

REPORT

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To: Supporting People in Kent Commissioning Body

18 December 2008

Subject: Annual Plan 2008-09 and revised Key Lines of Enquiry (KLOE)

Classification: Unrestricted

For Decision

Summary: This report gives information regarding revised Key Lines of Enquiries (KLOE) in use as from September 2008 and links to the Kent programme's Annual Plan 2008-09.

1.0 Introduction

- 1.1 The Kent Supporting People Programme was inspected by the Audit Commission in September 2007. The inspection was guided by Key Lines of Enquiry (KLOE), a framework of detailed sets of questions and statements used by the Audit Commission to review and assess services and inform the judgements made about them.
- 1.2 At the time of inspection, the Audit Commission used the Key Lines of Enquiry (KLOE) for Supporting People (Housing Inspectorate Number 10, Version 2) and the Value for Money KLOE on which two further judgements about the programme were based. Judgement 1 focused upon how well the Programme is run, and what it is achieving for service users. Judgement 2 looked at an authority's track record of delivering improvement, how well performance is managed and the capacity to improve.

2.0 Context

2.1 In September 2008, the Audit Commission introduced a revised set of Supporting People KLOEs against which services are now assessed. In the main, the cross-cutting themes of the original KLOEs have been retained but a number of changes have been made:

- The Housing KLOEs have been regrouped to reflect linked services and help organisations to focus on the key areas that matter to service users, key stakeholders and the Commission. The Supporting People Programme has been grouped under the heading of 'Local Authority Strategic Involvement'
- The existing generic KLOEs on Access and Customer Care, Diversity and Value for Money have been embedded within each of the service-specific KLOEs.
- The documents have been restructured to discourage the prescriptive use of the descriptors as a checklist.
- The KLOEs include electronic links to websites containing examples of notable positive practice including examples noted by the Commission in their inspection of the Kent programme.

2.2 The revised KLOE for Supporting People build upon the original set and reflect the expectation of both the department of Communities and Local Government (CLG) and the Commission that the Programme is by now well established and firmly embedded in strategic, partnership and governance arrangements.

2.3 Further, the revised KLOEs reflect the new contexts in which the programme operates

These include

- National Supporting People Strategy
- National Outcomes Framework
- Local Area Agreements
- Area Based Grant
- Individualised Budgets/Direct Payments

2.4 The KLOE outline more evolved expectations in particular relation to safeguarding, governance, performance and risk management and place an increased onus upon Administering Authorities to demonstrate that commissioning and procurement strategies are based upon a sound understanding of local need.

3.0 KLOEs and the Annual Plan 2008-09

- 3.1 In order to ensure that the Kent Supporting People Programme is able to meet the requirements of the Audit Commission, the programme's plans and strategies reflect the work required to incorporate KLOEs and link them to the targets to be achieved.
- 3.2 Having examined and compared the provisions of the pre-Sept 2008 KLOE with the KLOE used since September 2008, and the Annual Plan 2008-09 it is evident that the plan meets many of the requirements. A comparison table is shown in Appendix One. Further there are aspects of the day to day management of the programme mentioned in the KLOE which are not specifically referenced in the Annual Plan, as they are referred to in both the unit business plan and individual action plans of team members.

4.0 Conclusion

- 4.1 The Kent Supporting People Programme pays due regard to the requirements of the Audit Commission for inspecting the Programme under KLOEs.
- 4.2 A comparison of the revised KLOE and the current Annual Plan 2008-09, shows that most of the targets/objectives contained within the current Annual Plan can be explicitly linked to the revised Supporting People KLOE.
- 4.3 Targets in other team plans such as the business plan ensure that the programme is able to meet all requirements of the revised KLOE.
- 4.4 The next Five-Year Strategy 2010-2015 and subsequent annual plans will reflect these revised requirements and secure the programme's ability to meet the Commission's expectations.

5.0 Equality Impact Assessment

- 5.1 An initial screening of this recommendation indicates that equality impact is low.

6.0 Financial Impact Assessment

- 6.1 There is no anticipated financial impact of the information given in this report.

7.0 Recommendation

- 7.1 The members of the Commissioning Body are asked to endorse the contents of the report.

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Background Information:

Audit Commission Report of the Inspection of Supporting People Programme in Kent

Audit Commission Key Lines of Enquiry, Guidance September 2008

Appendix 1: Comparison of Supporting People KLOE and Annual Plan 2008-09

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Key Lines of Enquiry		
Pre Sept 2008	From September 2008	Annual Plan
<p>1.0 Governance & Partnerships</p> <p><u>1.1 Corporate commitment & links</u></p> <p>Evidence of effective engagement including demonstrable understanding of diverse needs of vulnerable groups/individuals.</p> <p>Links established for programme with Local Strategic Partnership (LSP) & other local & regional partnerships. Consideration of SP contribution to Local Area Agreements¹.</p>	<p>1.0 Governance and Partnerships</p> <p><u>1.1 Corporate commitment and links</u></p> <p>Evidence of effective engagement.</p> <p>Engaged and informed elected members, including understanding of SP contribution to Local Area Agreements (LAAs).</p> <p>Evidence of impact and outcomes at a corporate level.</p> <p>Support for the programme is evident.</p> <p>Evidence of engagement in plans for Supporting People services under the new LAAs.</p>	<p><u>Objective 8:</u></p> <p>Increase the level and quality of multi-agency working with Probation, Health, Housing, districts/boroughs, Adult Social Services, Children & Families Services, voluntary organisations and Local Strategic Partnerships through regular representation at partnership boards and other fora</p> <p><u>Objective 9:</u></p> <p>Clear and meaningful information is available in ways that are accessible and meet diverse needs</p> <p><u>Objective 10:</u></p> <p>Implement actions arising from the Audit Commission Inspection including production of SP induction packs for new members of the CSDG and CB and distribution to Elected Members</p> <p>Ensure that the SP programme dovetails with the County Council's scrutiny processes and produce bi-annual reports.</p>
<p><u>1.2 Commissioning Body (CB) or equivalent</u></p> <p>Provides strategic steer & overview. Key partners engaged at a senior level including demonstrable understanding of diverse needs of vulnerable groups/individuals</p> <p>Work is progressing on shared outcomes for the programme that link into partner priorities.</p>	<p><u>1.2 Commissioning Body (CB) or equivalent</u></p> <p>Reviewed membership to ensure suitable representation with skills and capacity to drive the programme forward.</p> <p>Appropriate and sustained attendance.</p> <p>Strategic steer and overview.</p> <p>Evidenced understanding of the effectiveness of key programme areas and impact.</p> <p>Effective performance monitoring and management.</p> <p>Evidence of decision making.</p> <p>Clear and effective relationship with Core Strategy Group(CSG).</p> <p>Demonstrable outcomes.</p> <p>Opportunities for service user input and feedback.</p> <p>Evidence of leadership and engagement by the</p>	<p><u>Objective 1:</u></p> <p>Monitor the Five Year SP Strategy through 6-monthly needs analyses updates that identify the needs of excluded groups of vulnerable people and present reports to CSDG and CB</p> <p><u>Objective 8:</u></p> <p>Improve partnership working through regular representation at partnership boards, i.e. CSDG and CB. Provide regular reports to CSDG and CB.</p> <p><u>Objective 3:</u></p> <p>Accurate and clear quarterly Management Information and Performance Management reports presented to the CB including data on progress towards LAA2 (<i>NI 141, Number of vulnerable people achieving independent living</i>), including monitoring the effects of the 'Empty Homes</p>

¹ Approach to Local Area Agreements covered at 3.3

Key Lines of Enquiry		
Pre Sept 2008	From September 2008	Annual Plan
	CB in plans for Supporting People services through LAAs	Initiative' and Move-On Strategy on achieving the LAA2 target <u>Objective 7:</u> Improve service user involvement through ensuring and documenting that service users have opportunity to influence decision-making and be actively involved in governance, performance management and procurement
1.3 Core Strategy Group (CSG) or equivalent: where not in place need to demonstrate alternative arrangements for partnership approach and delivery. The role of the CSG in the delivery of the programme is agreed. Appropriate range of stakeholders represented with consistent attendance	1.3 Core Strategy Group (CSG) or equivalent: Representation from key stakeholders. Appropriate & sustained attendance. Operational steer. Shared objectives. Clarity over role and relationship with CB. Relevant and deliverable work plan in place. Demonstrable impact with outcomes. Working groups to address specific areas of activity in place, ensure due attention to the needs of marginalised groups and to delivering outcomes.	<u>Objective 1:</u> Monitor the Five Year SP Strategy through 6-monthly needs analyses updates that identify the needs of excluded groups of vulnerable people and present reports to CSDG and CB <u>Objective 8:</u> Improve partnership working through regular representation at partnership boards, i.e. CSDG and CB. Provide regular reports to CSDG and CB. <u>Objective 10:</u> Implement actions arising from the Audit Commission Inspection and strengthen the strategic approach to Supporting People by developing a county-wide Move-On Strategy, establish monitoring systems for the county's reconnection policy Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans
1.4 Accountable Officer (AO) The AO is a senior officer with responsibilities as outlined in DCLG guidance with a high profile, championing role within the authority and in the wider partnerships. Conflicts of interest resolved.	1.4 Accountable Officer (AO) Appropriate level within Administering Local Authority Evidenced capacity to fulfil role. Effective champion including through LSPs as evidence in LAA inclusion of housing related support commissioning. Evidence of effective partnership working. Outcomes from role can be evidenced.	See 1.1 and 1.2
1.5 Health, Housing, Social Care and Probation/	Partnerships	<u>Objective 8:</u>

Key Lines of Enquiry		
Pre Sept 2008	From September 2008	Annual Plan
<p><u>Criminal Justice wider partnership arrangements</u> Probation/ criminal justice (incl Drug Action Teams/ Youth Offending Team) Housing (including Antisocial Behaviour) social care and health operational staff are engaged in the programme and understand its relevance to their service delivery areas. Child and adult protection is given a high priority. Multi Agency Public Protection Arrangements (MAPPA) arrangements work effectively. Supporting People is being effectively used to support avoidable admissions to hospital, timely discharge and contribute to reductions in re-offending.</p>	<p><u>1.5 Health, Housing, Social Care and Probation/ Criminal Justice wider partnership arrangements</u> Probation/ criminal justice (incl Drug and Alcohol Action Teams/ Youth Offending Service) Housing, social care and health operational staff are engaged in the programme and understand its relevance. Evidence of outcomes against agency targets, for example: access to additional services to meet needs, sustained tenancies, admissions to hospital, timely hospital discharge, opportunities for training and employment and reductions in re-offending. <i>Adult and Child Protection and MAPPA covered in section 3.3</i></p>	<p>Improve partnership working through increasing the level and quality of multi-agency working with Probation, Health, Housing, districts/boroughs, Adult Social Services, Children & Families Services, voluntary organisations and Local Strategic Partnerships <u>Objective 9:</u> Improve access and information in relation to the Supporting People programme through providing information about the programme, including data collated, to stakeholders in Housing, Health, Social Services and Probation Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans</p>
<p><u>1.6 Service Providers</u> Regular briefings provided. Provider forum established and operating effectively. Small providers receive support. Level playing field established between internal & external providers. Expertise accessed by Administering Local Authority. Providers are able to identify programme delivery improvements as a result of consultation processes.</p>	<p><u>1.6 Service Providers</u> Regular briefings provided. Representative provider led forum meets regularly. Small providers receive support. Level playing field established between internal and external providers. Provider expertise accessed by Administering Local Authority and positive practice is disseminated by Administering Local Authority. Providers are able to identify programme delivery improvements as a result of consultation processes. Providers actively involved in capturing outcomes and using findings to improve services.</p>	<p><u>Objective 4:</u> As part of the strategic review of long-term accommodation-based supported housing, identify the needs of excluded groups of vulnerable people, in partnership with service users, potential service users and other representative groups <u>Objective 8:</u> Improve partnership working through regular representation at partnership boards and other fora. Draft a provider charter. <u>Objective 10:</u> Ensure that provider frontline staff provide consistent and informed approach to programme through utilisation of induction pack for new staff and provide other information/ training as required Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans</p>
<p><u>1.7 Voluntary & Community Sector (VCS)</u> Understanding & recognition of contribution and</p>	<p><u>1.7 Voluntary and Community Sector (VCS)</u> Understanding and recognition of contribution and</p>	<p><u>Objective 8:</u> Improve partnership working through increasing</p>

Key Lines of Enquiry		
Pre Sept 2008	From September 2008	Annual Plan
engagement including carer and advocacy groups. Clarity around guidance for working with the VCS.	engagement including carer and advocacy groups. Procurement and commissioning policies and practices encourages and facilitates VCS. Clarity around guidance for working with the VCS.	the level and quality of multi-agency working with Probation, Health, Housing, districts/boroughs, Adult Social Services, Children & Families Services, voluntary organisations and Local Strategic Partnerships
<p>2.0 Grant Compliance, Strategy & Needs</p> <p><u>2.1 Grant conditions and eligibility criteria</u></p> <p>The Administering Local Authority and its partners have an understanding of current grant conditions and the Administering Local Authority has completed work with all its partners to agree grant eligibility criteria within DCLG guidelines that reflect positive practice. These are now in place and being applied consistently across all services including evidence of transfer of ineligible funding to appropriate budgets & funding bodies.</p>	<p>2.0 Grant compliance, strategy and needs</p> <p><u>2.1 Grant conditions and eligibility criteria</u></p> <p>The Administering Local Authority 's administration of the programme complies with current grant conditions.</p> <p>Grant eligibility criteria reflect positive practice and are widely understood.</p> <p>Consistent application across all services.</p> <p>Evidence of transfer of ineligible funding to suitable budgets and funding bodies.</p> <p>Reinvestment proposals comply with agreed priorities.</p>	<p><u>Objective 1:</u></p> <p>As part of the Five Year SP Strategy, carry out annual reviews of the Kent Eligibility Policy and produce 6-monthly analyses of need incorporating newly collated information and data and data on diversity.</p> <p><u>Objective 4:</u></p> <p>As part of the strategic review of long-term supported accommodation examine whether services meet identified need in line with the Kent SP Eligibility Criteria</p>
<p><u>2.2 Five year strategy</u></p> <p>Deliverable strategy with links to allied initiatives and strategies across all partner organisations. Clearly identified priorities for service delivery. Work plans demonstrate links to agreed priorities. Regular review process in place with evidenced outcomes.</p> <p>Partners demonstrate understanding & commitment.</p>	<p><u>2.2 Five-year strategy</u></p> <p>Deliverable strategy with links to allied initiatives and strategies across all partner organisations. Clearly identified priorities for service delivery linked to measurable objectives.</p> <p>Work plans show links to agreed priorities including the LAA.</p> <p>Regular updating process in place with evidenced outcomes.</p> <p>Partners show understanding and commitment.</p> <p>Informed by performance data</p>	<p><u>Objective 1:</u></p> <p>Annual Plans incorporating measurable outcomes</p> <p>Review the current strategy and produce refresh including identification of future priorities and how the needs of hard to reach groups will be met</p> <p>Prepare for the Five Year Strategy 2010-2015, aligning the Kent programme with the National Supporting People Strategy and other CLG strategies emerging 2008-10 and incorporating 6-monthly needs analyses</p> <p>Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans</p>
<p><u>2.3 Needs mapping, analysis and review</u></p> <p>The Administering Local Authority has systems in place to update the housing related support needs of all vulnerable groups at appropriate intervals (6 monthly), analyse the outcomes and review the 5 year strategy priorities in the context of revised</p>	<p><u>2.3 Needs mapping, analysis and review</u></p> <p>Comprehensive needs data available covering all vulnerable groups across regions and sub regions. Systems in place to update the housing related support needs of all vulnerable groups regularly.</p> <p>Analysis of the outcomes and review the 5-year</p>	<p><u>Objective 1:</u></p> <p>As part of reviewing the Five Year strategy priorities produce 6-monthly analyses of need incorporating newly collated information and data and data on diversity which identifies the needs of excluded groups of vulnerable people, in</p>

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Pre Sept 2008	From September 2008	Annual Plan
data.	strategy priorities in the context of revised needs data. Current needs data informs commissioning, procurement and contracting. Joint Strategic Needs Assessment includes housing related support. Priorities for the reconfiguration of services are based on identified needs. Needs data informs LAA.	partnership with service users, potential service users and other representative groups Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans
<u>2.4 Strategy for access to move on accommodation</u> Issues that impact on the ability of vulnerable people to move from accommodation based services to independent living have been recognised, assessed and quantified. Strategic approaches with key partners have been developed to address identified barriers to move on and outcomes from this work can be evidenced.	<u>2.4 Strategy for access to move on accommodation</u> Detailed analysis of move on issues: needs and access to suitable accommodation. Strategic approaches with key partners have been developed to address identified barriers. Move on strategy in place. Evidence of impact and outcomes in improving move on. Evidence of work to reduce evictions and unplanned moves.	Objective 10: Strengthen the strategic approach to Supporting People by developing a county-wide Move-On Strategy through the Kent Joint Policy and Planning Board (Housing)
3.0 Delivery arrangements <u>3.1 Supporting People Team</u> The post of lead officer is complemented by a team of staff with appropriate skills including the areas of project and contract management. Robust management and monitoring arrangements are in place and additional resources can be accessed as required. Good fit with developments in mainstream housing, health, social care (adults & children's services) and criminal justice that promote independence.	3.0 Delivery arrangements <u>3.1 Supporting People Team</u> The post of lead officer is complemented by a team of staff with appropriate skills including the areas of project and contract management. Robust management and monitoring arrangements are in place and additional resources can be accessed as required. Good fit with developments in mainstream housing, health, social care (adults and children's services) and criminal justice that promote independence.	<i>Not contained within Annual Plan</i> Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans.
<u>3.2 Work Planning</u> Work plan in place with clearly identified	<u>3.2 Work Planning</u> Work plan is in place with clearly identified	Objective 1: Annual Plans with clearly identified objectives and

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resources, targets and outcomes. Regular monitoring of progress and reporting to CB and CSG. Links in place to relevant departmental and corporate work plans. These in turn are linked to health and probation key targets. Progress in delivery linked to individual targets.	resources, targets and outcomes. Regular monitoring of progress and reporting to CB and CSG. Links into reporting from outcomes framework. Links in place to relevant departmental and corporate work plans. These in turn are linked to health and probation key targets. Progress in delivery linked to individual targets.	outcomes are agreed by and reports presented to CSDG and CB Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans.
3.3 Local Area Agreements Formal written agreement for inclusion of SP secured from CB (or equivalent). SP funding level & outcomes agreed with CB. Clear lines of accountability established between LAA partnership & CB (or equivalent). Compliance with DCLG requirement to produce & submit quarterly returns. (See 3.7)	3.3 Adult and Child Protection and MAPPA Child and adult protection is given a high priority. MAPPA arrangements relevant to SP work effectively. Contracts make protocols explicit. Staff are regularly trained in these issues. Regular briefings to providers and service users take place. Protocols in place for whistle blowing. Complaints systems reviewed to ensure effective response to concerns. Performance monitoring and reporting systems in place to monitor and report outcomes.	Objective 8: Increased level and quality of multi-agency working with Probation, Health, Housing, districts/boroughs, Adult Social Services, Children & Families Services, voluntary organisations and Local Strategic Partnerships that includes regular attendance at partnership board meetings Objective 3: Accurate and clear quarterly Management Information and Performance Management collated and reports presented to the CB Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans.
3.4 Performance monitoring & management Performance monitoring and management systems in place with regular and appropriate levels of reporting to governance bodies and within the Administering Local Authority including to elected members. Identified outcomes for service users are intrinsic part of all processes. Financial monitoring is carried out and in line with corporate guidelines. Outcomes are reported corporately and to CB and CSG at regular intervals and to full council as agreed.	3.4 Local Area Agreements Formal written agreement for inclusion of SP secured from CB (or equivalent). Recognition of relevant performance indicators (e.g. National Indicators 141 and 142). SP funding level and outcomes agreed with CB. Clear lines of accountability established between LAA partnership and CB (or equivalent). Compliance with CLG requirement to produce and submit quarterly returns (See 3.7). Agreed approach to addressing the proposal to un-ringfence the SP grant in April 2009 and	Objective 3: Accurate and clear quarterly Management Information and Performance Management collated and reports presented to the CB including data on progress towards LAA2 (<i>NI 141, Number of vulnerable people achieving independent living</i>), including monitoring the effects of the 'Empty Homes Initiative' and Move-On Strategy on achieving the LAA2 target Objective 10: Implement outcome of Audit Commission Inspection through establishing a system to monitor reconnection policy

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	incorporate it into LAAs.	
<p><u>3.5 Fairer charging (see also 7.6)</u> Applied to Supporting People service users and is efficiently and effectively implemented. Accessible information for all service users.</p>	<p><u>3.5 Fairer charging (see also 7.5)</u> Clear and agreed policy linked with other charging arrangements. Systems in place to effectively inform potential applicants. Monitored processes in place to deal with applications quickly and efficiently. Evidence of take up among all client groups where relevant. Effectiveness of arrangements regularly reviewed. Integral part of income maximisation work.</p>	<p><i>Not contained within annual plan</i></p> <p>Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans that are linked to corporate targets.</p>
<p><u>3.6 Risk management</u> Comprehensive identification of programme risks including financial, IT and implications of service failure or withdrawal for service users. Contingency plans in place. Risk register compiled and regularly reviewed.</p>	<p><u>3.6 Individual Budgets/ Direct Payments</u> Understanding of the contribution to independence for service users and impact on SP delivery. Staff trained and issues discussed with partners including providers and service users. Close working with adult social care to identify opportunities. Identify, capture and disseminate positive practice from providers and service users</p>	<p>Objective 8: Improve partnership working through aligning Supporting People with the Social Care and Health agenda. Following publication of the national evaluation of the pilot sites, produce a report on Self Directed Support/Direct Payments/Individualised Budgets that includes risk and impact analyses.</p> <p>Note: Departmental targets/plans are contained within the unit business plan and individual work plans.</p>
<p><u>3.7 DCLG Monitoring (SPLS data upload)</u> Accurate and complete data from the authority's SPLS to be submitted four times a year as required by DCLG.</p>	<p><u>3.7 CLG Monitoring (SPLS data upload)</u> Accurate and complete data from the authority's SPLS to be submitted four times a year as needed by CLG.</p>	<p><i>Not contained within annual plan</i></p> <p>Note: Departmental targets with links to corporate targets are contained within the unit business plan and individual work plans.</p>
	<p><u>3.8 Risk management</u> Comprehensive identification of programme risks linked with corporate arrangements. Includes financial, IT and implications of service failure or withdrawal for service users. Contingency plans in place.</p>	<p><i>Not contained within annual plan</i></p> <p>Note: Departmental targets/plans such as risk management are contained within the unit business plan and individual work plans.</p>

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	<p>Risk register compiled and regularly reviewed.</p> <p><u>3.9 Performance monitoring and management</u> Accessible and effective performance monitoring and management systems in place Including collection of robust and quality-checked data from providers. Regular and appropriate levels of reporting to governing bodies and within the Administering Local Authority including elected members. Identified outcomes for service users are an intrinsic part of all processes. Financial monitoring is carried out and in line with corporate guidelines. Outcomes are reported corporately and to CB and CSG at regular intervals and to full council as agreed. Evidence of improvements for service users</p>	<p><u>Annual Objective 1:</u> As part of monitoring the Five Year SP strategy, regular reports are made to CSDG and CB that also include financial monitoring of the programme</p> <p><u>Annual Objective 3:</u> Accurate and clear quarterly Management Information and Performance Management reports presented to the CB including data on progress towards LAA2 (<i>NI 141, Number of vulnerable people achieving independent living</i>), including monitoring the effects of the 'Empty Homes Initiative' and Move-On Strategy on achieving the LAA2 target and financial monitoring of the programme</p> <p><u>Objective 10:</u> As part of implementing the recommendations of the Audit Commission, and as agreed at CSDG and CB as a standard part of all consultation exercises, improve service user involvement by careful planning of all major public consultation exercises</p>
<p>4.0 Commissioning & Performance <u>4.1. Contracts</u> Providers are well informed and understand the contracting arrangements. Service reviews not completed by 03/06 will be subject to review in compliance with grant conditions. Clear processes in place for contracting with monitoring & Quality Assurance arrangements agreed and understood. Level playing field established for all providers to ensure equity in procurement and contracting processes with support for small & specialist providers. There is evidence of outcomes through the effective contracting of services in achieving shared targets and delivering shared objectives for the Administering Local Authority health, housing</p>	<p>4.0 Commissioning, Procurement and Quality assurance <u>4.1 Commissioning</u> Demonstrable understanding of the current and emerging needs across all client groups. Understanding of the nature and level of services that will best meet needs, including joining up of assessments with partners and across areas. Knowledge of what needs to change following a detailed comparison with existing supply</p>	<p><u>Annual Objective 1:</u> Produce 6-monthly analyses of need incorporating newly collated information and data and data on diversity that Identifies the needs of excluded groups of vulnerable people in partnership with service users, potential service users and other representative groups.</p> <p>Note: Departmental targets/plans such as contracts and commissioning arrangements are contained within the unit business plan and individual work plans.</p>

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and social care, probation and wider criminal justice and community safety initiatives. Children's services are engaged in developing & delivering services for young people.		
<p><u>4.2 Quality Assurance</u> QA systems are in place to ensure consistency and there is evidence of provider performance improving against QAF standards. Partner agencies are involved and work has been carried out with other Administering Local Authorities to identify positive practice and share experiences and expertise.</p>	<p><u>4.2 Joint commissioning</u> Evidence of progress to commission services jointly. Engagement of adult social care, children's services, health, housing and criminal justice commissioners. Clear links with procurement, contracting and value for money approaches. Evidence of outcomes for service users particularly marginalised groups and individuals.</p>	<p><i>Not contained within annual plan</i> Note: Departmental targets/plans such as contracts and commissioning arrangements are contained within the unit business plan and individual work plans</p>
<p><u>4.3 Reporting</u> Good progress made to meet the 03/06 deadline and the outcomes of service reviews reported to the CB for approval. An overview of progress to inform delivery for specific service areas is agreed. Risks posed to vulnerable people are clearly highlighted.</p>	<p><u>4.3 Procurement</u> A procurement strategy is in place that complies with EU and Administering Local Authority corporate guidelines and reflects positive practice. Service users can exercise choice about the services they access and the provider. The role and contribution of the VCS is recognised in the strategy. Sub regional and regional procurement is facilitated. Joint commissioning of services where this is suitable is promoted. Evidence the strategy is being effectively implemented. Support is available to small and voluntary providers to help sustain a diverse provider market. VFM and efficiency savings are being realised. Performance is monitored and managed.</p>	<p><i>Not contained within annual plan</i> Note: Departmental targets/plans such as contracts and commissioning arrangements are contained within the unit business plan and individual work plans.</p>
<p><u>4.4 Cross Authority</u> Opportunities have been delivered for joint accreditation of shared providers. Monitoring & QA arrangements have been discussed. Information &</p>	<p><u>4.4. Contracts</u> Clear processes in place for contracting, with monitoring and QA arrangements agreed and understood.</p>	<p><u>Objective 9:</u> Ensure there is clear and consistent access to information relating to SP through provision of information about the programme, including data</p>

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<p>expertise is shared and opportunities for joint monitoring have been identified. Outcomes of reviews/monitoring for shared providers are discussed and support planning shared.</p>	<p>Providers are well informed and understand the contracting arrangements. Level playing field established for all providers to ensure equity. Evidence of outcomes through the effective contracting of services in achieving shared targets and delivering shared objectives for the Administering Local Authority , health, housing and social care, probation and wider criminal justice and community safety initiatives. Children’s services are engaged in developing and delivering services for young people. Adult and child protection arrangements are an integral part of contracts.</p>	<p>collated, to stakeholders in Housing, Health, Social Services and Probation via a variety of media.</p> <p>Note: Departmental targets/plans such as contracting arrangements and links to Adult/Child Protection are contained within the unit business plan and individual work plans.</p>
<p><u>4.5 Improvement planning</u> Feedback is provided within agreed deadlines and arrangements are in place to allow discussions to take place. Improvement plans are agreed with providers. Effective improvement planning and monitoring arrangements are in place.</p>	<p><u>4.5 Quality Assurance</u> QA systems are in place to ensure consistency. Evidence of provider performance improving against QAF standards. Partner agencies are involved. Work has been carried out with other Administering Local Authorities service users and providers to identify positive practice and share experiences and expertise. Ambitious targets in place to improve service quality within clearly stated, realistic timescales. Providers share the ambition to drive up standards. Service users understand the QAF and its implications for their services.</p>	<p><i>Not contained within annual plan</i></p> <p><u>Objective 3:</u> Accurate and clear quarterly Management Information and Performance Management reports presented to the CB</p> <p><u>Objective 7:</u> Improve service user involvement through ensuring that service users have opportunity to influence decision-making and be actively involved in governance, performance management and procurement</p>
<p><u>4.6 Complaints</u> Access to complaints system provides transparent & monitored approach. Complaints are promptly handled with the engagement of partner agencies as appropriate, with follow up monitoring undertaken.</p>	<p><u>4.6 Improvement planning</u> Feedback is provided within agreed deadlines. Arrangements are in place to allow discussions to take place. Improvement plans are agreed with providers. Effective monitoring and reporting arrangements are in place.</p>	<p><i>Not contained within annual plan</i></p> <p>Note: Departmental targets/plans such improvement planning for services are contained within the unit business plan and individual work plans.</p>
<p><u>4.7 Appeals process</u></p>		<p><i>Not contained within annual plan</i></p>

Key Lines of Enquiry		
Pre Sept 2008	From September 2008	Annual Plan
Processes in place to enable decisions to be challenged within a clearly defined timeframe. These enable an expert panel to independently scrutinise and assess the review outcomes and make recommendations to the CB.		Note: Departmental targets/plans such improvement planning for services are contained within the unit business plan and individual work plans.
<p><u>4.8 Outcomes</u> Positive outcomes can be demonstrated in respect of improved configuration of contracted services to meet identified needs and local priorities. Grant eligibility has been determined and confirmed for all reviewed services. Service users can identify service improvements. <i>Please note: service user involvement is addressed in section 6.</i></p>		
<p>5.0 Value for money (VFM)² <u>5.1 Defining VFM</u> Clear understanding of cost, quality & outcome issues tailored to needs of diverse user groups & individuals</p>	<p>5.0 Value for money (VFM)³ <u>5.1 Defining VFM</u> Clear understanding of cost, quality and outcome issues tailored to the needs of diverse user groups and individuals. Definition agreed and widely understood.</p>	<p><i>Not contained within annual plan</i></p> <p>Note: Departmental targets/plans such improvement planning for services are contained within the unit business plan and individual work plans.</p>
<p><u>5.2 Methodology for contracted services</u> Clearly agreed approach to identifying VFM in the delivery of Supporting People funded housing related support services. Consultations with providers to explain the approach have been carried out and the views of service users, their carers and advocates have been sought. Additional expertise to assist in understanding the complexities of diverse service provision across all sectors has been sought and secured.</p>	<p><u>5.2 Methodology for contracted services</u> Clearly agreed approach to identifying VFM. Providers understand the approach taken. Service users, their carers and advocates have been involved and understand the process. Extra expertise to help in understanding the complexities of diverse service provision across all sectors has been sought and secured.</p>	<p>Note: Departmental targets/plans such improvement planning for services are contained within the unit business plan and individual work plans.</p>
<u>5.3 Benchmarking</u>	<u>5.3 Benchmarking</u>	<u>Objective 6:</u>

² Refer also to Value for Money KLOE.

³ Refer also to Value for Money KLOE.

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Benchmarking of service costs is ongoing and undertaken at a national, local and regional level. Outcomes reported to CB and CSG.	Suitable benchmarking groupings being used. Benchmarking of service costs is ongoing and undertaken at a national, local and regional level. Benchmarking is being used effectively and balances cost, quality and outcomes achieved. Outcomes reported to CB and CSG.	Relating to Home Improvement Agencies continue to develop benchmarking and performance indicators
<u>5.4 Procurement</u> Procurement options are being developed in accordance with best practice at national & EU levels. Efficiency savings are being pursued as part of this process in line with national guidance.	<u>5.4 Improving VFM</u> Evidence that service improvements are being delivered for service costs, service quality and achieving improved outcomes for service users. A monitored project plan is in place to ensure the delivery and development of VFM work.	<u>Annual Objective 1:</u> As part of monitoring the Five Year SP strategy, regular reports are made to CSDG and CB financial monitoring of the programme. Note: Departmental targets/plans such improvement planning for VFM are contained within the unit business plan and individual work plans.
<u>5.5 Improving Value for Money (VFM)</u> Where services are found not to represent VFM, discussions are underway with key partners to determine the next steps and to minimise any disruption to service users. A monitored project plan is in place to ensure the delivery and development of VFM work	<u>5.5 Administration grant</u> The Administering Local Authority can show VFM in the use of this grant for staff, equipment and other related cost.	<u>Annual Objective 1:</u> As part of monitoring the Five Year SP strategy, regular reports are made to CSDG and CB that also include expenditure on administrating the programme.
<u>5.6 Cross authority approach</u> The Administering Local Authority is working on a cross authority basis to achieve consistency of approach and is actively pursuing joint procurement opportunities to improve VFM of contracted services.		
<u>5.7 Administration grant</u> The Administering Local Authority can demonstrate VFM in the use of this grant in relation to staff, equipment and other related cost.		
6.0 Service User Involvement <u>6.1 Opportunities</u> The Administering Local Authority has mapped	6.0 Service User Involvement <u>6.1 Opportunities</u> Expertise has been sought to enable involvement.	<u>Objective 10:</u> Improve service user involvement through developing and implementing a Service User

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relevant established groups for involvement and consultation and is aware of, and is seeking to follow, DCLG guidance. Recognition of the need to involve carers, relatives and advocacy groups and evidence of outcomes in achieving their engagement and that of service users. Opportunities to participate in governance & partnership arrangements are in place.	Wide range of opportunities identified and used. All vulnerable groups can access information on user involvement SP is integrated into established forums. Carers and advocacy groups actively engaged. Evidence of outcomes	Involvement Strategy which includes clear measurable outcomes in consultation with users and advocates, draft a service user charter and ensure service users have opportunity to influence decision-making and be actively involved in governance, performance management and procurement
<u>6.2 Involvement in contracting & monitoring</u> Service users, their carers and advocates are kept informed, their views are sought and they have access to monitoring & procurement processes. Specialist advocacy and support groups' expertise has been sought to assist as required.	<u>6.2 Involvement in contracting and monitoring</u> Service users, their carers and advocates are kept informed; their views are sought and are actively involved in procurement and contract monitoring arrangements. Training is in place to improve the capacity of service users to participate. Specialist advocacy and support groups' expertise has been sought to assist in this process.	see 6.1
<u>6.3 Outcomes from user involvement</u> The Administering Local Authority can evidence that it is reaching individuals and user groups who have not previously been. Specialist advocacy and support groups' expertise has been sought and secured. CSG regularly review arrangements and report progress to CB.	<u>6.3 Outcomes from user involvement</u> Evidence is available to show the impact of user involvement. Specialist advocacy and support groups' expertise has been sought and secured. CSG regularly review arrangements and report progress to CB.	See 6.1
7.0 Access to services and information <u>7.1 Access and referral to services</u> Access and referral arrangements are fair, agreed and transparent and are applied to all services. Staff & partner agencies are able to signpost users to these. Transient groups who require short term services are not discriminated against on the grounds of local connection	7.0 Access to services and information <u>7.1 Access and referral to services</u> Access and referral arrangements are agreed and transparent Administering Local Authority contact points and those of partner agencies are able to signpost to these arrangements. Transient groups who need short-term services are not discriminated against because of local	<u>Objective 1:</u> As part of monitoring the Five Year strategy, annually review the eligibility policy and ensure services meet identified need, in line with the Kent SP eligibility criteria <u>Objective 3:</u> Carry out an internal review of administration, access to and eligibility for Floating Support services <u>Objective 10:</u>

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	connection.	As art of implementing the recommendations from the Audit Inspection, monitor the reconnection policy
<u>7.2 Information</u> A range of accessible information is available to existing and potential service users in a range of formats sensitive to the diverse needs of Supporting People service users.	<u>7.2 Information</u> Accessible information is available to existing and potential service users. Formats are sensitive to the diverse needs of Supporting People service users. Regular reviews and revisions take place including to the Better Care: Higher Standards charter	<u>Objective 9:</u> Improve access and information in relation to the Supporting People programme. All leaflets, website and other means of information are regularly reviewed, include translation strap lines and are available in a number of community languages.
<u>7.3 Directory</u> The directory of services can be accessed via the DCLG hub & is accurate & up to date. The directory of services is widely available gives clear information on access with contact details. This has been produced in partnership with providers and advocacy groups.	<u>7.3 Directory of services</u> The directory of services can be accessed via the CLG hub and at local information points. The directory is up-to-date and provides clear information on access with contact details. It is produced and reviewed in partnership with providers, service users and advocacy groups.	See 7.2
<u>7.4 Website</u> The Administering Local Authority's website has accessible information available. Information is easy to find and the web site is easy to navigate. There are clear links to other pages and web sites including those of key partners.	<u>7.4 Website</u> The Administering Local Authority's website has accessible information available. Information is easy to find and the web site is easy to navigate. Clear links to other pages and web sites including those of partners.	See 7.2
<u>7.5 Better Care: Higher Standards (or equivalent)</u> Better Care: Higher Standards, the Administering Local Authority 's publication on the range of health, social care and housing services for vulnerable people has been up-dated to encompass Supporting People services. Accessible document, widely available.	<u>7.5 Services charges and Access to Fairer charging</u> Administering Local Authority aware of providers charging "top up" for housing related support and is challenging this practice. Information is available on Supporting People service charges, the implications of fairer charging have been addressed and access to assessments is clearly signposted.	see 7.2
<u>7.6 Services charges & Access to Fairer charging</u>	<u>7.6 Complaints</u>	See 7.2

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Administering Local Authority aware of providers charging “top up” for housing related support & is challenging this practice. Information is available on Supporting People service charges, the implications of fairer charging have been addressed and access to assessments is clearly signposted.	Access to complaints system provides transparent and monitored approach. Safeguarding issues can be identified and dealt with quickly and sensitively. Complaints are promptly handled with the engagement of partner agencies as suitable, with follow up monitoring undertaken.	
<p>8.0 Diversity⁴ <u>8.1 Identifying diverse needs</u> Recognition of the breadth of issues. There is a robust process for assessing needs that draws on a wide range of relevant skills and expertise. An analysis has been undertaken of existing service provision in the context of local demography accessed from relevant agencies including providers and priorities determined.</p>	<p>8.0 Diversity⁵ <u>8.1 Identifying diverse needs</u> There is a robust process for assessing needs that draws on a wide range of relevant skills and expertise. An analysis has been undertaken of existing service provision in the context of local demography accessed from relevant agencies including providers and priorities determined. Work is progressing to fill identified gaps in provision and to reconfigure services to ensure that they are better able to address all users needs including access for people with physical disabilities and those with sensory impairment.</p>	<p><u>Objective 1:</u> Produce 6–monthly analyses of need incorporating newly collated information and data on diversity which identifies the needs of excluded groups of vulnerable people, in partnership with service users, potential service users and other representative groups</p>
<p><u>8.2 Excluded groups</u> Gap analyses have identified excluded groups of vulnerable people and work is in progress to identify needs and how they might be met.</p>	<p><u>8.2 Excluded groups</u> Gap analysis has identified a wide range of excluded groups of vulnerable people including those with multiple needs. Work is carried out to identify needs and proposals in place to meet them.</p>	See 8.1
<p><u>8.3 Cultural sensitivity</u> Services reflect the cultures of the communities they serve and are welcoming and accessible to all. Gaps in provision have been identified in partnership with users, potential users, their</p>	<p><u>8.3 Cultural sensitivity</u> Services reflect the cultures of the communities they serve and are welcoming and accessible to all. Gaps in provision have been identified in</p>	See 8.1

⁴ Refer also to Diversity KLOE

⁵ Refer also to Diversity KLOE

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advocates, carers and representative groups. Diversity impact assessments completed.	partnership with users, potential users, their advocates, carers and representative groups. Equality impact assessments are complete.	
<p>9.0 Outcomes for service users</p> <p><u>9.1 SP service improvements</u></p> <p>The range of services better meets local needs in accordance with agreed priorities as set out in the 5 year strategy. As a result the SP programme shows that demonstrable improvements have been achieved in quality of services available. Service users are involved and engaged in these improvements. Case studies available.</p>	<p>9.0 Outcomes for service users</p> <p><u>9.1 SP service improvements</u></p> <p>Ambitious plans in place to drive up improvements across all services. Services reconfigured in response to identified needs and 5-year strategy priorities. Demonstrable improvements have been achieved in quality of services available and clear arrangements are made to provide other services to SP clients, where suitable. Service users are involved and engaged in service improvements. Partners recognise the potential gaps between services. Case studies available.</p>	See 4.5
<p><u>9.2 Choice for service users</u></p> <p>Services are available across tenure and choice is being developed for service users. An assessment has been made of both the range of services available and the groups of service users they apply to. Lack of provision has been identified and plans are in place to address this.</p>	<p><u>9.2 Choice for service users</u></p> <p>Services are available across tenure and choice is being developed for service users. An assessment has been made of both the range of services available and the groups of service users they apply to. Lack of provision has been identified and plans are in place to address this. Needs assessments are regularly updated with users to capture emerging and changing needs.</p>	See 2.3
<p><u>9.3 Support plans</u></p> <p>The Administering Local Authority has ensured that support planning is in place for all service users. These plans are robust, comprehensive, and are agreed with service users and subject to regular review. The plans are developed with other agencies to complement care & supervision plans where these are in place.</p>	<p><u>9.3 Support plans</u></p> <p>The Administering Local Authority has ensured that support planning is in place for all service users. These plans are robust, comprehensive, and focused on delivering improved outcomes for service users. They are shared and agreed with service users and subject to regular review. The plans are developed with other agencies to complement care and supervision plans where these are in place.</p>	Note: Departmental targets/plans such as reviewing and monitoring of services and support arrangements are contained within the unit business plan and individual work plans.

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<p><u>9.4 Outcome measurement</u> The Supporting People development and delivery is inclusive and focussed on quantified outcomes for service users. Targets have been identified with partners and outcomes are measured against these</p>	<p><u>9.4 Outcome measurement</u> Supporting People development and delivery is inclusive and focused on quantified outcomes for service users. Targets have been identified with partners and outcomes are measured against these. Outcomes from monitoring arrangements are shared with partners including service users.</p>	<p><u>Objective 3:</u> Collate quarterly Performance Indicators, including data on progress towards LAA2 (<i>NI 141, Number of vulnerable people achieving independent living</i>), including monitoring the effects of the 'Empty Homes Initiative' and Move-On Strategy on achieving the LAA2 target</p> <p><u>objective 4:</u> Strategically review all long-term accommodation based services which includes review and analysis of referral processes and referral routes and identification of the needs of excluded groups of vulnerable people, in partnership with service users, potential service users and other representative groups</p> <p><u>Objective 5:</u> Implement the agreed outcomes of the strategic review of older persons' services including the separation of cost of Alarms from housing-related support.</p> <p><u>Objective 6:</u> Explore likely funding sources for handyman services to cover the whole of Kent</p>