agreed that reps would take the document back to their organisation for sign off? If yes this would be a good opportunity get the programme on the agenda of all the Districts/Boroughs. • Could we be more formally constituted so that Districts/Boroughs can be involved in how the budget is delegated? <p>This would need to be checked with Geoff Wilde in KCC's Legal Department. In addition it was felt that in light of the localism agenda, there would be resistance to this and it was suggested and agreed that the issue of collaboration and the MOU itself be incorporated into a paper to the Commissioning Body in January. If agreement was reached at that meeting then legal advice could be taken.</p> <ul style="list-style-type: none"> • Is it possible to ensure protection of the delegated monies throughout the year? <p>This is not possible although we are always liable under the contractual arrangements.</p>	

Item No	Details of the Item/decisions taken	CSG Member responsible for action
4. cont.	<p>Actions:</p> <ul style="list-style-type: none"> • The MOU to be refreshed into document format and a statement of purpose containing elements of the discussion at this meeting to be included • A paper to be produced for the Commissioning Body that poses the questions about delegation and authority. 	
5.	<p>Delivering the savings proposal</p> <p>The group were advised that this paper was drafted within the context of the indications around the level of funding that might come down to the Authority. With a potential cut in funding in the range 20 – 40% over 4 years this paper considered a mid-range figure of £7m over the 4 year period. The paper also considers other issues such as Payment By Results and managing cost shunting to Adult Social Services. It was hoped that members would see that the paper does not represent salami slicing and that considerable thought has gone into how Districts/Boroughs could manage the reductions. Providers are concerned about moving to Payments By Results as currently they are paid 4 weeks in advance and this would cease. In addition Supporting People deals with a complex range of needs and there is concern that some Providers might deal with clients who have less challenging needs and would therefore evidence better results.</p> <p>During discussion the following questions/issues were raised:</p> <ul style="list-style-type: none"> • In Appendix 1 most of the targets are process ones and some qualitative ones should be included. Could the Commissioning Body determine some qualitative indicators? <p>This is about contract management and if the overall performance framework ceases, under the localism agenda we will need to set our own indicators and the Commissioning Body may wish to set them around effectiveness.</p> <ul style="list-style-type: none"> • We must be clear on how we define Payment by Results – be bold but cautious. • What are the implications of the cuts we are proposing for Services? <p>The Group were advised that:</p> <ul style="list-style-type: none"> – Sheltered Housing – the threshold has been temporarily raised for many providers – Alarms – the real cost for an alarm is 0.50 so it is suggested that the current amount of £1.50 is reduced. – Handyperson Service & Home Improvement Agencies – Discussions with providers about possible models have concluded that the Handyperson Service lends itself well to Payment by Results but there is a question as to whether they could use this model without any funding from the Supporting People Programme and the Districts/Boroughs. Home Improvement Agencies are more challenging and there be an argument for a more basic level of funding. In addition HIAs need to be re-tendered 	

Item No	Details of the Item/decisions taken	CSG Member responsible for action
5. cont.	<p>so the market could be tested prior to re-tendering. A review of HIA is taking place so discussions will take place with District/Boroughs and a paper will go to the Commissioning Body in March.</p> <ul style="list-style-type: none"> • What we currently spend, what we are proposing is cut and what options we have is not explained in the paper. KCC will send its budget book to print on 29 December and will publish the plan on 6 Jan and until then exact figures are unknown. After 6 January a paper will be drafted that will include detail on investment and hopefully this paper will not include any major surprises. • Young People's Services and cost shunting – should this all fall on Supporting People? The group were advised that talks will take place with CFE about the need to have their commitment to some of the funding for the assessment period. • Administration Costs – there was discussion around this at the last Commissioning Body meeting but this is not mentioned in the paper. The group were assured that there will be a need to evidence administration savings at the next Commissioning Body meeting. The role and functions of the team will determine the nature of the savings and there needs to be a transitional phase to ensure the team can manage all the savings that will need to be made. This was agreed. It was also agreed that a separate confidential paper will go to the Commissioning Body on this. • Is there agreement that re section 4 of the paper, this will go forward to the Commissioning Body as an options paper with some sense of the impact that this will have on Service Providers and budgets? This was confirmed. • When re-tendering we must be more robust with regard to the proposals for tendering. The group were advised that in the paper to the Commissioning Body there will be time line and the Commissioning Body will be asked to agree to the tendering for specific services at specific times. <p>Actions:</p> <ul style="list-style-type: none"> • A separate confidential paper to go to the Commissioning Body in January regarding savings on administrative costs. The CSG accepted that there should be a transition period to reduce staff levels in recognition of the demands for retendering in 1st and 2nd year. 	
6.	<p>A.O.B.</p> <p><u>Howard Cohn</u></p> <ul style="list-style-type: none"> • Where are with the contracting of Floating Support Services? District/Borough based Floating Support contracts will not be renewed after the end of March 2011. There 	

Item No	Details of the Item/decisions taken	CSG Member responsible for action
6. cont.	<p>will be a residual number of contracts that relate to East, West and Countywide covering specialist and generic services and there will be a proposal to extend those for a year and re-tender for floating support but in a configuration yet to be determined. Re Handy Persons Services SP will need to do a market test or tender in order to develop a social enterprise model.</p> <p><u>Bob Porter</u></p> <ul style="list-style-type: none"> The current format of this group is working really well and allows for more frank discussions. It is a shame that there are not more representatives present. 	

By: Angela Slaven, Director, Youth and Community Support Services.

To: Supporting People in Kent Commissioning Body

Date: 20 January 2011

Subject: Commissioning Body Memorandum of Understanding

Classification: Unrestricted

Recommendations

The Commissioning Body of the Kent Supporting People Programme is asked to agree to

1. the adoption of the revised Memorandum of Understanding
2. the proposals relating to the request for two further reports and to receive these reports at the next meeting of the Commissioning Body

Summary

This report presents a revised version of the Memorandum of Understanding. It also suggests that further consideration should be given to the opportunity to formally delegate control of the Supporting People budget to the Commissioning Body as well as strengthening the ability for negotiation between the Commissioning Body and the county council in securing adequate funding to meet the housing related support needs of vulnerable people within Kent

1.0 Introduction

1.1 The Commissioning Body last reviewed the Memorandum of Understanding in 2007. The national Supporting People Programme has changed significantly since 2007. The Programme in Kent is no longer subject to grant conditions, and is no longer ring fenced or part of Area Based Grant. The Programme is now within the Kent Revenue Formula Grant funding and allocation via the decision-making processes within the Kent County Council.

2.0. A new Memorandum of Understanding

2.1 The Memorandum of Understanding sets out the role and responsibility of the Commissioning Body including the decision making process. It should define the expectations of the Commissioning Body for the administration of the Programme.

3.0 The Core Strategy Group Recommendations

3.1 The Core Strategy Group expressed an endorsement of the working relationship that exists between the Supporting People Team, the County, the districts and boroughs, the Probation Trust, and Health. The Core Strategy Group considered a range of issues and recommends that the Commissioning Body request that reports are produced on two issues in relation to the Memorandum of Understanding and the relationship of the Commissioning Body with the County Council. The first report should address consideration of the opportunity within the Memorandum of Understanding on the relationship between the Commissioning Body and the County Council and the power to make a formal delegation of the control of the Supporting People Budget to the Commissioning Body.

3.2 The second report should address consideration of the opportunity to strengthen the ability for negotiation between the Commissioning Body and the County Council to secure adequate funding to meet the needs of vulnerable people who have a housing related support requirement.

3.2 Should the Commissioning Body approve this proposal, the Supporting People Team will enter into discussions with the Communities Directorate, Corporate, and elected members about how this objective could be affected.

4.0 Legal Implications

4.1 There may be potential legal implications in relation to the proposal outlined in 3.1 above which will need to be explored further by the Supporting People Team as part of the report preparation.

5.0 Consultation and Communication

5.1 The CSG representing the District authorities, the Probation and Health Services has been consulted on the nature and content of the agreement.

6.0 Risk and Business Continuity Management

6.1 The need for further consideration to be given to the potential risks and business continuity issues in relation to 3.1 above should the proposal be accepted.

7.0 Sustainability Implications

7.1 The need for further consideration to be given to the potential issues relating to providers and service users in relation to 3.1 above should the proposal be accepted.

8.0 Conclusion

8.1 The current drafting of the revised Memorandum of Understanding as attached to this report will enable the Commissioning Body to continue its business and to drive and influence the future direction of the Programme. The Core Strategy Group recommend that the further work outlined above is

undertaken to ensure that the Memorandum of Understanding enables and supports the emerging agendas in relation to localism and devolving decision making authority to accurately and appropriately reflect the Partnership arrangements that have existed between the county and the districts since 2003.

Claire Martin
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Background Documents

Memorandum of Understanding (Draft)

Appendix One

Memorandum of Understanding

1. Statement of Purpose

The Memorandum of Understanding is a statement of purpose between the appointed members of the Supporting People Commissioning Body in the delivery of housing related support services to the communities and residents of Kent. It aims to provide a basis for collaborative working and the effective investment of resources to ensure value for money and high quality service delivery.

2. Membership

- a) The twelve districts and boroughs will be represented by the portfolio holders for housing and/or the most senior housing officer within the respective district or borough.
- b) The portfolio holders and/or the most appropriate senior officers within the Customers and Communities, and Family, and Social Care Directorates.
- c) The most appropriate senior officer within public health.
- d) Members will make any declarations of interest which may impact on their ability to make decisions that are in the best interests of the Programme and vulnerable people within Kent.
- e) The Chair of the Commissioning Body will be the portfolio holder for the Directorate who has responsibility for the Programme.
- f) The Vice Chair will be a representative from one of the twelve districts and boroughs. The Vice Chair will be elected in the January meeting.
- g) The most appropriate senior officer within the Kent Probation Trust.

2. Administrative Arrangements

- a) The Commissioning Body will be administered by the County Council's secretariat in cooperation with the Kent Supporting People Team.
- b) The Kent Supporting People Team will provide reports which relate to the budgetary management, strategic and policy direction of the Programme, commissioning of services including contracting and tendering, performance management, and service user involvement and consultation.
- c) The Commissioning Body will agree a work Programme. The Core Strategy Group will recommend for decision any reports that come to the Commissioning Body.
- d) The Head of the Programme will ensure that the views of providers and service users are represented in reports which are submitted to the Commissioning Body.
- e) The Commissioning Body will meet once every quarter. The Commissioning Body will reserve the right to arrange an extraordinary meeting should circumstances dictate that this is required.

3. Relationships with Other Groups

- a) The Core Strategy Group will be responsible to the Supporting People Commissioning Body and the Commissioning Body will commission work from the Core Strategy Development Group.
- b) The Commissioning Body/Core Strategy Group will work alongside other bodies as appropriate.

Frequency of Meetings

- a) Frequency to be Quarterly
- b) Meetings to be held at Sessions House, Maidstone

Conflict of Interest

a) Members of the Commissioning Body must at all times operate under the Code of Practice for Members of the Committee on Standards in Public Life (January 2005).

b) The Conflict of Interest within the Code of Practice applies to the Commissioning Body, as follows:

- Compliance to the Seven Principles of Public Life
- Officers operate under these terms at the Commissioning Body
- All members should register any private or personal, pecuniary or non-pecuniary relevant interests which may influence or be perceived to influence his or her judgement. Oral declarations should be minuted. The chair will decide whether the declaration means withdrawal/inclusion from the meeting or discussion.

Decision-making

- a) The decisions will be made by consensus

Work Programme

- a) The Commissioning Body will be presented with a work programme by the Supporting People Team each June for their agreement.

Contacts:- Geoff.Mills@kent.gov.uk
Claire.Martin@kent.gov.uk

By: Angela Slaven, Director, Youth and Community Support Services.

To: Commissioning Body

Subject: Delivering the Saving Proposal

Classification: Unrestricted

Recommendations

The Commissioning Body of the Kent Supporting People Programme is asked to agree to

1. The implementation of Option Two for the delivery of the £7 million savings on the Supporting People Programme between 2011/2012 and 2012/2013.

Summary This report sets out a proposal to the Commissioning Body to deliver the requirement for a saving of £7 million over the next two years in response to the adjustment of investment and the impact of the Comprehensive Spending Review 2010. The Programme is profiled to achieve savings of £3 million in 2011/12 and £4m in 2012/13 by the county council. The Programme is proposing that we make savings of £3.5 million in 2011/12 and £3.5 million in 2012/13. However, the savings in 2011/12 would be offset by the utilisation of £3.2 million of reserves. The Commissioning Body would then need to deliver £7 million of savings in 2012/13. This report sets out the opportunities to achieve the savings and aims to provide a provisional assessment of the required activity and impact of a reduction in the grant allocation.

1.0 Introduction

1.1 The Kent Supporting Programme following the confirmation of the allocation of resources from the Kent Revenue Formula Grant allocation has planned to achieve £7 million of savings between 2011 and 2013. The County Council made a statement confirming the required savings on 6 January 2011.

1.2 This report addresses the implications of the savings and the activity required to achieve the savings. The Programme budget will reduce to just over £25 million by 2012/2013. The Programme anticipates that it will retain the reserves accumulated from the earlier ring fenced allocations. This provides an opportunity to deliver the required savings within a planned programme allowing for a period of notice being given to providers to prepare for the adjustment to the commissioning budget.

1.3 The figures provided in this report set out a detailed assessment of the allocation that has been made and the way in which the Commissioning Body can agree to the achievement of the savings and the delivery of the Strategy. The purpose is to give the meeting an understanding of the measures that are required, and to allow an opportunity to discuss how the savings can be delivered.

2.0 The Programme's Budgetary Position in 2011/12

2.1 It is anticipated that the Programme will require circa £32 million to meet its planned Programme of spend against commissioned services and administrative costs in 2011/12. The utilisation of reserves will make it possible to enter into discussion with providers during the forthcoming year to prepare for the future savings which are required in 2012/13. The Commissioning Body will need to agree in future meetings the commissioning plan exclusive of the priorities that have been agreed.

2.2 The priorities established in the 2010/15 Strategy are confirmed as: young people at risk schemes (Ashford, Canterbury, Dartford, Dover, Gravesham, Sevenoaks, Shepway, Thanet, Tunbridge Wells), refuges (Sevenoaks and Tonbridge and Malling), single homeless scheme (Thanet) substance misuse (Tonbridge and Malling), and teenage parents (Maidstone). All proposals have been identified to the Homes and Communities Agency as schemes that it is intended will be going forward to meet the priorities identified within the Programme. The majority of these schemes have floating support schemes that were commissioned in lieu of accommodation-based provision in order to safeguard investment for newly commissioned accommodation-based services. The Programme will ensure that the investment is secure for all of the schemes outlined above.

The first of these schemes for young people at risk is due to open in Tonbridge in April 2011. The Programme will as a consequence be reducing investment in floating support in Tonbridge and Malling for young people because the scheme will be opening.

2.3 The Programme has met the challenge to reduce its funding requirement from over £35 million in 2010/11 to just over £32 million in 2011/12. This has been largely achieved via the reduction in base budget spend through the decision not to renew the contracts for district and borough based floating support and further minor adjustments to some other contractual commitments. It will cease to fund service users in long term supported housing who have assured tenancies, but who no longer require housing related support.

2.4 The delivery of the savings will be "front loaded" however the largest amount of savings is to be delivered in year two (2012/13). The usage of reserves will cushion the effect in year one, leaving the more substantive challenge in year two, and a much lesser challenge in year three (it is likely that no further savings will be required). The reserves are anticipated to be approximately £3.2 million.

2.5 The Supporting People Team is confident that it can meet the residual savings required to bring the funding back into line with the allocation/savings requirement in year one. This will be achieved by contractual negotiations with providers, and the termination of a very few services where the provider's services are not considered to be strategically relevant. The Programme will need to deliver savings of £3.5 million in 2011/12, and a further £3.5 million in 2012/13. The savings in 2011/12 will be offset by the reserves and additional savings that the Supporting People Programme can find but this will mean that the Programme will in effect need to deliver all of its savings in year two (2012/13). In 2011/12 all remaining contracts may be extended by one year enabling the creation of a financial climate in which to commission the new contracts for 2012/13. The Programme will tender for floating support services, Home Improvement Agency services (if agreed) and will market test Handyperson service during 2011/12. It will ensure that needs-led services are commissioned within the funding envelope in time for 2012/13.

3.0 The Programme's Budgetary Position in 2012/13

3.1 The Programme will deliver further savings to achieve a reduction in spend to just over £25 million inclusive of the administrative costs in 2012/13. The proposal is to continue to invest in the majority of services, without compromising the overall viability of the Programme and the Supporting People Strategy 2010 – 2015.

4.0 Option One

4.1 Option One can either introduce a cut in funding across the whole Programme which reflects the £7 million savings requirement in 2012/13. This would entail a reduction in funding to all services of 22%. The adoption of Option One could materially affect the viability of services within the Programme. Appendix One represents an illustration of Option One.

5.0 Option Two

5.1 Option Two is a more strategic approach which reflects more accurately the outcomes that the Programme has been set up to achieve. Appendix Two represents an illustration of Option Two.

6.0 What Does Option Two Entail?

6.1 Sheltered Housing. The proposal relating to sheltered housing is that there is a reduction in the weekly rate. It is suggested that this should be adjusted by £2 per service user per week according to grading. This will result in a provider who achieves an "A" grade across the yet to be agreed range of performance management parameters being paid £10.24 as opposed to the current £12.24. A "B" grade provider would be paid £9.24 as opposed to the current £11.24. A "C" grade provider would be paid £8.24 as opposed to £10.24.

6.2 Alarms In line with achieving a more strategic approach to the savings it is suggested that a fresh direction is taken to the commissioning of alarms. Nationally, Supporting People Programmes are withdrawing from funding

alarms, or substantially reducing investment. The Kent Commissioning Body agreed the bench-marking of alarms and to bring service costs in line with the market test that was undertaken. The outcome concluded that alarms can be accessed for under £0.50 per service user, per week. The Commissioning Body agreed at that point in time to pay £1.50 per service user per week. It is now appropriate to ask the Commissioning Body to reconsider this decision, reflect the market rate and fund at £0.50 per service user per week.

6.3 Short-Term Supported Housing The Programme proposes to streamline the hourly rates of short term so that they converge to no higher than £17 per hour. The Programme reserves the right not to increase hourly rates that fall below £17 per hour.

6.4 Long-Term Supported Housing. The hourly rates in long term supported housing will be brought into line with those of short-term supported housing. There will be further work to reduce the number of hours delivered in long term supported housing. It is intended that the hours of delivery will be reduced to a maximum of 14 in 2012/13, and ten in 2013/14.

6.5 Handyperson Services. The Programme proposes to work with Handyperson services to consider opportunities for the development of a social enterprise model. This would be market tested by the Programme for Handyperson services in 2011/12 and would lead to the withdrawal of funding by the beginning of 2012/13. Income will need to be generated by charging service users who can pay and by generating charitable funding and surpluses for those who can't pay.

6.6 Home Improvement Agencies. The Programme intends to continue to fund Home Improvement Agencies (HIAs). The report on the Strategic Review of HIAs and Handyperson services will provide more detail following further discussion with districts and boroughs on preferred models of service delivery. The HIA services may need to be tendered and legal advice will be sought as to whether or not this is the case. If so they will be jointly tendered on the basis of the preferred model of service delivery. There may need to be a reduction in funding in services by 2013/14. These proposals were discussed by the Core Strategy Group in December and a consensus reached that this direction should continue to be pursued.

6.7 Extra Care Sheltered Housing. Extra care sheltered housing expenditure will be reduced to £36 per service per user per week as from April 2011. It is proposed that it will be brought into line with the per service user per week costs for sheltered housing as at 6.1 above in 2012/13.

6.8 Floating Support. Floating Support will be retendered in 2011/12. Floating Support will be rationalised within the funding envelope available in 2012/13. This will include an evaluation of the eligibility criteria, a review of generic and all specialist service delivery requirements, hours of delivery, hourly rates.

7.0 Payment By Results.

7.1 To achieve a more strategic approach to the savings the Programme will build on the work that has already been delivered including the further

development, subject to agreement by this Body, of payment by results. The initial model within sheltered housing has attracted a lot of interest from the Communities and Local Government Department, the Local Government Association, the National Housing Federation, and the Chartered Institute of Housing. It is proposed that this should be continued.

7.2 The Programme will work with providers and service users during 2011/12 to develop and refine a payment by results model. The payment by results model will be utilised to bring funding for short and long term supported housing within the required funding envelope in 2012/13. The payment by results model will utilise performance management information in order to ensure that service users are receiving outcome driven services, which are full to capacity, facilitate throughput, and which ensure that service users are successfully and appropriately resettled. This is referenced in more detail in a separate report.

8.0 The Programme's Budgetary Position in 2012/13

4.1 The Kent Supporting People Programme will have reduced expenditure to achieve the potential of its target of £7 million.

9.0 Savings Options

9.1 The Programme will reduce expenditure either by accepting Option One, an "across the board" leading to a 22% reduction in funding to all services in 2012/13.

9.2 Option Two, is a model that reflects the strategic priorities and a more strategic approach to delivering the savings.

9.3 Option Two will result in reduced funding to sheltered housing, alarms, short term and long term supported housing, floating support and Handypersons services, and the convergence of hourly rates. It will bring extra care sheltered housing expenditure into line with the funding of sheltered housing (Category Two). There will be a reduction in hours of service delivery to long term supported housing, and possibly floating support services that are currently specialist services. The Programme will need to consider the level of funding to Home Improvement Agencies, possibly via a tendered or negotiated process (depending upon the decision that is made in relation to the strategic review of HIAs). The Programme will develop a payment by results by working with a sub group of the Core Strategy Group. It will also involve providers and service users.

10.0 Legal Implications

10.1 The Programme has sought legal advice in relation to the non renewal of contracts relating to district and borough based floating support. The Steady State Contract has been evaluated and changes recommended and made by legal services. Steady State Contracts will be extended by one year in order to prepare for the reductions in funding/hours, and the changes to specifications in 2012/13.

11.0 Consultation and Communication

11.1 The Programme does not expect any sheltered, floating support, supported housing or alarm services to be materially impacted if Option Two is accepted. The Programme will commence a consultation process with key stakeholders, providers, and service users in relation to the changes proposed within long term supported housing, and extra care sheltered by 2012/13. This will be jointly planned and managed by the newly formed Customers and Communities and Families and Social Care Directorates. The Programme will also consult with key stakeholders, providers and service users about any further changes that need to be made to floating support. The Programme will also consult with key stakeholders and providers about changes proposed to Handyperson and Home Improvement Agency services.

12.0 Risk and Business Continuity Management

12.1 The Supporting People Programme will need to work with providers to ensure the viability of services is not impacted by the proposed changes. The Core Strategy Group has been asked to consider the financial and business risks that may arise and that should be reported to the Commissioning Body.

12.2 The team has achieved a level of savings in the current year with a reduction in its own expenditure from £735k to £689k. It will seek further reductions in 2011/12 by reducing expenditure to £659K. The Programme will continue to achieve further savings proportionate to the scale of the programme by 2012/13 (see separate report).

13.0 Sustainability Implications

13.1 The proposals within this report are set out on the basis that the Supporting People Programme will retain services for vulnerable people in Kent in co-operation with providers.

14.0 Conclusion

14.1 The Kent Supporting People Programme will achieve its savings targets between 2011/12 and 2012/13. It will have achieved this by endeavouring to sustain services across the current range but by ensuring that services are outcome focused and are delivering good quality services to vulnerable people in Kent. It will also ensure the strategic objectives of delivering services to young people at risk are secured and will endeavour to address the other strategic commissioning priorities identified within the Strategy. The Programme would ask the Commissioning Body to accept Option Two as set out in the recommendations above.

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Background Documents The Kent Supporting People Strategy 2010-2015

Appendix One - Illustration of Option One

To follow

Appendix Two - Illustration of Option Two

To follow

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By: Angela Slaven, Director, Youth and Community Support Services.

To: Supporting People in Kent Commissioning Body

Date: 20 January 2011

Subject: Performance Management in 2011/12 and 2012/13

Classification: Unrestricted

Recommendations

The Commissioning Body of the Kent Supporting People Programme is asked to agree that the Supporting People Team works with key stakeholders, providers and service users to develop

1. a payment by results model across all services for implementation post April 2012
2. a performance management framework which secures value for money and outcomes that meet the needs of commissioners and service users.

Summary This report sets out a proposal to the commissioning body to refine our management of performance within the Kent Supporting Programme. This will need to be developed within the context of the continued expectations of the Communities and Local Government Department in relation to performance and those of key stakeholders providers and service users

1.0 Introduction

1.1 The Communities and Local Government introduced a performance management framework for the Supporting People Programme across a range of parameters which are outlined in Appendix 1. In addition to participating in these national data collection systems, the Programme in Kent currently utilises the data it contributes and derives from them to monitor and manage the performance of providers and the outcomes achieved for service users. It also measures move-on and reconnection in co-operation with the Joint Policy and Planning Board (Housing).

1.2 The Local Area Agreement included two performance management targets that specifically related to the Supporting People Programme in Kent. These were in relation to the number of people who had successfully completed a programme of support. Following the cessation of this framework

Kent has expressed the intention to retain one of the Local Agreement targets relating to the Programme by the County, and District and Boroughs as part of the Vision for Kent agenda.

1.3 It is clear that the collection of data and target setting has undergone a sea change since the new coalition came into being. It is now a question of the local partnerships determining which targets should be measured, and what outcomes should be sought. It is therefore timely for the Commissioning Body to consider the development of a refined framework for performance management that is fit for purpose and supports the work that will address the achievement of savings whilst maintaining high quality provision. However the CLG has indicated that it will retain a requirement for local authorities to continue to provide information relating to the Supporting People Local System, Outcomes and Client Records.

2.0A Refined Performance Management Framework.

2.1 The Core Strategy Group and the Executive Forum of Providers have both discussed payment by results at recent meetings and support the development of a model across Kent. The Supporting People Team has proposed a model which offers a more comprehensive suite of indicators for the assessment of performance of providers (see Appendix Two). The Core Strategy Group would favour a payment by results model that is more outcomes driven ensuring that the Commissioning Body is able to assess and evaluate the impact of its investment. There needs to be a balance that enables the Team to manage the programme effectively whilst reflecting the priorities of the Core Strategy Group.

2.2 Discussions with providers note that they are understandably anxious and that they cite the need to retain a baseline level of funding to remain viable and are enabled to continue to deliver services to vulnerable people. They are concerned about the potential wholesale application of models that have been adopted elsewhere in the country. There has been considerable publicity relating to the current pilot associated with Peterborough Prison. This model is based upon a Social Impact Bond also known elsewhere as a Social Investment Bond. It is obviously important to implement a system that is workable in the context of delivering housing related support to vulnerable people and assuming that Kent retains the funding from the CLG, the Social Impact/Investment Bond models are unlikely to apply. It is imperative that the Programme is able to reassure providers via the careful management of future communication of any potential models that the Commissioning Body determines to adopt.

2.3 The Programme has an existing payment by results model within sheltered housing which is easy to deliver, understandable, and affordable. This is related to the Quality Assessment Framework (referenced at Appendix 3). Providers are currently paid £12.24 if they achieve an A grade against the Quality Assessment Framework.

2.4 The model we have adopted in Kent has attracted general interest from the National Housing Federation, the Chartered Institute of Housing, the CLG and the Local Government Association. They are interested to see where

Kent goes next in relation to payment by results. Payment by results is referred to in a separate paper.

3.0 Legal Implications

3.1 The need to investigate the legal ramifications that relate to any changes to contracts, specifications, or payment by results with the County's legal advisers will follow any decision to implement a model.

4.0 Consultation and Communication

4.1 The Supporting People Team will consult fully with all key stakeholders, providers, and service users prior to implementation.

5.0 Risk and Business Continuity Management

5.1 The Supporting People Team will produce a risk and business continuity issues log for the implementation of a refined performance management framework.

6.0 Sustainability Implications

6.1 The ability of providers to deliver services and for service users to receive a service that is viable will need to be considered.

7.0 Conclusion

7.1 The work of the Supporting People Team over recent years has focussed sharply on improving outcomes and value for money. The development of a model for Payment by Results lends itself to the current and future requirements of the Programme. The Programme has already taken the initiative by developing a specific model which relates to sheltered housing and has been able to evaluate its success. This report concludes that work should be commissioned to develop a model for Payment by Results for application across the entire Supporting People Programme within an appropriate timescale.

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Background Documents

None

Appendix One - Communities and Local Government Performance Management Overview

Appendix Two - Payment by Results

Appendix Three - Quality Assessment Framework

Appendix One - Communities and Local Government Performance Management Overview

The CLG have implemented a national performance management regime since the Programme's inception in 2003.

Elements of the regime include

Quality Assessment Framework – a framework of core service standards, which include health and safety, equality and safeguarding. The framework enables service quality to be tested and measured by grading services that are measured.

Client Records - records and monitors client characteristics about those who enter SP funded services. The information includes data about the routes by which vulnerable people come to access services both nationally and locally.

Outcomes Framework - Measures the outcomes for clients matched against their identified needs. The Framework is based on the DfES 'Every Child Matter's framework' and captures 5 high level outcomes (relating to economic well-being; enjoying and achieving e.g. participating in training or education activities; being healthy; staying safe and; making a positive contribution) with further indicators captured underneath.

Supporting People Local System (SPLS) – measures key performance indicators such as the proportion of users who successfully completed a period of support. Also captures throughput (number of people who have moved through a service), utilisation (whether or not the service is being used to its fullest capacity)

Data is completed by providers of Supporting People services. It is a condition of Supporting People contracts in Kent that providers submit this information.

Appendix Two

Payment by Results

What Is Payment By Results?

The Kent Supporting People Programme has already introduced a payment by results model for sheltered housing. Sheltered housing providers currently receive a payment based on the grading achieved against the Quality Assessment Framework.

How Could A Payment By Results Model Be Further Enhanced?

The intention is to expand this model so that sheltered, supported housing and floating support providers will be evaluated against a grade that reflects a range of performance management requirements. This means that providers could be evaluated rewarded and against a breadth of criteria. Examples are given below

Floating Support.

- Quality Assessment Framework (including welcome pack and support planning)
- Throughput
- Utilisation
- pending in relation to floating support allocations
- Closures
- failure to engage
- Outcomes
- Client Records
- Utilisation of appropriate documentation
- Accurate and timely workbooks

Supported Housing

- Quality Assessment Framework (including welcome pack and support planning)
- Throughput
- Utilisation
- Pending in relation to the nomination of service users to voids
- Failure to engage
- Outcomes
- Client Records
- Move-on
- Reconnection
- Resettlement
- Accurate and timely workbooks

Sheltered Housing

- Quality Assessment Framework (including welcome pack and support planning)
- Outcomes
- Accurate and timely workbooks

This list is not exhaustive and there may be a further range of performance management criteria which is considered appropriate to ensure the funding providers receive is being utilised to its full extent.

How is the Programme to Implement This?

The successful implementation of any new scheme will require consultation with service providers, stakeholders and service users.

However as an illustration, we could assess providers as “A” grade if they meet all or the majority of the performance management criteria. They could be a “B” grade if they achieved 66% of the performance management criteria, and “C” grade if they met 33% of the performance management criteria. This assessment could be based on a year’s performance criteria and the contractual payments could be linked to this grade.

Appendix Three

Quality Assessment Framework.

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Quality Assessment Framework

Core Service Objectives

Communities and Local Government
April 2009

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C1.1 Assessment and Support Planning.....3

C1.2 Security, Health and Safety.....11

C1.3 Safeguarding and Protection from Abuse.....15

C1.4 Fair Access, Diversity and Inclusion.....23

C1.5 Client Involvement and Empowerment.....30

Administering Authorities and service providers are strongly urged to read the guidance “Using the Quality Assessment Framework” when assessing services against these standards.

Quality Assessment Framework – Core Service Objectives

PLEASE NOTE: Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards. *The indicative evidence for levels A and B are not intended to act as a checklist or to prescribe the services that organisations would be providing if they were judged by reviewing officers to have an excellent or a good service. When assessing compliance with level A and B standards therefore, it is acceptable to cite alternatives to the evidence examples where these genuinely demonstrate that the standards are being met by other means.*

While meeting individual standards cannot guarantee the achievement of specific outcomes with clients, in general they will support the service to better meet outcomes in the domains indicated.

C1.1 Assessment and Support Planning
All clients receive an assessment of their support needs and any associated risks. All clients have an up-to-date support and risk management plan. Assessment and support planning procedures place clients' views at the centre, are managed by skilled staff and involve other professional and/or carers as appropriate.

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Achieve economic well-being, Enjoy & achieve, Be healthy, Stay safe</i> and <i>Make a positive contribution</i> .			
C1.1.1	The needs of applicants / clients and any inherent risks are assessed on a consistent and comprehensive basis prior to a service being offered, or very shortly afterwards as appropriate to the needs of the client group.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	<p>The needs and risk assessment policy and procedure is written down and reviewed in response to changing legislative or contractual requirements and at least every three years.</p> <p>The procedures state how clients will be involved.</p> <p>Staff understand and follow the procedures.</p> <p>There is a needs and risk assessment tool appropriate to the client group.</p> <p>The needs and risk assessment procedures are covered in staff induction</p>

Quality Assessment Framework – Core Service Objectives

			<p>and training programmes.</p> <p>Risk assessment procedures address:</p> <ul style="list-style-type: none"> • Risk to self • Risk to others (including staff and the wider community) • Risks from others (including staff and the wider community). <p>Needs and risk assessments take into account the views of other services as appropriate.</p> <p>Copies of all assessments are securely stored and accessible to relevant staff and clients.</p>	
<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>				
		<p>Level B</p>	<p>The service works constructively with risk and does not use risk assessment to exclude applicants inappropriately.</p> <p>Staff take into account individual clients' insight into the assessment of needs and risks.</p> <p>Specialist expertise is sought, where required, when conducting needs / risk assessments.</p>	
		<p>Level A</p>	<p>The needs and risk assessment policy and procedures encourage appropriate risk taking and discourage risk avoidance as the key feature of support delivery.</p> <p>Needs and risk assessments balance promotion of independence with effective risk management.</p> <p>The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review.</p>	

Quality Assessment Framework – Core Service Objectives

			Policy and procedure review can show the impact of client and stakeholder involvement.	
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Standard		Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Achieve economic well-being, Enjoy & achieve, Be healthy, Stay safe</i> and <i>Make a positive contribution</i> .				
C1.1.2	All clients have individual outcomes-focussed support and risk management plans that address the needs and risks identified by the assessment process.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
		Level C	<p>Support and risk management plans identify control measures to eliminate, minimise or respond to identified risks.</p> <p>Clear links can be seen between assessments of clients' needs and associated risks, and their support / risk management plans.</p> <p>Support plans incorporate individual outcomes which have been negotiated with clients and, if appropriate, carers, relatives or other advocates.</p> <p>In short-term accommodation based services, move on and resettlement needs are addressed from the start of service delivery.</p> <p>Support plans incorporate SMART objectives that are clearly understood by clients, as milestones towards achieving outcomes.</p> <p>Copies of all support / risk management plans are securely stored and accessible to relevant staff and clients.</p> <p>The service is aware of, and seeks to take into account, other care and support services provided.</p>	

Quality Assessment Framework – Core Service Objectives

		<i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i>	
	Level B	Support planning takes account of the wider needs of the client (beyond those being met directly in the service) which impact upon their need for support. The service proactively seeks to engage other agencies in supporting clients. Specialist expertise is sought, where required, when drawing up support / risk management plans.	
	Level A	Support and risk management plans complement any statutory care plan or support plans provided by other agencies. Support and risk management plans indicate that clients are encouraged to take reasonable risks in developing their independence. Mechanisms are in place between the service and external agencies to facilitate and enable joint working. Client outcomes are used to inform service development and strategic planning.	

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Stay safe and Make a positive contribution .			
C1.1.3	Needs / risk assessments and support / risk management plans are reviewed regularly on a consistent and systematic basis.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	The frequency of individual reviews reflects the needs and risks identified by the assessment process. Clients' files show that all clients' needs have been reviewed with appropriate

Quality Assessment Framework – Core Service Objectives

			<p>frequency and at least annually.</p> <p>Clients' files show that risk assessments have been reviewed with appropriate frequency, following an incident or significant change in circumstances, and at least annually.</p> <p>Individual support and risk management plans are revised in response to reviews to reflect changing outcomes and objectives.</p> <p>Support and risk management plans record intended review dates.</p> <p>Needs / risk assessments and support / risk management plans are quality monitored internally.</p> <p>Procedures state that reviews can be initiated at any time by a client and clients confirm this is the case.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>This right is explained within the service description, clients' handbook, etc.</p> <p>Staff are proactive in identifying and reviewing changing need and risk.</p>	
		Level A	<p>Reviews are co-ordinated to complement the reviews of any statutory care plan or support plans provided by other agencies.</p> <p>The service takes a case conference approach that includes engaging other services in reviews.</p> <p>Reviews of needs and risks (client outcomes) are used to inform service development and strategic planning.</p>	

Quality Assessment Framework – Core Service Objectives

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence	
<p>This standard supports the service to meet outcomes in the following outcome domains: <i>Achieve economic well-being, Enjoy & achieve, Be healthy, Stay safe and Make a positive contribution.</i></p>				
<p>C1.1.4</p>	<p>Needs and risk assessment, support planning and reviews involve clients and take full account of their views, preferences and aspirations.</p>	<p><i>Basic minimum requirements for an adequate service (Performance Level C)</i></p>		
		<p>Level C</p>	<p>There is evidence of clients' views being incorporated. Where clients disagree with assessments or reviews their views and reasoning are recorded. Clients have access to their file and are provided with a copy of assessments and reviews. The service complies with the Data Protection Act. Clients confirm that their views have been listened to and taken into account. Clients confirm that information is made available to them to meet their cultural, religious and/or lifestyle needs. Clients confirm that they are supported to meet their cultural needs and are able to observe their religious and cultural customs.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
<p>Level B</p>	<p>Needs and risk assessments, support plans and reviews seek to involve other professionals, carers, family and/or friends as the client wishes. The support plan is person centred.</p>			

Quality Assessment Framework – Core Service Objectives

		Level A	<p>Needs and risk assessment and support planning procedures balance respect for clients' views, preferences and aspirations with effective risk management.</p> <p>Staff are able to describe how they deal with disagreements and how they balance respect for clients' wishes with effective risk management.</p> <p>Clients confirm how they have been supported to access a range of services to meet their diverse needs – both those provided by the organisation and those available through other providers.</p>	
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Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Achieve economic well-being, Enjoy & achieve, Be healthy, Stay safe and Make a positive contribution.</i>			
C1.1.5	Staff carrying out needs and risk assessments and negotiating support and risk management plans are competent to do so.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	<p>Clients confirm that staff are sensitive to their particular needs and respect their right to choice and control.</p> <p>Staff are able to describe outcomes the service can help clients to achieve, and how they would support them to do so.</p> <p>Staff directly supporting clients have been trained in needs and risk assessment and support planning.</p> <p>Staff are able to describe the assessment and support planning processes and the rationale behind the key elements.</p> <p>Staff are experienced in working with those needs most commonly encountered amongst clients.</p> <p>Staff are knowledgeable about the range of</p>

Quality Assessment Framework – Core Service Objectives

			<p>services and support provided by their own organisation that may meet the needs of clients.</p> <p>Staff are appropriately inducted and supervised.</p> <p>Staff understand and are sensitive to the diverse needs of clients.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>Staff are aware of relevant individuals in key agencies and can give examples of regular information sharing.</p> <p>Staff are knowledgeable about and can facilitate access to support and services provided by other organisations that may meet the needs of clients.</p> <p>There is a variety of staff training targeted to meet the needs of the clients being supported.</p>	
		Level A	<p>Staff are able to explain the concept of “appropriate risk taking” and how this impacts on their work.</p> <p>Staff are committed to continuing professional development.</p>	

Quality Assessment Framework – Core Service Objectives

PLEASE NOTE: Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards. *The indicative evidence for levels A and B are not intended to act as a checklist or to prescribe the services that organisations would be providing if they were judged by reviewing officers to have an excellent or a good service. When assessing compliance with level A and B standards therefore, it is acceptable to cite alternatives to the evidence examples where these genuinely demonstrate that the standards are being met by other means.*

While meeting individual standards cannot guarantee the achievement of specific outcomes with clients, in general they will support the service to better meet outcomes in the domains indicated.

C1.2 Security, Health and Safety
The security, health and safety of all individual clients, staff and the wider community are protected.

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Be healthy , Stay safe and Make a positive contribution .			
C1.2.1	There is a health and safety policy which has been reviewed in the last three years and is in accordance with current legislation. <i>(Note: where they are not the same body, some of the legislative requirements may be the responsibility of the landlord rather than the support provider.)</i>	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	The health and safety procedures are covered in staff induction. Staff are able to describe the health and safety procedures and the impact on their work. Staff confirm they are consulted on the health and safety policy and procedures. Clients confirm they are aware of the health and safety procedures.
		<i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i>	
Level B	Clients confirm they have been consulted about health and safety policies and procedures and that their views are taken into account.		

Quality Assessment Framework – Core Service Objectives

			There is a range of information provided to clients about health and safety within the service.	
		Level A	<p>The service can demonstrate that changes have been made as a result of policy and procedure review.</p> <p>Policy and procedure review can show the impact of client involvement.</p> <p><i>In very short-term housing it may be more desirable or practical to involve an alternative person or organisation in lieu of clients (e.g. a principal referral agency). The intention is to bring a perspective that is external to that of staff involved in day-to-day service delivery.</i></p>	

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Be healthy , Stay safe and Make a positive contribution (at levels A and B only)			
C1.2.2	The service has a co-ordinated approach to assessing and managing security, health and safety risks that potentially affect all clients, staff and the wider community.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	<p>A formal procedure exists for conducting risk assessments.</p> <p>The procedure is documented and covers all potential risks (other than risks to <i>individual</i> clients) and appropriate information sharing mechanisms.</p> <p>Staff are able to describe the approach to risk assessment.</p> <p>Risk assessments of the service and any premises within which the service is delivered, are conducted at service inception and with appropriate frequency thereafter, following an incident, and at</p>

Quality Assessment Framework – Core Service Objectives

			<p>least annually.</p> <p>There are regular health and safety inspections to monitor risk.</p> <p>There are records of the inspections, participants, key findings and action taken.</p> <p>Where staff work alone, risk assessments specifically address the risks faced by lone workers and clients.</p> <p>There is a lone working policy that sets out procedures to minimise the risks to people working alone and to clients.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>Clients are involved in risk assessments (<i>other than individual client risk assessments</i>), which record their participation.</p>	
		Level A	<p>There is a dynamic approach to risk management and the service proactively looks to reduce risk, but is not risk averse.</p>	

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
<p>This standard supports the service to meet outcomes in the following outcome domains: Be healthy, Stay safe and Make a positive contribution (at levels A and B only)</p>			
C1.2.3	There are appropriate arrangements to enable clients to access help in crisis or emergency.	<p><i>Basic minimum requirements for an adequate service (Performance Level C)</i></p>	
		Level C	<p>Emergency call-out and out-of-hours support arrangements are documented and publicised to clients in ways appropriate to their needs.</p> <p>Clients and staff understand both the emergency call-out procedures and any out-of-hours support procedures.</p>

Quality Assessment Framework – Core Service Objectives

			<p>Clients and staff can correctly describe the arrangements.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		<p>Level B</p>	<p>The service equips clients and staff to deal with a crisis or emergency.</p> <p>There is a plan for dealing with any disruption to the service.</p> <p>Emergency numbers and other appropriate contact details are well publicised to clients in handbooks, leaflets, posters, etc.</p> <p>There is a periodic (at least annual) review of the effectiveness of emergency call-out or out-of-hours support procedures.</p> <p>Client feedback is actively sought about the effectiveness of current arrangements. <i>(This may not apply to very short-term housing)</i></p>	
		<p>Level A</p>	<p>The service can demonstrate that changes have been made to improve service delivery as a result of review or testing of current emergency call-out or out-of-hours support procedures.</p> <p>Review of these arrangements can show the impact of client involvement.</p> <p>Clients are involved in testing the effectiveness of current arrangements. <i>(This may not apply to very short-term housing).</i></p>	

PLEASE NOTE: Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards. *The indicative evidence for levels A and B are not intended to act as a checklist or to prescribe the services that organisations would be providing if they were judged by reviewing officers to have an excellent or a good service. When assessing compliance with level A and B standards therefore, it is acceptable to cite alternatives to the evidence examples where these genuinely demonstrate that the standards are being met by other means.*

While meeting individual standards cannot guarantee the achievement of specific outcomes with clients, in general they will support the service to better meet outcomes in the domains indicated.

C1.3 Safeguarding and Protection from Abuse

There is a commitment to safeguarding the welfare of adults and children using or visiting the service and to working in partnership to protect vulnerable groups from abuse.

There is a difference between safeguarding vulnerable adults/children and adult/child protection. Safeguarding is everybody's responsibility, and includes measures to prevent or minimise the potential for abuse occurring. Protection is a statutory responsibility in response to individual cases where risk of harm has been identified.

When it comes to a service's safeguarding responsibilities towards children, it may be helpful to think of services as one of four types:

- Services where children are known to live
- Services where children may live
- Services where children may visit
- Services where children neither live or visit, but clients may have access to children

While we recognise the variable degree of contact different services will have with children, **all** the following standards are relevant to **all** services. How you implement them, and how detailed your policies are, may depend on the nature of this contact.

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence	
This standard supports the service to meet outcomes in the following outcome domains: Be healthy, Stay safe and Make a positive contribution (at level A only).				
C1.3.1	There are robust policies and procedures for safeguarding and protecting adults and children, that are less than three years old and in accordance with current legislation.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
		Level C	The procedures address both adults and children and comply with good practice. (See guidance) There are recruitment checks, including professional references and CRB checks, for staff and volunteers. There is a whistle blowing procedure in accordance with the Public Interest Disclosure Act 1998. Individual client risk assessments address the potential for abuse from others. Lone working risk assessments address the increased risk to clients. CRB checks are updated in accordance with contractual requirements.	
		<i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i>		
		Level B	There is a periodic (at least annual) review of the effectiveness of safeguarding and protection from abuse policies and procedures and their implementation. The policy and procedure review seeks to identify and address disincentives to reporting concerns. CRB checks are updated every three years.	
Level A	There is a planned approach to working with other agencies.			

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			<p>The service can demonstrate that key safeguarding partners are involved in policy and procedure review.</p> <p>The service can demonstrate that changes have been made to improve service delivery as a result of review or following an incident.</p> <p>Policy and procedure review can show the impact of client and stakeholder involvement.</p>	
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Standard		Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Be healthy, Stay safe and Make a positive contribution (at level A only).				
C1.3.2	Staff are aware of policies and procedures and their practice both safeguards clients and children and promotes understanding of abuse.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
		Level C	<p>Prompt action is taken in response to individual concerns from staff, clients or others and appropriate support is provided to them.</p> <p>Support is provided to victims of abuse.</p> <p>The service works appropriately with alleged perpetrators.</p> <p>A log records details of cases and outcomes and shows that appropriate action is taken, including reporting to appropriate authorities, (including the service commissioner and contract manager.)</p> <p>Safeguarding and protection from abuse policies and procedures are covered in staff induction and training programmes, and integrated into staff management practices.</p>	

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			<p>Staff are able to describe the policies and procedures, the reasons behind them and the implications for their work.</p> <p>Staff are able to describe how their practice promotes safeguarding.</p> <p>Staff and volunteers can describe how they would report any actual or suspected abuse or neglect, and who incidents should be reported to.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>Staff are appropriately supported through supervision in dealing with abuse cases.</p> <p>Staff are aware of the potential impact on themselves and clients of being involved in abuse cases.</p> <p>Staff receive specialist training appropriate to the needs of the client group.</p>	
		Level A	<p>The service is proactive in promoting and sharing good practice beyond the service on safeguarding vulnerable adults and children.</p> <p>The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review.</p> <p>Policy and procedure review can show the impact of client involvement.</p>	

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Be healthy, Stay safe and Make a positive contribution (at level A only).			
C1.3.3	Staff are made aware of and understand their professional boundaries and their practice reflects this.	<p><i>Basic minimum requirements for an adequate service (Performance Level C)</i></p> <p>Level C</p> <p>There is a documented risk assessment addressing the potential for personal benefit through abuse and this has been reviewed in the last three years.</p> <p>There are procedures to prevent staff from personal benefit when working with vulnerable people.</p> <p>The nature and limits of relationships between staff and clients, children of clients or children visiting the service are covered in staff induction and training programmes, and integrated into staff management practices.</p> <p>Staff and volunteers are able to describe the policies concerning relationships with clients, children of clients or children visiting the service.</p> <p>Staff and volunteers are able to explain how their practice maintains effective boundaries.</p> <p>A Code of Conduct (or similar document) makes clear appropriate boundaries for staff and volunteers.</p> <p>Information to clients makes clear what are appropriate boundaries for staff and volunteers.</p>	
<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>			

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		Level B	Staff receive appropriate training. There is a periodic (at least annual) review of the effectiveness of the policies and their implementation. The service has mechanisms in place that reinforce professional boundaries.	
		Level A	The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review. Policy and procedure review can show the impact of client involvement.	

Standard		Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Be healthy, Stay safe and Make a positive contribution.</i>				
C1.3.4	Clients understand what abuse is and know how to report concerns		<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	<p>The safeguarding and protection from abuse procedure is promoted in ways appropriate to clients' needs.</p> <p>Clients understand what constitutes abuse and know to whom they should report any concerns.</p> <p>Clients confirm they know what support they can expect to receive if they report a concern.</p> <p>Clients know how to report concerns outside the organisation.</p> <p>Clients confirm that they feel confident that concerns will be dealt with appropriately.</p> <p>The service feeds back appropriately on action that has, or has not, been taken, and</p>	

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		why.	
		<i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i>	
	Level B	The service promotes safeguarding and protection with clients on a regular basis e.g. through house meetings or key working.	
	Level A	<p>Clients are able to influence how they receive information about safeguarding and protection from abuse and the reporting mechanisms for raising concerns.</p> <p>The service can demonstrate that changes have been made in response to client feedback.</p>	

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Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Enjoy and achieve, Be healthy, Stay safe and Make a positive contribution (at level A only).			
C1.3.5	The service is committed to participating in a multi-agency approach to safeguarding vulnerable adults and children	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>	
		Level C	<p>In services specifically working with children and young people there is a designated, appropriately trained and supported child protection lead.</p> <p>In services specifically working with children and young people, there is an awareness of the Common Assessment Framework (CAF) and how this relates to, and is separate from, child protection.</p> <p>The service works jointly with other appropriate agencies to promote the safeguarding of adults and children.</p> <p>Where appropriate, the service engages</p>

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			with local MAPPA and MARAC arrangements.(See guidance) The service engages in multi-agency working in response to specific cases of adult or child protection.	
		<i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i>		
		Level B	The service engages in multi-agency working to promote safeguarding of vulnerable adults and children. In services specifically working with children and young people, there is an understanding of the implementation of the Common Assessment Framework and the service’s potential role within it.	
		Level A	There are information sharing protocols in place and the service proactively engages with local safeguarding partnerships. In services specifically working with children and young people, the service is actively engaged in the Common Assessment Framework.	

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PLEASE NOTE: Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards. *The indicative evidence for levels A and B are not intended to act as a checklist or to prescribe the services that organisations would be providing if they were judged by reviewing officers to have an excellent or a good service. When assessing compliance with level A and B standards therefore, it is acceptable to cite alternatives to the evidence examples where these genuinely demonstrate that the standards are being met by other means.*

While meeting individual standards cannot guarantee the achievement of specific outcomes with clients, in general they will support the service to better meet outcomes in the domains indicated.

C1.4 Fair Access, Diversity and Inclusion
There is a demonstrable commitment to fair access, fair exit, diversity and inclusion. The service acts within the law and ensures clients are well-informed about their rights and responsibilities.

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Enjoy and achieve, Be healthy, Stay safe and Make a positive contribution.			
C1.4.1 Fair access, fair exit, diversity and inclusion are embedded within the culture of the service and there is demonstrable promotion and implementation of the policies.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
	Level C	<p>There is a policy (or policies) and procedures that cover:</p> <ul style="list-style-type: none"> • equal opportunity, diversity, anti-discriminatory practice and harassment • discrimination on any grounds that cause a person to be treated with injustice (see guidance) • clients and staff • access to services and employment and promote community cohesion and social inclusion. <p>The policies and procedures have been reviewed in the last three years and are in</p>	

		<p>accordance with current legislation and the CRE Code of Practice on Racial Equality in Housing.</p> <p>There is a recruitment and selection policy that aims to eliminate discrimination in recruitment processes.</p> <p>There is a planned approach to managing and responding to concerns or incidents.</p> <p>The service has its own Equalities Scheme (which includes the above policies and procedures) or signs up to the local authority one. (See guidance)</p> <p>The service has its own Equalities Action Plan and:</p> <ul style="list-style-type: none"> • collects equalities data on successful and unsuccessful applications and exits from the service, and • reviews the equalities data, sets targets to address gaps or weaknesses and monitors performance against these. <p>Equality and diversity policies and procedures are covered in staff induction and training programmes, and integrated into staff management practices.</p> <p>Staff are able to describe the policies and procedures, the principles behind them and the implications for their work.</p> <p>Staff understand and are sensitive to the diverse needs of clients.</p> <p>Policies and procedures are communicated to clients in ways appropriate to their needs and clients can confirm that this happens.</p> <p>Clients confirm that information is made available to them to meet their cultural, religious and/or lifestyle needs.</p>	
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			<p>Clients confirm that they are supported to meet their cultural needs and are able to observe their religious and cultural customs.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		<p>Level B</p>	<p>There is a periodic (at least annual) review of the effectiveness of the equal opportunities and anti-discriminatory policies and plans.</p> <p>Equality access targets are set for under-represented groups as identified by the Equalities Action Plan, and performance monitored.</p> <p>Equality Impact Assessments are conducted when producing or reviewing any policy, procedure, function, service or strategy.</p> <p>Records show that staff are specifically recruited or trained to ensure their understanding and sensitivity to the diverse needs of clients.</p> <p>The communication needs of clients are catered for.</p> <p>Staff support clients to understand the occupancy agreement and other documents they have signed and to know their rights and responsibilities.</p>	
		<p>Level A</p>	<p>The harassment procedures detail effective management responses when working with victims and alleged perpetrators.</p> <p>There is a co-ordinated multi-agency approach to preventing and challenging bullying, harassment and discrimination.</p> <p>The service can demonstrate changes</p>	

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			<p>have been made to improve service delivery as a result of policy and procedure review.</p> <p>The service can demonstrate changes have been made to improve service delivery as a result of monitoring performance.</p> <p>Policy and procedure review show the impact of client involvement.</p> <p>Resources are made available to support equalities and diversity activity.</p>	
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Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Make a positive contribution</i> and <i>staying safe</i> .			
C1.4.2	<p>The assessment and allocations processes have been reviewed in the last three years and ensure fair access to the service.</p>	<p><i>Basic minimum requirements for an adequate service (Performance Level C)</i></p> <p>Level C</p> <p>There is a documented and objective procedure that specifies how enquiries and applications are processed, assessed and prioritised, and how decisions are communicated to applicants.</p> <p>There is an up-to-date and accurate description of the service that is actively promoted, detailing whom it is for and how it can be accessed.</p> <p>The eligibility criteria, means of prioritising applications and the application process are written in plain English and other formats appropriate to the client group.</p> <p>The communication needs of clients are catered for in helping them to understand the information.</p> <p>Unsuccessful applicants are informed of reasons for refusal and signposted to more</p>	

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			<p>appropriate services or back to the referral agency.</p> <p>There is a right of appeal against decisions arising from assessments.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>Particular attention is paid to ensuring fair access to under-represented groups as identified by the Equalities Action Plan.</p> <p>The eligibility criteria and application process are actively promoted to relevant agencies and the wider community.</p>	
		Level A	<p>The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review.</p> <p>Policy and procedure review can show the impact of client and stakeholder involvement.</p> <p>Fair access is assured by independent audit.</p> <p>There is a proactive approach to working with service commissioners in identifying local need and adapting services accordingly.</p>	

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Enjoy and achieve, Be healthy, Stay safe and Make a positive contribution.</i>			
C1.4.3	There is a commitment to ensuring fair exit from the service.	<p><i>Basic minimum requirements for an adequate service (Performance Level C)</i></p> <p>Level C</p> <p>The service has clear procedures for staff to follow when terminating a service, including ending tenancies or licences.</p> <p>In short-term accommodation based services, move on and resettlement needs are addressed from the start of service delivery.</p> <p>In short-term accommodation-based services, there is a move-on application process which has been reviewed in the last three years and includes:</p> <ul style="list-style-type: none"> • how to apply • the eligibility criteria for move-on accommodation, and • the means of prioritising applications. <p>The move-on application process is written in plain English and other formats appropriate to the needs of the client group.</p> <p>Staff comply with the law and good practice when terminating the service.</p> <p>In short-term accommodation based services, the service seeks to achieve planned moves wherever possible.</p> <p>Clients confirm that they are given information about possible grounds for termination of the service, including eviction and withdrawal of floating support.</p>	

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			<p>Clients are given information on how to get independent advice if they are threatened with termination of service and are signposted to other appropriate services.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>The service works creatively to improve fair exit and move on outcomes for individual clients into the community.</p>	
		Level A	<p>In short-term accommodation based services, there is a move on strategy. The service can demonstrate that changes have been made as a result of policy and procedure review. Policy and procedure review show the impact of client and stakeholder involvement. Fair exit is assured by independent audit. The service works with service commissioners in developing strategic solutions to improve fair exit and move on outcomes for clients into the community.</p>	

PLEASE NOTE: Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards. *The indicative evidence for levels A and B are not intended to act as a checklist or to prescribe the services that organisations would be providing if they were judged by reviewing officers to have an excellent or a good service. When assessing compliance with level A and B standards therefore, it is acceptable to cite alternatives to the evidence examples where these genuinely demonstrate that the standards are being met by other means.*

While meeting individual standards cannot guarantee the achievement of specific outcomes with clients, in general they will support the service to better meet outcomes in the domains indicated.

C1.5 Client Involvement and Empowerment
<p>There is a commitment to empowering clients and supporting their independence. Clients are well informed so that they can communicate their needs and views and make informed choices. Clients are consulted about the services provided and are offered opportunities to be involved in their running. Clients are empowered in their engagement in the wider community and the development of social networks.</p> <p>Involvement and empowerment will mean different things to different people. Some clients wish not to get involved at all and some wish to play a very active role, for example in future planning and governance. It is the responsibility of each provider to offer an opportunity to each individual to get involved.</p>

Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Enjoy and achieve</i> and <i>Make a positive contribution</i>			
C1.5.1 People wanting to access a service can make an informed decision before accepting an offer and know about the range of services and support available to meet their needs.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
	Level C	<p>Clients confirm that they were able to visit the service and meet with staff before accepting an offer, where appropriate.</p> <p>Staff have a good understanding of what the support service can do to meet clients' needs.</p> <p>Clients confirm that they know about the range of services provided by the support</p>	

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			<p>provider to meet their needs</p> <p>Clients and referral agencies confirm that information about the service is available in plain English and formats appropriate to the needs of the client group.</p>	
<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>				
		<p>Level B</p>	<p>The service promotes and advertises to clients the range of services to meet their diverse needs – both those provided by their support provider and those available through other providers.</p> <p>Client feedback is actively sought on the quality of information about the service.</p> <p>Clients confirm that they:</p> <ul style="list-style-type: none"> • were able to meet with existing clients before accepting an offer, where appropriate • were provided with a range of information about the service prior to take up • are offered opportunities to have a say in what kind of information they want, and in what formats. 	
		<p>Level A</p>	<p>The service can demonstrate that changes have been made to improve the quality of information in response to client / stakeholder feedback.</p> <p>Clients are offered opportunities to play a part in producing information.</p> <p>Clients confirm that they understand how to access a range of services to meet their diverse needs – both those provided by their support provider and those available through other providers and are able to</p>	

			describe the choices available to them.	
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Standard		Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: Enjoy and achieve, Be healthy, Stay safe and Make a positive contribution.				
C1.5.2	Clients are consulted on all significant proposals which may affect their service and their views taken into account.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
		Level C	<p>A statement of rights and responsibilities is in place, which includes the right to be consulted.</p> <p>Formal and/or informal consultation takes place and proposals are developed or amended where possible in the light of client feedback.</p> <p>Clients confirm that they receive feedback on changes that have or have not been made, and why.</p>	
		<i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i>		
		Level B	<p>Client feedback is actively sought on their preferred methods of consultation.</p> <p>Clients are offered a range of opportunities to give their views, make comments, and offer ideas - both individually and in groups - about the services provided.</p> <p>Mechanisms for consultation are wide-ranging and aimed at securing the inclusion of all clients, to the extent and at the level they wish to be involved.</p> <p>Appropriate support is available to enable clients with different needs to be consulted. (e.g. travel expenses, signing, audio loop systems).</p>	

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		Level A	<p>Consultation focuses on clients' concerns and they have opportunities to play an active role in shaping current and future service delivery.</p> <p>Mechanisms for consultation are open and flexible so that clients can raise their own issues and concerns and not just respond to what the service defines as important.</p> <p>Forums and opportunities are available so that clients can come together, to share experiences and discuss what will meet their needs.</p> <p>Decision-making mechanisms facilitate client involvement in designing and developing services and setting quality standards.</p> <p>There is a periodic (at least annual) review of the effectiveness of consultation mechanisms and the outcomes achieved.</p> <p>The service can demonstrate that changes have been made to improve consultation mechanisms in response to client feedback and review.</p>	
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Standard		Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Enjoy and achieve, Be healthy, Stay safe and Make a positive contribution.</i>				
C1.5.3	The service encourages clients to do things for themselves rather than rely on staff.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
		Level C	<p>The service has a clear, documented approach to empowering clients and supporting their independence.</p> <p>Assessments of client risk balance promotion of independence with effective</p>	

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		<p>risk management.</p> <p>Support plans or key working records indicate that clients are encouraged to take reasonable risks to develop or maintain their independence.</p> <p>Staff understand the approach and can describe how they work with clients to promote independence.</p> <p>Independence is promoted through appropriate skills training and/or equipment and adaptations and services relevant to individual needs.</p> <p>Clients can provide examples of specific initiatives that have expanded their skills, confidence and self-esteem.</p> <p>Empowerment and promoting independence are covered in staff induction and training programmes, and integrated into staff management practices.</p> <p>Clients confirm that they are empowered to make their own informed choices about friendships and intimate relationships, in line with the existing risk assessment.</p> <p>Clients confirm that they are encouraged to take part in active decision making about their home and the services they receive.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>	
		<p>Level B</p> <p>There is a documented approach to risk taking that enables staff to understand the meaning of “appropriate risk taking” and discourages risk avoidance as the key feature of support planning.</p> <p>The approach to support focuses on individual strengths and supports people to</p>	

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			<p>develop their own solutions to problems. Clients and staff can confirm that this happens.</p> <p>Clients confirm that they are able to visit or receive friends and family as and when they choose. <i>(When applying this standard account must be taken of safeguarding and health and safety considerations and clients' support plans.)</i></p>	
		Level A	<p>There is a strategic approach to promoting independence.</p> <p>Expertise and resources are available to enable clients to develop their talents and abilities.</p>	

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Standard	Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
<p>This standard supports the service to meet outcomes in the following outcome domains: <i>Achieve economic well-being, Enjoy and achieve, Be healthy and Make a positive contribution.</i></p>			
<p>C1.5.4</p> <p>Clients are encouraged to consider ways in which they can participate in the wider community.</p>	<p><i>Basic minimum requirements for an adequate service (Performance Level C)</i></p>		
	Level C	<p>Support plans show that staff and clients have discussed any wishes for employment, training, education, social and leisure activities outside of the service.</p> <p>Clients confirm that information concerning the availability of such services, activities and opportunities is made readily available in ways appropriate to their needs.</p> <p>The service actively encourages and promotes links with friends and family, where appropriate.</p> <p>Support plans reflect that clients have been enabled to overcome barriers to participating in the wider community, where</p>	

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			<p>appropriate.</p> <p>With the exception of certain services (see guidance), clients can confirm that there are no policies or rules that prevent them from visiting or receiving friends and relatives.</p> <p>Staff induction and training highlight the importance of engagement in the wider community and the steps to be taken to promote it.</p> <p>Clients are encouraged to play an active part in their local community and democratic structures.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		Level B	<p>Clients confirm that they are able to participate in activities within the wider community such as leisure services, training, education and employment, and the service provider provides appropriate support to enable this.</p> <p>Clients confirm that they are encouraged and supported to participate in services in the wider community.</p> <p>The service provides clients with appropriate confidence building and skills development to participate in the wider community.</p> <p>The service encourages client access to skills training, counselling, advocacy etc. <i>(These may be provided directly by the service provider or by other external agencies.)</i></p>	
		Level A	<p>There is a strategy for maximising clients' participation in the wider community.</p>	

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			<p>Staff understand and work to deliver the strategy with clients.</p> <p>Clients are involved appropriately and effectively in such activities as:</p> <ul style="list-style-type: none"> • staff recruitment • business planning • review of the service description and its aims and objectives • management structures e.g. board of management, sub-committees, AGMs, community forums, etc. 	
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Standard		Performance Level	Essential requirements (C) or Indicative evidence (A / B)	Evidence
This standard supports the service to meet outcomes in the following outcome domains: <i>Make a positive contribution.</i>				
C1.5.5	There is a written complaints policy and procedure that has been reviewed in the last three years and this is used as a tool for service development.	<i>Basic minimum requirements for an adequate service (Performance Level C)</i>		
		Level C	<p>The complaints procedure is as straightforward as possible.</p> <p>The complaints procedure specifically addresses complaints from external individual or organisations.</p> <p>Action is taken in response to individual complaints.</p> <p>A log records outcomes to complaints and shows that appropriate action is taken within reasonable response times.</p> <p>Outcomes of complaints are fed back to complainants.</p> <p>There is an appeals process.</p> <p>The procedure is available in plain English and other formats appropriate to the needs of the client group. (See guidance)</p> <p>The procedure is publicised in ways appropriate to the needs of the client group e.g. in client induction or welcome packs, handbooks, notice boards, etc.</p>	

Quality Assessment Framework – Core Service Objectives

			<p>In accommodation-based services where the landlord and support provider are not the same body, the procedure clearly states who to complain to about the support service.</p> <p>Staff receive training in dealing with and encouraging complaints.</p> <p>Staff, clients and third parties know how to use the procedure and are empowered to do so.</p> <p>Clients confirm that they feel able to complain and are confident that their complaint will be dealt with in a positive manner.</p> <p>Independent advocacy is sought to help clients, carers and family members to use the complaints system, where appropriate.</p>	
		<p><i>Evidence examples for Level B and A services are included below to give an indication of what we would expect of services delivered to such standards</i></p>		
		<p>Level B</p>	<p>The organisation and its staff see complaints as a positive tool.</p> <p>There is a periodic review (at least annual) of complaints received.</p> <p>There is a periodic review (at least annual) that asks whether there is sufficient awareness of the procedure and what would inhibit complaints.</p>	
		<p>Level A</p>	<p>The service can demonstrate that reviews of policy, procedure and complaints received have been used to improve service delivery.</p> <p>Reviews of policy, procedure and complaints received can show the impact of client and stakeholder involvement.</p>	

REPORT

By: Angela Slaven – Director of Youth and Community Support Services, Communities Directorate

To: Supporting People in Kent Commissioning Body

20 January 2011

Subject: Finance Report – Administration Grant

Classification:- Unrestricted

Recommendations

- 1). The Commissioning Body are asked to note above report and attached appendix (1&2)
- 2). To agree to endorse the decision by Kent County Council to utilise the reserves to fund the Commissioning Team in 2010/11

Summary:-

The Kent Supporting People Programme Administration Grant funding of £735k was withdrawn by the Communities and Local Government Department in 2010/11 and the implications of this were discussed with the Commissioning Body in September 2010.

This paper outlines the funding requirement from reserves to fund the Kent Supporting People Team in 2010/11 and seeks the endorsement of the decision to utilise the reserves to fund the team made by Kent County Council.

1.0 Introduction

1.1 The administration grant which amounted to £735k was removed by the Communities and Local Government Department in June 2010 with the expectation that these costs are now managed within overall Local Authority funding for Supporting People.

1.2 A reduction in staffing numbers and related staff and non pay expenditure reduced the commitment against the grant and in December 2010 the forecast cost of the Team is marginally under £690k and a summary statement of these costs and staffing structure is provided in Appendix (1 & 2).

2.0 Conclusion

3.1 The Kent Supporting People Programme has had to adjust to the removal of the administration grant by the CLG, and to find an alternative methodology for funding the team.

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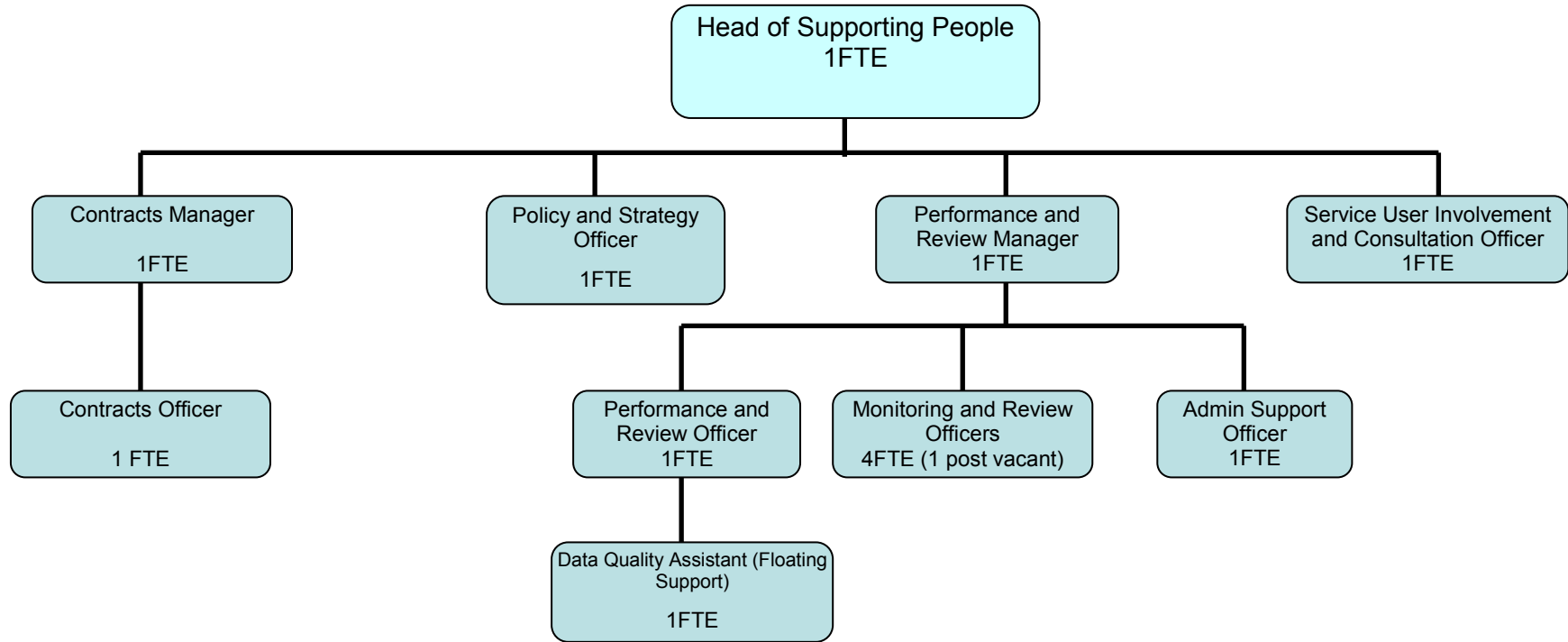
Appendix 1 Supporting People Programme Forecast Outturn December 2010/11

Appendix 2 Supporting People team - Current structure 2010/11

Appendix 1 Supporting People Programme Forecast Outturn December 2010/11

Supporting People Programme Forecast Outturn December 2010/11	Forecast Outturn
	£
Staff Pay	
Staffing	585,550
Agency Staff	8,322
	593,872
Premises	2,387
Fees - Private Sector Contracts	10,000
Central support, finance, Legal etc	43,979
Other Running Costs	
Transport	27,416
Printing & Stationary/ IT Costs	12,249
Total Expenditure	689,902

Appendix 2 Supporting People in Kent current structure 2010-11



Supporting People in Kent – Glossary of Terms

Abbreviation or Term	Description
Accommodation based	The housing related support being delivered is linked to specific properties with a service. These properties may include self-contained or shared accommodation. It may also include staff based in an office or a visiting arrangement. Accommodation based services are also known as “Supported Housing”
Accreditation	This is a regular assessment of a support provider to check if they are able to provide a good quality Supporting People service
Administering Authority (AA) or Administering Local Authority (ALA)	The local authority which receives the Supporting People (SP) grant and administers contracts for the SP services on behalf of the Commissioning Body
Area-Based Grant (ABG)	Area Based Grant is a general grant allocated directly to local authorities as revenue funding to areas. It is allocated according to specific policy criteria rather than general formulae. Local authorities are free to use the all of this non-ringfenced funding as they see fit to support the delivery of local, regional and national priorities in their areas.
Audit Commission	An independent body responsible for ensuring that public money is used responsibly, economically and effectively
Banding	All floating support applications received onto the central waiting list by the Supporting People team are prioritised or banded according to the needs of the individual who needs support. There are 3 bands A, B and C and they are described in the Floating Support protocols
Band A	Those individuals who are in highest need of floating support are banded A on the central waiting list. They include those who <ul style="list-style-type: none"> • Are under threat of eviction • Experiencing domestic abuse or harassment • Are under 18 • Sleeping rough, in their first tenancy, setting up a new dwelling or going to move-on accommodation after a period in an accommodation-based service • Are vulnerable due to having been institutionalised
Band B	Those individuals who are in medium need of floating support are banded B on the centralised waiting list. They include those who <ul style="list-style-type: none"> • Need help managing finances • Lack parenting skills or life skills
Band C	Those individuals who are in lowest need of floating support are banded C on the central waiting list. They include those who <ul style="list-style-type: none"> • Need advocacy, advice and assistance with liaison • Are unable to maintain themselves or their property
Benchmarking	A comparison of similar services by quality, performance and cost. This is one of the ways of ensuring the quality of services provided in Kent
Best Value	A duty on local authorities to assess and review the services they provide for local people and improve them by the best means available. This must be done in consultation with the people who use the services and the wider local community
BME	Black and Minority Ethnic
Block Contract	The purchase of support services for more than one person, usually before the service is delivered
Block Gross Contract	A contract for a support service which is delivered for a short period, i.e. less than two years. Payments are made for a fixed number of service users. Service users are not charged for the support.
Block Subsidy Contract	A contract for a support service which is usually long-term or permanent e.g. sheltered housing. Grant payments to the provider will vary, depending on how

Abbreviation or Term	Description
	many people receiving the support service qualify for the subsidy at any given time. Providers tell the SP team on a monthly basis who has moved in and out of their service, and the subsidy payment is adjusted accordingly. Some service users may be charged for this service. In Kent there are very few of these contracts, having largely been replaced by <i>fixed capacity contracts</i>
Capacity	The total number of support packages or accommodation with support units deliverable at any one time.
Choice Based Lettings (CBL)	A new system in the allocation of social housing designed to offer more choice and involvement for customers in selecting a new home. Available social rented housing is let by being openly advertised, allowing customers to 'bid' or 'register an interest' in those homes which are advertised widely in the neighbourhood (e.g. in the local newspaper or on a website).
Client Record Form	Forms used to monitor all new clients who use Supporting People services. The statistics are then collated by The Centre for Housing Research (CHR) and data is used to help SP teams identify needs. Details available at www.spclientrecord.org.uk These are completed by providers each time they take on a new client. Details such as previous type of accommodation, client group and ethnicity are recorded so Supporting People teams can monitor who is using the services. No personally identifying details are recorded
Commissioning Body	The group is made up of representatives from all of the partners involved in Supporting People, such as Housing, Social Services, Health (PCT) and Probation. Its role is to strategically direct and scrutinise the programme.
Contract Monitoring	Contract monitoring is the regular process undertaken by Administering Authorities to ensure that providers comply with the requirements of the contract and are performing effectively. Contract monitoring is an extremely important process as it provides regular information to update authorities' understanding of the quality and effectiveness of Supporting People services and the Value for Money the programme achieves. In Kent, much of the contract monitoring is conducted by local Monitoring and Review (M & R) Officers.
Contract Schedules	These are part of the Supporting People contract and contain details of the services to be provided in the contract and the cost of each service
Core Strategy Development Group	This multi agency group provides a strategic steer to the programme and report to the Commissioning Body. Membership includes provider and service user representation.
Cross Authority Group (CAG)	Neighbouring AA's working together to plan and develop policies and services across the group
Cross Authority Provision	A service designated by the CLG to provide support for service users originating from another Administering Authority (AA)
CLG	Department for Communities and Local Government (formerly the ODPM)
Direct Payment	Direct payments are paid to people who have been assessed as needing help from social services, and who would like to arrange and pay for their own care and support services instead of receiving them directly from council commissioned services. A person must be able to give their consent to getting direct payments and manage them, even if they need daily help to do this.
DV/DA	Domestic Violence/Domestic Abuse
Eligibility Criteria (EC)	A document that sets out what tasks Supporting People money can pay for and those it cannot.
Essential Role of Sheltered Housing (EROSH)	EROSH is the national consortium for sheltered and retirement housing working on behalf of residents and providers of these services.

Abbreviation or Term	Description
Fixed Capacity Contracts	A contract under which the units to be paid Supporting People grant are fixed at a number agreeable to both the Provider and the Supporting People team. The number of units relates to housing benefit claimants. The contract changes from a block subsidy model to a block gross model to assist with budget monitoring and budget setting for both the Provider and the Supporting People team. The contract value agreed is subject to review should the amount of units available fall below 10% of the capped amount.
Floating Support	This kind of support is "attached" to the person, not the property and can follow a service user if they move to another address. It only lasts for as long as the client needs it and then "floats" away to the next person in need. The service user does not need to live at a certain address to receive the support.
Floating Support protocols	This countywide agreement describes how the waiting list for floating support will be administered.
Foundations	The national co-ordinating body for Home Improvements Agencies (HIA)
Grant Condition	Produced by CLG, these conditions set out how the money paid to the AA is to be spent and how the programme is to be managed.
Homes and Communities Agency (HCA)	The Homes and Communities Agency (HCA) is the national housing and regeneration agency for England, with an annual investment budget of more than £5bn. The HCA was formed on 1 December 2008 along with the <i>Tenant Services Authority</i> and is a non-departmental public body, sponsored by Communities and Local Government (CLG).
Home improvements Agency (HIA)	An agency which enables vulnerable people to maintain their independence in their chosen home for the foreseeable future. "Vulnerable people" may include older people, people on low incomes, disabled people etc.. Their homes would usually be private rented leasehold or owner occupied.
Housing Benefit (HB)	A means tested benefit paid to council or private tenants who need help paying their rent
Housing Related Support (HRS)	Support specifically aimed at helping people to establish themselves, or to stay in their own homes. Examples of housing related support include helping people learn to manage their own money, apply for benefits, keep their home secure, access to other services
Indices of Multiple Deprivation (IMD)	The Index of Multiple Deprivation 2007 combines a number of indicators, chosen to cover a range of economic, social and housing issues, into a single deprivation score for each small area in England. This allows each area to be ranked relative to one another according to their level of deprivation. Together these various Indices make up the Indices of Deprivation 2007.
Individual budget	Funding from a variety of sources that is brought together into one bank account. This allows greater choice and control over many aspects of life e.g. housing, community care, health, benefits, income, grants etc. The person can choose to use their individual budget themselves or a third party can manage the funds for them.
KASS	Kent Adult Social Services
LSVT	Large scale voluntary transfers of council housing. This could be to a private company or to a registered social landlord.
Managing Agent	A managing agent is an organisation providing housing management services (such as collecting rent) on behalf of another body, often a Registered Social Landlord (RSL). The managing agent may also provide the support services.
NHF - National Housing Federation	The NHF provides advice and support for not-for-profit housing providers. Their website address is www.housing.org.uk

Abbreviation or Term	Description
Primary Care Trusts (PCT)	Primary Care Trusts are responsible for planning and providing healthcare services. In Kent there are 2 PCTs: West Kent, and Eastern and Coastal Kent, both are partners in the SP programme.
Performance Indicators (PI's)	Performance statistics submitted to the Supporting People teams by Providers. They are used as part of contracts and monitoring Key Performance Indicator 1 (KPI1) measures the percentage of people who have maintained independence Key Performance Indicator 2(KPI2)measures the percentage of service users who have moved on in a planned way from temporary living arrangements
Procurement	The process to obtain materials, supplies and contracts, obtaining best value through open and fair competition
Quality Assessment Framework (QAF)	Quality assessment framework. Providers self assess their service against national objectives (such as consulting service users on how they want the service to be run). The Supporting People team use the results as part of the benchmarking process with the aim of continually improving the quality of services in Kent.
Registered Social Landlord (RSL)	A non profit making voluntary group, generally a housing association, formed to provide affordable housing
Scheme Manager	A scheme manager is the support worker who manages a housing related support service. The term is also used to describe the support worker within a sheltered scheme (may have been termed a 'warden' previously).
Service Review	A service review examines the support provided to see if there is a need for it, if it is good quality support, if it gives value for money and if there needs to be any changes.
Service Users	The term "service users" is used to refer to people who use Supporting People services and also to carers and advocates where applicable. It is important that, in consulting and involving service users, providers also seek the views of carers and advocates where service users may not be able to participate fully.
Service User Involvement	The processes and mechanisms by which the AA consults and engages with people who use the service, or who may use the service and ensures that their views are reflected in the programme. It is good practice and a grant condition that providers involve service users.
Sheltered Housing	Housing specifically for older and or disabled people. Includes a block or group of houses with resident or visiting warden and individual house, bungalow and flats which receive support from a mobile warden or pendant (emergency) alarm
SPLS	Supporting People Local System. A local authority computer system used to hold service provider, payment and client details for the Supporting People programme
SERIG	South East Regional Implementation Group This group comprises the Lead Officers of Supporting People programmes across the region. They meet to consider issues of national and regional policy and liaise with CLG
SPkweb	The Supporting People Knowledge website (published by CLG) - this is accessible to all by logging onto www.spkweb.org.uk The SPkweb contains all the guidance and related documents on the Supporting People programme
Supported Housing	These are services that provide both accommodation and support together to enable people to live independently. Examples of supported housing services include women's refuges, sheltered housing and homeless hostels
Stakeholders	People or organisations that form part of the SP programme. Stakeholders share or contribute to the aim of the SP programme

Abbreviation or Term	Description
Supporting People Distribution Formula	A formula developed by the CLG to decide how much Supporting People grant each Administering Authority will be allocated
Supporting People Grant	Money from the government to pay for the housing related support services under the Supporting People programme
Supporting People	The programme came into effect on the 1st April 2003 to deliver housing-related support services to vulnerable people through a single funding stream, administered by local authorities according to the needs of people in their area
Supporting People Five Year Strategy	The strategy is a five year plan giving detailed supply and needs mapping information across the county in relation to the various vulnerable client groups that the Supporting People programme assists
Support Provider	The organisation providing housing related support services paid for by Supporting People. Organisation types include registered social landlords, voluntary sector organisations, local authorities, charities and the private sector
Support Service	A service eligible for funding through Supporting People. This could include advice on maintaining a tenancy, help with filling in forms, help with keeping accommodation safe and secure etc.
Tenant Services Authority (TSA)	The TSA is the regulatory body for social housing. Having formed on 1 December 2008, the TSA took over the regulatory powers of the Housing Corporation.
Tenure neutral	Tenure neutral floating support services means that support can be offered to an individual regardless of the sort of housing they live in e.g. private rented, social housing, owner occupied.
Triple Aim	Triple Aim is a concept led by the NHS Institute for Innovation and Improvement. It is designed to optimise the health system by taking into account three dimensions: <ul style="list-style-type: none"> • The experience of the individual • The health of a defined population • Per capita cost for the population NHS Eastern and Coastal Kent have adopted this approach to tackle health inequalities in two deprived wards in Thanet, Margate Central and Cliftonville West
Total Place	Total Place is a new initiative that looks at how a 'whole area' approach to public services can lead to better services at less cost. It seeks to identify and avoid overlap and duplication between organisations – delivering a step change in both service improvement and efficiency at the local level, as well as across Whitehall. Kent is one of the thirteen local authorities which have been selected as Total Place Initiative pilots. The aim of the pilots is to develop and test methodologies that will enable all partners in a 'whole place' simultaneously to deliver improved outcomes and greater efficiencies across the whole of the public realm.
Workbook	The workbook is completed on a quarterly basis by each service (except community alarms) under contract with the Supporting People team. It is the means by which the Supporting People team gathers Performance Indicator information required by central government
Validation Visit	A reality check by a SP Local Monitoring and Review Officer to a support service to establish whether the Provider is achieving the standards they are contracted to deliver. Supporting People team members will also consult with service users and staff and stakeholders to find out their views of the service. The aim of these visits is to work with providers to improve the quality of the services in Kent, and for the findings feed into strategic decision making

Links

The following links may provide further insight into the programme.

- www.communities.gov.uk
- www.spkweb.org.uk
- www.spdirectory.org.uk/DirectoryServices
- www.sitra.org.uk
- www.housing.org.uk
- www.kent.gov.uk/supportingpeople

Contact the Kent Supporting People team supportingpeopleteam@kent.gov.uk

Please tell us if you think that any other terms or links should be included in this glossary

By virtue of paragraph(s) 1, 2 of Part 1 of Schedule 12A
of the Local Government Act 1972.

Agenda Item 13

Document is Restricted

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