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**To:** Supporting People Commissioning Body 11 October 2011

**Subject:** Floating Support Impact Assessment

**Classification:** Unrestricted

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### **Summary**

This is the second quarterly assessment of the impact of the reduction in capacity of floating support services, covering the period May - July 2011.

The report shows that there has been a fall in the number of applications for floating support during the period. Further, the report reveals that overall the number of people waiting to receive floating support has fallen. In addition, the waiting times for those in highest need have been significantly reduced. The report highlights the need to revise the floating support processes and protocols and to plan the transition from existing contractual arrangements to the revised position in 2012-13.

## **1. Introduction**

(1) The Kent Supporting People Programme currently commissions 40 floating support services. These services operate on an east, west or county-wide basis. Referrals to these services are managed via a centralised floating support referral mechanism, which has enabled the Programme to improve access and efficiency. The mechanism also enables the Programme to monitor demand and inform commissioning decisions.

## **2. Context**

(1) The period covered by this report includes a fall in new applications compared to the previous quarter.

(2) The maximum period from which floating support may be delivered changed from one year to two years for all new applications made after 4 October 2010.

(3) The applications and referral process including Banding is described in Appendix 5. There has been no change in the number of floating support units commissioned as at 11.08.11, and the number and distribution of these units is

shown in Appendix 1. There are marginally more units available in the east than the west of the county.

### **3. Applications**

(1) The number of people applying for floating support fell during the period May 2011 – July 2011 when 866 applications were registered compared with 1251 last period. This represents a fall of 31% on the previous period. Appendix 2 shows an analysis of these applications. The majority of new applications (83%) were found to be in highest priority (Band A).

(2) The greatest demand across the county during this period came once again from those who were identified as Single Homeless with Support Needs. These applications represented 20% of all of those made during the period - a figure consistent with last period. All but two of the applications for this group were given a priority of Band A. Of the 179 “Single Homeless with support needs” applications received 159 were living in temporary situations, including lodging with relatives or sofa surfing.

(3) Once again this period, there were more applications received from east Kent (58%) than west Kent (42%) as shown in Appendix 2.1. This distribution is consistent with last period. As in the previous analysis, more applications (122) came from Thanet than any other district. However, the borough with the greatest proportion of A banded applications was Gravesham, where 68 of the 73 applications (93%) were banded A. Overall, Band A applications represented 83% (717) of all applications made.

### **4. Referrals to Providers**

(1) Applications can be referred to support services when vacancies within them arise. Extensive work was carried out with providers during the period to improve the availability of vacancies within services and therefore the number of applications that could be referred into these services. Appendix 3.0 shows that the result of this work is that 1628 applications were referred on to providers for service delivery to begin. This represents an increase of 30% on the previous period.

(2) Of the 1628 applications referred onto providers, 1515 (93%) were banded A

(3) The greatest number of referrals passed to providers came from the generic, single homeless with support needs and domestic abuse groups.

(4) The greatest number of referrals passed to providers was for people living in Thanet, Shepway and Ashford. These referrals alone accounted for 33% of all referrals made to providers.

(5) In every district or borough, the number of referrals made to providers in the period was greater than the number of new applications received.

## **5. The Waiting List**

(1) At the end of July 2011, the total number of people waiting to receive a floating support service fell to 1430 (Appendix 4.0), representing a fall of 523 (27%) since the last report. The number of people waiting fell across all client groups, but the most notable impact of this fall can be seen in Teenage Parents where the numbers waiting fell by 50%, Domestic Abuse (-49%), Young People at Risk (-46%), Offenders (44%) and Single Homeless with support needs (-43%). The greatest single fall in those waiting was seen in the Generic group, where the number of people waiting fell by 114 from 411 to 297.

(2) The number of people waiting fell in each district/borough during the period. The most notable reduction in numbers occurred in Canterbury, where 68 fewer people were waiting, a reduction of 32% since the last report. In addition, the greatest impact of the reduction was seen in Gravesham (-46%), Dartford (-43%) Tonbridge and Malling (-33%) and Dover (-31%)

(3) Of those still waiting, more people are waiting in east Kent (862) than in the west of the county (568.) Thanet has the highest number of people waiting in any one district (192 people, 13.4%) (Appendix 4.1)

(4) Since the last report, the number of people waiting at Band A has fallen from 918 to 371. Of all those waiting 26% are Band A, 63% at Band B and 11% at Band C. The numbers of people at Band B and C has not seen any significant change.

(5) There are 338 people across the county waiting for a specialist mental health floating support service; 70 of these are at Band A and 231 at Band B. The greatest concentrations of demand for mental health services are in Swale, Canterbury and Thanet.

(6) At the point of the analysis, most Band A referrals (276, or 74%) had been waiting for up to 3 months to receive a service (Appendix 4.3). In a marked improvement since the last report, no Band A referral has waited more than 9 months. Of the 9 people who have waited up to 9 months a proportion of these have done so because they have previously been in supported housing. In these cases, the date of their application is not the date that they were not ready to receive a floating support service and this can artificially give the appearance that they have been waiting a long time.

(7) The waiting times for Band B and C referrals have not improved, and there is a slight increase in the number of people waiting for more than 18 months in these bands, despite the increase in the number of referrals made to providers during the period. The reasons for this lie in the proportion of A Band referrals on the waiting list, which take priority over Band B referrals, in accordance with the current floating support protocols.

## **6. Future commissioning of Floating Support**

(1) In its June meeting, the Commissioning Body agreed to a change in the way that floating support is commissioned and the process for tendering the newly configured services began in August 2011. The Commissioning Body has agreed

that it will receive a report regarding the outcome of the tendering process. All existing floating support services will close on 31 March 2012.

(2) Whilst the numbers of floating support units available from 2012 do not differ greatly from 2011, there are some differences in the distribution of these units and their eligible client groups. The transition from one position to the other will need to be carefully managed. In order to ensure that existing recipients do not have their support curtailed prematurely, the Supporting People team will oversee the transfer of these existing cases into new services. As in the previous transfer arrangements, priority will be given to existing recipients.

(3) In order to manage the transfer, it is proposed to suspend the waiting list from November 2011 for all client groups except Band A referrals for domestic abuse, and those who are in temporary living situations such as sofa surfing. This would enable a natural reduction in the numbers of service users in each service as current recipients leave. In turn, a more effective transition to the new arrangements would be possible, whilst ensuring that those whose safety is of greatest concern is not compromised. It is proposed that the suspension would remain in place until March 2012.

(4) The data in earlier sections of this report has highlighted an increase in the proportion of A Band referrals, which has in turn lead to a pressure on the waiting times of lower priority cases. In agreeing to the commissioning of floating support, the Commissioning Body further agreed to the revision of the principles upon which floating support will operate in the future. In its September meeting, the Core Strategy Group agreed to receive a report in this regard at its December meeting which will subsequently be received by the Commissioning Body in January 2012. It is proposed that the new protocols would be effective March 2012.

(5) In the meantime it is proposed to contact those applicants and their referrers to assess whether or not a housing related support service is required.

## **6. Conclusion**

(1) The Kent Supporting People Programme continues to receive high numbers of applications for floating support, though there has been a fall in new applications in the period May - July. The Programme has worked with providers to continue to improve throughput and utilisation. As a result the Programme has been able to ensure that the number of referrals made to providers has exceeded the number of applications received, despite the previous reduction in capacity.

(2) This has enabled the Programme to reduce the number of people waiting for floating support by over 500. The reduction has had the most significant impact on high priority cases whose number has been reduced by 547. However, the programme has not been able to make any significant difference to waiting times for those in lower priority Bands.

(3) There is a need to revise the principles upon which floating support will operate in the future in advance of newly commissioned services commencing in

2012. The revised principles will be brought to the Core Strategy Group and Commissioning Body for consultation and agreement.

(4) The transition from existing contractual arrangements to the revised position in 2012-13 will require careful management. It is proposed that the waiting list is suspended to all new cases except those experiencing domestic abuse and those in temporary living arrangements. This will enable services to be emptied gradually and for existing service users who have needs beyond March 2012 to be safely transferred into new appropriate services.

### **Recommendations**

1. The Kent Supporting People Programme Commissioning Body is asked to **note** the contents of the report
2. The Body is further asked to **agree**
  - (i) the transition arrangements for the existing and new services
  - (iii) to receive a report in January recommending revised principles upon which floating support will operate in the future .

### **Background Documents**

None

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### **Appendices**

**Appendix One Analysis of current commissioned services as at 23.05.11**  
**Appendix Two Analysis of Applications Received**  
**Appendix Three Applications Referred to Providers**  
**Appendix Four Analysis of Waiting List**  
**Appendix Five The Application Process**

**Appendix 1.0      Analysis of current commissioned services as at 23.05.11**

<b>Primary Client Group</b>	<b>West</b>	<b>East</b>	<b>Kent</b>	<b>Grand Total</b>
<b>Alcohol Problems</b>	50			50
<b>Domestic Abuse</b>	108	88		196
<b>Drug Problems</b>	53	66		119
<b>Generic</b>	267	347	87	701
<b>HIV / AIDS</b>			22	22
<b>Homeless Families</b>	78	91		169
<b>Mental Health</b>	82	148	85	315
<b>Offenders</b>	30	25		55
<b>Older people</b>			168	168
<b>Phys/Sens Dis</b>			36	36
<b>Rough Sleeper</b>	32	47		79
<b>Teen Parents</b>	47	69		116
<b>Young People at Risk</b>	24	134		158
<b>Total</b>	<b>771</b>	<b>1015</b>	<b>398</b>	<b>2184</b>

(35.3%)    (46.47%)    (18.22%)

**Appendix Two Analysis of Applications Received By district/Borough and Band**

	District	A	B	C	Total
East	Ashford	65	11	2	78
	Canterbury	54	15		69
	Dover	53	4	3	60
	Shepway	80	17	2	99
	Swale	61	14	2	77
	Thanet	96	24	2	122
	Area Total	409	85	11	505
West	Dartford	43	5		48
	Gravesham	68	4	1	73
	Maidstone	73	8	7	88
	Sevenoaks	37	7	3	47
	Ton & Mall	49	8	1	58
	Tun/Wells	38	7	2	47
	Area Total	308	39	14	361
	Total	717	124	25	866





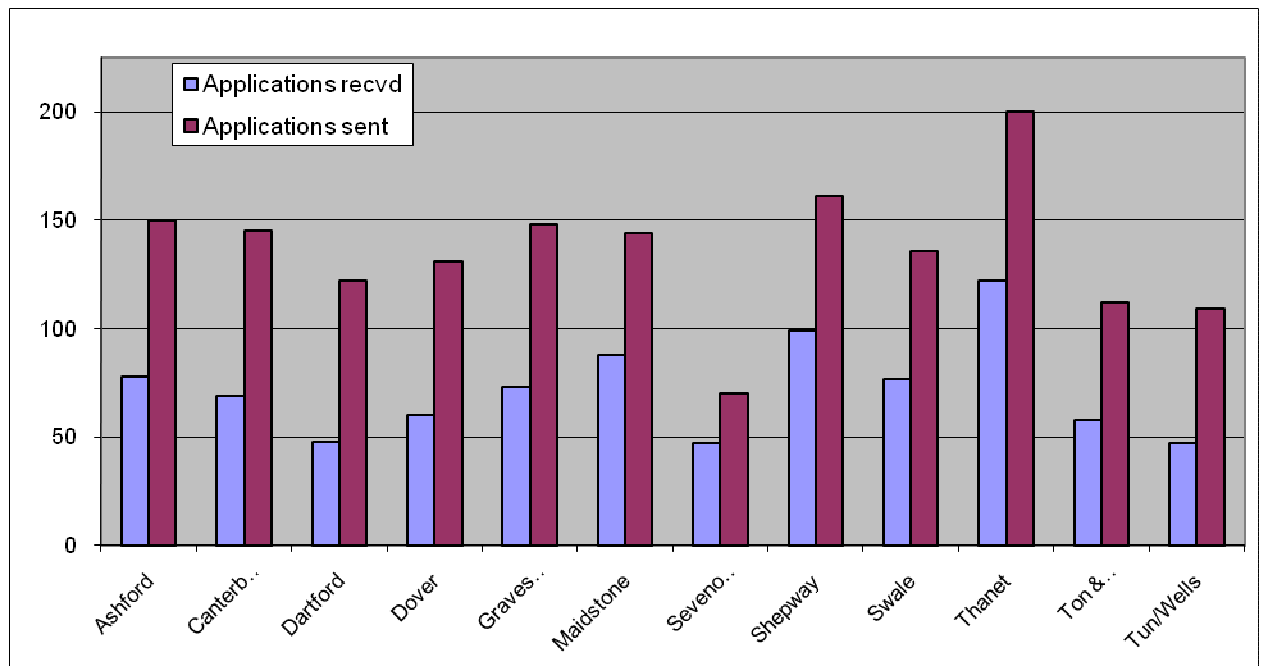
**Appendix Two Analysis of Applications Received by district/Borough and Band**

	Service Users' district	Alcohol Problems	Domestic Abuse	Drug Problems	Families	Frail Elderly	Generic	Learning Disability	Mental Health	Offenders	Older people	Older people MH /dementia	Phys/Sens Dis	Refugees	Rough Sleeper	Single Homeless	Teen Parents	Traveller	YP Care	YP Risk	Total
East	Ashford	2	7	3	5		11	3	7	1	2					19	9		1	8	78
	Canterbury	2	5	6	5		9	5	11		4		4			12	4		1	1	69
	Dover		1	4	1		8	6	5	2	3		1			16	2		1	10	60
	Shepway	4	12	2	12		17	4	14		6		3			16	2		1	6	99
	Swale	1	7	1	3		5	5	18	1	2		5		2	24	1			2	77
	Thanet	6	5	3	4		10	5	25	3	9		6		2	22	3		7	12	122
west	Dartford		5	1	2		4		10	2	3		2	1		17				1	48
	Gravesham	3	4	2	7		7	4	4	2	3	1	2		1	23	1			9	73
	Maidstone	4	10	1	2		4	3	8	6	6		3		1	14	18			8	88
	Sevenoaks	3	5	1	1		14	3	7	3	2		2		1	3	1			1	47
	Ton & Mall	5	9		2		6	6	6	3	1	1	4			9	2	1		3	58
	Tun Wells		4	1	3	1	8	5	2	3	4		2			4	3		2	5	47
	Total	30	74	25	47	1	103	49	117	26	45	2	34	1	7	179	46	1	13	66	866

### Appendix Three Applications Referred to Providers

Primary Client Group	Band			Total
	A	B	C	
Alcohol	39	10	1	50
Domestic Abuse	178			178
Drug	38	14	4	56
Families	117	1	1	119
Generic	272	1	1	274
Learning Dis.	69	2		71
Mental Health	149	6		155
Offenders	44	2		46
Older people	28	36		64
Phys/Sens	53	5		58
Refugees	1			1
Rough Sleeper	16			16
Single Homeless	259	1		260
Teen Parents	129	1	2	132
YP Care	10	4		14
YP Risk	113	21		134
<b>Total</b>	<b>1515</b>	<b>104</b>	<b>9</b>	<b>1628</b>

### Appendix Three Applications Referred to Providers



### Appendix Four Analysis of Waiting List May – July 2011

Waiting time (months)	A	B	C	Total
Up to 1 month	143	30	4	177
3	133	84	17	234
6	86	141	27	254
9	9	119	20	148
12		171	23	194
18		238	50	288
24 months		103	12	115
over 24 months		16	4	20
<b>Total</b>	<b>371</b>	<b>902</b>	<b>157</b>	<b>1430</b>