

Improved health, care and wellbeing (targets 52-56)
Helping older people and those with disabilities to be independent

Introduction

People are living longer. This provides major opportunities as well as challenges. We will encourage people to plan for their health, social and economic wellbeing in old age and champion senior citizens. We will lead by example to promote a positive image of older people and the value their contribution makes to community life.

Most older people want to live independently in their own homes for as long as possible and this is also true for younger people with disabilities or mental health problems. We will move away from traditional care models towards providing greater choice and control, giving people the support to lead their lives as they want, in their own homes.

52. Increase the number of people supported to live independently in their own homes. This will include:

- **Encouraging the development of more housing for older people, disabled people and those with special needs.**
- **Encouraging more people to take control of their care / support through Direct Payments.**
- **Taking advantage of new technologies, such as expanding our Telehealth and Telecare programmes.**

Why is this a priority for action?

Promoting independence means that older people, or people with physical or learning disabilities or mental health problems:

- live in their own home (or live as independently as possible within a residential home).
- have a choice over the support or services that they get.
- are in control of the support or services that they get.
- control how their health needs are met - particularly if they have long-term illnesses or conditions (e.g. diabetes).
- are supported and encouraged to be in paid work, voluntary work, education or training if they are of working age.
- are encouraged to have active lives and be full members of the community.

Although people are living longer, some are not getting the full benefits of a long life because they become ill and dependent. Kent's population is ageing, and by 2010 there will be an additional 27,000 people over 65. Most will be very healthy and independent, but some

will need help to stay that way, and others will need services. Because of welcome improvements to medical care, the number of people with physical or learning disabilities is increasing too. When people are helped to live independently, they have a better quality of life. Evidence also shows that people who are helped to stay independent need less support from Health, Adult Social Services and voluntary organisations in the future. This means that promoting independence is good for individuals AND reduces the future burden on taxpayers and communities.

Appropriate housing is vital in promoting independence and wellbeing. Kent County Council will continue to work closely with District and Borough Councils to ensure housing is provided for vulnerable groups with special needs. This links with target 40 (ensuring that new housing developments have the right infrastructure), with its emphasis on Lifetime Homes.

Technology to support people with particular needs is developing rapidly and we must continue to make the most of the opportunities that it brings.

What have we done so far?

- We currently support about 30,000 people to live in the community through providing domiciliary care, day care, respite care and other support through the voluntary sector. In the past many of these people would have had no choice but to go into residential and nursing care.
- We provide 27,000 people with housing-related support.
- Worked with Health and the voluntary and private sectors to develop services which help people:
 - who are coming out of hospital to regain their independence.
 - to be treated at home instead of going into hospital.
 - with increasingly severe and complex conditions to remain in their own homes.
- Developed Direct Payments (where people are given money to buy the support services they want), to give people more freedom, flexibility, choice and control over their lives. We have put enormous effort into making it as easy as possible for people to use Direct Payments. For example, we developed a Client Money Service where KCC manages people's finances whilst enabling them still to have overall financial control. Over 1,000 people in Kent have now taken up direct payments.
- Direct Payments are being actively promoted, leading to a significant increase in take up. There are now 1518 people using Direct Payments in Kent. The Kent Card is now being used by 100 people as a banking option for Direct Payments.
- Recognised that technology can be used to help people to live independently. For example, we have developed Telecare, which

uses technology to alert and call people if a person needs help, and Telehealth, which lets people monitor and look after their illnesses. Telecare reduces the risk for people who want to remain independent at home. Telehealth is an opportunity for people across Kent with a clinical or social care need to get involved with a monitoring system that aims to reduce the number of times they need to visit their GP or go into hospital.

- The Kent Telehealth pilot was deployed across the county and is now being mainstreamed in partnership with Health and will contribute to Local Delivery Plans of the Health service. The pilot laid the foundations for the Whole Systems Demonstrator.
- The Kent Telecare Project has reached 976 clients across Kent. The service is ongoing in the 6 Districts in which the service has been rolled out and is viewed locally as a mainstream service option.
- Whole Systems Demonstrator (WSD) is a DoH programme which will examine the effect of TeleHealth and Telecare. The programme is of national significance and will be evaluated by a team of independent academics commissioned by the DoH. This is a partnership programme with both West Kent and Eastern Kent & Coastal PCTs. Under this programme there will be 1333 *new* recipients of TeleHealth and 1333 *new* recipients of Telecare. We are now beginning to roll this out.
- The Brighter Futures Group (BFG) is a partnership between KCC, PCTs and voluntary and community organisations aimed at helping older people remain independent. It is funded with £1.38m from HM Treasury. The programme targets those people aged over 75, who are living alone, in poor housing and on a low income. It seeks to reduce the isolation and loneliness that older people can face and help them stay comfortably and independently in their own homes. The programme currently runs in the Ashford, Maidstone, Tunbridge Wells, Tonbridge & Malling and Sevenoaks areas. The BFG website can be accessed via the following link: www.kent.gov.uk/bfg and is updated on a regular basis. The website also has links to many of the partner organisations websites. A film has recently been produced of the BFG services which will be used as a means of showcasing the services to assist in seeking future funding, as well as marketing the services. A formal evaluation of the project is being carried out by LSE.
- Through the Supporting People Programme, we have helped develop and fund about 1,200 units of short-term accommodation, just under 1,000 units of longer-term supported housing, and a range of 'floating support' services for vulnerable people living in their own accommodation.
- We are already delivering 344 supported housing apartments for older people, people with learning disabilities and those with mental health problems. This is in partnership with 10 district councils and one of the most unique PFI projects in the country.

- Work is progressing well on developing more housing for older people, disabled people and those with special needs. Accommodation for older people and for people with mental health problems are areas where we are making particularly good progress and there will be schemes developed by 2010 and more planned for development.
- Based on current work, we fully expect there to be at least 417 new housing units built and ready for occupation by 2010. Of these, 40 will be built in 08/09 and 377 will be built in 09/10. District Council partners and KASS continue to work together, even more closely and as a result some excellent developments are planned in the housing growth areas to agreed design standards.

What extra work do we need to do between now and 2010?

We want to help even more people to gain from the benefits of living independently, and to encourage people to do what they can to stay healthy and independent in the future.

We will therefore increase the number of people living independently by 3,000 by:

- Reducing the number of people going into hospital as an emergency admission.
- Further increasing the take-up of Direct Payments.
- Giving more disabled people and those with long-term conditions (including mental health problems) the chance of paid employment.
- Giving more people the chance to take part in activities they enjoy regardless of their age or impairment.
- Making new technology available to more people who would benefit from it.
- Expanding delivery of personalised equipment and adaptations to disabled people in their own homes.
- Provide preventative services.

How we will do this:

Services to help people live at home

- Provide simple information in easy-to-understand language, and in different formats, which is easy to find, so people know where to get help when they need it.
- Work with Health, voluntary organisations and the private sector to develop more services to help people to live at home. In doing this it will be vital that we all work together to find the extra money that will be needed to do this.
- Provide more services to help people recover at home from strokes, accidents and other illnesses including recuperative care within people's own homes.

- Improve support to carers (see **Target 53**).
- Improve the support we give to young disabled people as they leave school and become independent adults (see also **Target 55 on Transition**).
- Increase the number of people accessing equipment through direct provision.
- Work with the voluntary and community sector and other partners to increase opportunities and support for people to participate in the community, including taking up meaningful employment where desirable, regardless of their age, disability or illness.
- Increase community participation and volunteering so that more active people are encouraged to help those who need support.
- Help people with long-term illnesses and conditions to develop a greater understanding of their illness so that they are not always dependent on professionals to make decisions about their illness.
- Promote the 'social model' approach to disability, which looks at how barriers can be taken away so that people can have equal access to their community and the same opportunities as their non-disabled peers.
- Implement and roll out the Brighter Futures Group project, which encourages active older people to provide support to older people who need it and their carers.
- Funding for Brighter Futures Group ceases at the end of September 2008. The BFG Board and project staff are developing a future funding strategy to assist projects to remain sustainable once funding ceases. As projects have evolved, some have diversified and expanded. E.g internet cafes, more exercise classes, and Healthy Lifestyle Sessions.

More suitable housing

- Increase provision of more stable, longer-term accommodation of a decent standard with flexible support to enable people to participate in the community.
- Work closely with district councils to encourage the building of new accommodation. Furthermore through closer links with district councils and other agencies, develop a more effective usage of existing stock (for example bringing back into use empty homes – see Target 39 - or private sector leasing).
- Enable/facilitate shared ownership for vulnerable service user groups, e.g. the disabled and those with mental health problems.
- Identify new housing developments and refurbish existing housing to meet standards and need.
- Deliver a further Housing PFI with four District Councils (Ashford, Dover, Thanet and Tunbridge Wells) for 182 Extra Care and Supported apartments for vulnerable people.

- Work with partners in housing growth areas (Dartford, Gravesham and Ashford) and identify opportunities with other District Councils to maximise the target and pursue joint partnership working opportunities.

New Technology

- Expand TeleHealth and Telecare and, given their success, seek new ways of using technology to promote independence.
- As people usually know themselves better than many of the professionals dealing with them, they can assess their own needs at a time and place that suits them. We will do this by expanding and developing the self-assessment website www.kent.gov.uk/selfassessment and other such projects.
- From April 2008, it is planned to roll-out the technology of both Telecare and TeleHealth to intervention groups totaling 833 for each and to identify delayed delivery groups totaling 500. The anticipated completion date is July 2009. These will be county wide and will be over and above the figures already receiving the service.

Direct Payments

- Launch the Kent Card and continue to make it easier for people to take up Direct Payments (Direct Payments website is www.kentdp.co.uk and telephone number 01304 841987). The Kent Card has been developed with the Royal Bank of Scotland. Money will be loaded on to a Visa card and individuals will be able to use this to purchase support to meet their identified eligible need.
- Develop 'In-Control' (an approach to enabling the individual to have control across all the resources available to them so that they decide how to access any support they need) and other ways of giving people greater control across a wider range of services.
- In the future development of Direct payments, individual budgets and personalisation, Active Lives For Adults (ALfA) will play a significant part. This is a major cultural change, which will see a shift in emphasis away from 'managing care packages' and towards personalisation and self directed support. We are working towards a position over time when every person will have a personal budget. We are also implementing the In-Control model, which will give people greater choice and control over their lives.
- A resource allocation system based on self-assessment is being developed, so that people can be told how much money is available to them at the start of the process i.e. at the assessment stage. By knowing how much money is available over the period of a year, people can plan their lives in a better way and achieve identified outcomes.

- We are developing a co-ordination role within KASS and independent brokerage within the community to support people in planning and managing their personal budget. People can choose to manage the money themselves and therefore receive a Direct Payment or have the money and support managed for them.

What will it mean for you?

More older people and disabled people enjoying a happier, healthier life in their own homes, contributing to community life, and planning for a secure old age.

For further information, please contact our Heads of Adult Services - Chris Belton (01732 525221) or Anne Tidmarsh (01233 652130) or).

53. Strengthen the support provided to people caring for relatives and friends

Why is this a priority for action?

Carers provide unpaid care for partners, relatives and friends who need help because they are ill, frail or disabled. A substantial amount of care is provided in Kent by both adult and young carers. Whilst many receive some support, others do not, so it is crucial that we carry out assessments for carers at an early stage and then provide the support needed, either directly or by signposting them to other agencies.

To ensure the right support is provided we must involve carers in the planning and design of services and encourage and facilitate other statutory and voluntary sector organisations to do the same.

What have we done so far?

We have recognised the critical importance of carers. We have begun developing support services which offer carers such things as 'short breaks'. In developing services for carers our close work and investment in the Voluntary Sector has been and will continue to be crucial.

Young carers have played an active part in not only developing a multi-agency young carers strategy, recently launched for consultation, but also the launch event itself. Carers and carer support organisations regularly meet to discuss adult protection issues and are involved in a variety of consultation events. Carer support organisations regularly ask for feedback via carers forums and questionnaires and pass this information to us.

KCC, in conjunction with some DoH funding, has commissioned the Personal Social Services Research Unit (PSSRU), University of Kent, to undertake a research study to develop a quality of life survey that is sensitive to carers. This survey will focus upon exploring the key aspects of quality and outcomes that are important to carers who are in receipt of services. The learning from this will inform the DoH Personal Social Services User Experience Survey for 2010, which may be a carers satisfaction survey.

A Carers Steering Group, chaired by a carer, with several other carers on the group as well as representatives from Carer's forums and voluntary organisations, has been established to oversee this work.

Ten focus groups were conducted in Kent: four with adult carers via existing support groups; four with young carers via Young Carers Projects; and two with care managers. Twenty adult carers volunteered from four support groups, which supported groups for carers of people with dementia, carers of people with learning disabilities, carers of people with severe and enduring mental illness, and a mixed group. Twenty one young carers (of secondary school age) took part from four Young Carers Projects. Care manager group interviews were held with ten care managers from East and West Kent. Some one-to-one interviews with carers from the Black and Minority Ethnic community are in the planning stage.

We have collected descriptive information about the participating carers, so will be able to describe various characteristics, including age, gender, ethnicity, the needs of the cared for person and the cared for person's experience of help and support. We have recruited 30 carers to take part in the cognitive testing of the Survey questions, which is scheduled to take place during late February – April 2008.

KASS continues to provide a range “short breaks” which mutually benefits carers and the people they support. These include day care, support in the home, overnight care, adult placements and emergency breaks.

The Kent Children's Trust County Board ratified the Young Carers Strategy, Implementation Plan and Commissioning Strategy on 31 January 2008. Funding to support the implementation of the Young Carers Plan, focused on developing work with schools, is in place. A survey of all schools has taken place, requesting schools to identify the number of known young carers, how these young people are supported and whether the school would like more support. Guidance for schools on how to support young carers has been developed. A Governor training package regarding the needs of young carers and how schools can support them, is in development and plans to brief governors in place.

170 anonymous Kent young carers have been identified and their educational achievements and attendance is being tracked. Young carers aged 16+ who remain at school and who attend carers projects are now able to access the Learning Support Grant. A multi-agency training DVD has been commissioned to support all agencies in developing a better understanding of the needs of young carers. Young carers over 11, who attend a local young carer's project, will be given the opportunity to have access to a local leisure centre.

In Mental Health, a carers support group is funded in each locality in Kent. These provide advice, support and information to carers of people with functional mental health problems. This is both one to one support and also support groups that meet regularly. Carers are also supported to participate in the decision making meetings about the commissioning of mental health services, so that their views are heard and taken account of in planning services. A robust structure to ensure participation has been put in place in partnership with the Kent and Medway NHS and Social Care Partnership Trust.

We have, in partnership with the NHS, developed the role of carers assessment worker within Community Mental Health teams. These workers ensure that carers' requirements are considered and assessed as part of each service user's care plan. Carers are put in touch with the carers support service that can arrange respite using specially identified carers breaks money.

What extra work will be done between now and 2010? We will:

- Improve the information we give to carers. We will be clear about what support is available where, for whom and by whom. Information will be accessible and available via websites as well as leaflets. Carers will be signposted in the right direction.
- Pilot the City and Guilds "Learning for Living" Programme for carers. This is an e-learning programme aimed at breaking down the barriers to learning and work for unpaid carers. The pilot is between Kent Adult Education, the Adult Services Directorate, North West Kent Carers Support and Dartford, Gravesham and Swanley MIND.
- Develop the Expert Patient Programme (EPP) and "Looking after Me" programme for carers. The EPP is a course for anyone with a long-term health condition and aims to help them take more control over their health and therefore manage their condition better. The "Looking after Me" programme is a similar course for people with long-term health conditions and who also care for a relative, or friend with a disability or illness.
- Implement the Kings Fund Quality Standards for Local Carer Support Services. These standards, developed with carers and based on carers' views of quality are designed for services aimed

at supporting carers. They include information, providing a break, emotional support, support to care and maintain carers' own health and having a voice.

- Involve and regularly consult with carers, evidencing how the consultation and their involvement has made a difference.
- This target is linked with other targets including: through our Kent Supporting Independence Programme, work towards reducing the number of people dependent on welfare benefits (no.9), continue to offer and develop further multi-agency support to parents by helping them with the problems they and their children face in everyday life (no.13), listen to young people's views and opinions and develop their ideas to improve life in Kent (no.14), support and encourage the large number of local and voluntary groups in Kent (no.28) and expand the Kent Volunteers Programme (no.63), increase the number of people supported to live independently in their own homes (no.52), work with colleagues in the health service to reduce the number of avoidable admissions to hospital and combine resources, where appropriate, to improve the health and wellbeing of the people of Kent (no.54) and improve older people's economic well-being by encouraging the take-up of benefits (no.56).
- During the next year the focus on work with carers is going to have an even greater profile. In the Summer the Government are going to launch a national Strategy for Carers. This has been a major piece of work involving carers and carers organisations across the country, including Kent. The Carers grant will be allocated as part of the Area based grant through the Local Area Agreement framework.
- Within KCC, the recent Select Committee Report "Carers in Kent" has had a major impact on planning future work. We are developing an implementation plan to take forward the recommendations from the "Carers in Kent" report by the Select Committee.
- Continue to develop services, which meet the needs of carers in line with the Select Committee recommendations.
- Progress the expansion of the "Learning for Living" Programme for Carers which was successfully tested in north west Kent. A multi-agency group has been established to plan, develop and implement the Kent Adult Carers Strategy, which will be informed by the national Carers Strategy.
- We propose to set up a Carers Advisory Group to inform services planning and commissioning with the aim of enhancing choice and flexibility for adult carers as part of the personalisation of adult social care. An annual carers report will be produced to demonstrate the state of carers support arrangements.
- Continuously update accessible information about carers rights and services available to them. KASS will work together with Health to support carers in delivering requirements of the NHS operating framework. We will also ensure that policy on people

who fund their own care reflects carers rights and support, as those financially supported by KCC and the NHS. We will explore how a national information line can link to local carers information sources.

- We have been successful in reducing the use of inpatient facilities for people with functional mental health problems, but recognise that people spend more time in the community and this may mean additional burden on carers. We will provide additional funding for carers support services in mental health, so that more carers can be better supported and have greater opportunities for training through carers educational and support programmes.
- Between now and 2010 we will also further develop our capacity to offer carers breaks to ensure that a funded carer's break can be accessed in all localities in Kent.

What will it mean for you?

Carers will be assessed and receive a range of support services to help them in their caring roles.

For further information, please contact Mary Silverton, Policy Manager (01622 694895).

54. Work with our colleagues in the health service to reduce the number of avoidable admissions to hospital and combine resources, where appropriate, to improve the health and well-being of the people of Kent.

Why is this a priority for action?

We want to improve the level of care in the community and the quality of services and to increase people's choice over how and where they receive support. The NHS and the social care sector in Kent need to work closely to:

- share resources and thus free up resources to re-invest in frontline care.
- ensure that people are treated in the most appropriate place and only those that need to go to hospital do so.
- help people to leave hospital as soon as possible once they are ready to be discharged.

In order to ensure that effective discharge of patients takes place at all times, joint working will address the risk of bed blocking and prolonged hospital stays.

What have we done so far?

KCC and the NHS in Kent already have a very good record of working closely together, for example:

- Adopted a fully integrated Mental Health Service. The Trust is currently making application to gain 'Foundation Status'. Should this application be successful, it will add another significant dimension in our working relationship with the Health Service
- Adopted a fully integrated Learning Disability Service.
- Jointly worked in preventative services, such as providing intensive community support care packages to reduce the number of people going into hospital.
- Appointed a seconded Director of Public Health with commitments to a permanent appointment.
- Joint Strategic Needs Assessment. This is a joint assessment undertaken in partnership with Health to identify the future needs of the population of Kent and thereby facilitate joint planning and commissioning. The Assessment has recently been presented to cabinet.
- The Public Health Department is now firmly established in KCC. A Public Health Strategy and an action plan flowing from it has been published and this is now being implemented.
- Active Lives for Adults (ALfA). This is a major cultural change, which will see a shift in emphasis away from 'managing care packages' and towards personalisation - supporting people in identifying how best to meet their own needs. It will transform all front line services. Integral to this project is the joint work with the NHS and there is a dedicated Health workstream as part of the project.

At an operational level, a wide range of initiatives continue to be developed in partnership with Health. These include the following projects and initiatives:

- Close working with Intermediate Care teams across East Kent has ensured that people are able to access therapeutic interventions without hospital admission, either in the Registered Care Units or in their own homes. The Intermediate Care teams now include the Occupational Therapists who work in Recuperative Care.
- Fast Track Assessment and provision of community equipment and minor adaptations provides a quick response to enable people to receive essential services to prevent falls and enable greater independence. Trusted Assessors are trained to allow provision of equipment through one assessment approach.
- INVOKE (Independence through the Voluntary action of Kent Elders) is the project that has been developed out of the successful POPs bid. It is a project that has been developed in partnership with East Kent and Coastal PCT. Community matrons have a significant role. The project has 18 Community Matron support workers linked to it. The project is designed to give older people greater independence, enhance

self-management through increased choice and control. It also aims to reduce hospital admissions. The feedback from the project, which has been recorded in articles in a range of Newsletters, is very positive.

- The partnership with Health in developing the Whole Systems Demonstrator, already described in detail in target 52, is another initiative which is supporting the development of this target.
- We continue to work closely with the Health Service in the investment of the re-imburement grant into community schemes to avoid people having to be admitted to hospital. In partnership with Health this has enabled small, local, community based schemes to be set up – for example falls schemes’, which support old & disabled people who might well have ended up staying in hospital after experiencing a fall.
- East Kent has been selected as DoH Demonstrator Sites for Urgent Care. Again this is in full partnership with the Health Service. The aim of the programme is to treat people closer to home, to prevent hospital and long term care admissions and to provide better, integrated care in a person’s own home. A rollout programme of Intermediate Care for East Kent is part of the project and this again is aimed at providing care and rehabilitation in the person’s own home where possible. This project is now operational and is beginning to have positive outcomes.

What extra work will we need to do between now and 2010? We will:

- Develop a still wider range of services. For example, work with GPs to make ‘practice based commissioning’ a success. This in effect will mean working with GPs to ensure that commissioning of primary care services take into account the social care needs of patients.
- Joint working with the Primary Care and Acute Trusts, GP practices, the voluntary and community sector, Districts and Boroughs will ensure that the relevant specialist equipment is available to health and social care practitioners, ultimately making the equipment available to the people who need them.
- Work with Children, Families and Education and the drug and alcohol services to ensure that vulnerable young people receive the support, advice and counselling required whilst providing Education, prevention and treatment.
- Next year there will be an even greater emphasis on close working with the Health Service. On a National Level, there have recently been a series of publications from the Government, ‘Putting People First’, Transforming Social Care and Valuing People Now – all of which put a firmer emphasis on the close working relationship with Health.
- The summer will also see the launch of National Carer and Dementia Strategies, which will have similar expectations.

- Within Kent, the Joint Strategic Needs Assessment described above will be important. This has recently been presented to Cabinet and the actions from it will be key to the delivery of this target. For example, it will be critical in how and what services are provided jointly to the people of Kent.

The outcome of the application for Foundation Status by the Mental Health Trust will also have an impact on future work with the NHS.

At an operational level we will:

- Expand the Fast Track service to the twelve Districts on an ongoing basis and more training of Trusted Assessors will take place between now and 2010.
- Continue with the development of INVOKE, & Urgent Care Demonstrator.
- Continue with the implementation of TeleHealth & Telecare as outlined in target 52.
- Continue to develop preventative services, such as providing intensive community support care packages to reduce the number of people going into hospital.

A major piece of work for this year, as outlined in 'Valuing People Now', will be the transfer of responsibility of those people with a Learning Disability being looked after by the NHS to the Local Authority.

What will it mean for you?

More people treated in their home or in the community, rather than in hospital, and people having the right level of support, based on need, to prevent admission to hospital or ensure they make a full and rapid recovery upon discharge.

For further information, please contact our Heads of Adult Services - Chris Belton (01732 525221) or Anne Tidmarsh (01233 652130) or Jan Harker, Head of the Occupational Therapy and Disability Sensory Unit (01622 221835).

55. Ensure better planning to ease the transition between childhood and adulthood for young people with disabilities and to promote their independence.

Why is this a priority for action?

Growing up, leaving school and learning to become independent is a challenge for all young people. But for young people with disabilities it can be harder still, and we need to ensure that the right support is available to enable them to be as independent as possible. If we get it wrong, there is a danger that they will not achieve their potential or

the quality of life that they are capable of having. We want to make the transition experience better and to enable young people to live as independent adults.

What have we done so far?

We have strong processes in place for transition planning but feedback from our service users demonstrates that transition planning needs to be further improved for young people with disabilities and their families. The following are now in place:

- We have established a working group which involves Health, Education, Social Care, Connexions and the Learning and Skills Council to improve service planning and the delivery of educational, social care and health services.
- All the partner organisations have signed up to a common set of key principles and values which will inform how we would improve services for young people with disabilities.
- The Partnership has developed multi-agency Transition Protocols, which are in the process of being signed off by each organisation. These will ensure that there is a clear process as to what support young people will receive through transition and how the different services will interact.
- Work is ongoing in identifying all Kent young people who may need additional support with their transition into adult life. With the young people and their carer's consent, this will link together basic identifying information held by Education, Health and Social Care agencies. It will ensure that no one who needs and wants support through transition will be missed.
- KCC has commissioned independent research into young adults and their recent experiences of transition and the quality of the support they received. This will form a baseline for this target. The research will also develop tools that will enable an annual survey to be conducted. This will provide the annual measure of young people's satisfaction with the support they receive during transition.
- Kent has been short-listed as a "Getting a Life" pilot site. This is a cross-departmental Government project, co-ordinated by the Office of Disability Issues, to improve the life chances of young people with learning disabilities. Successful short-listing is an indication of how Kent's partnership approach to transition is viewed nationally.

What extra work will we need to do between now and 2010? We will:

- Improve partnership working to ensure all organisations have information on all young people with disabilities who will be becoming independent.

- Work with young people with disabilities and their families to make transition more integrated and tailored to individual needs.
- Ensure that there is continuity of care and support for disabled children and young people which enables them to have equality of opportunity with their peers to participate in education, training and employment opportunities.
- Encourage the take-up of Direct Payments, as this is becoming popular with young adults because of the flexibility and control it gives them over their lives to enable them to live independently.
- Work with housing departments and associations, employers and training providers (including training in independent living) are all key elements of this target. Key partners in delivering this target include the Learning Skills Council, District Councils, Connexions, Social Enterprise and Supported Employment schemes and other voluntary and community sector partners (such as RPS Rayner (16+) and Upfront).
- Ensure that the outcomes are supported by other targets particularly: listen to young people's views and opinions and develop their ideas to improve life in Kent (no.14), increase the number of people supported to live independently in their own homes (no.52), and strengthen the support provided to people caring for relatives and friends (no.53).
- Implement the Transition Protocols across all agencies, which will be phased in from April 08, with full implementation by April 09. An annual survey of young people who have gone through transition, based on research tools developed by the Tizard Centre, University of Kent, will take place. This will give a robust measure of satisfaction, by the people who are best placed to say if the support in their transition was good.
- Develop Young People, Carer and Easy-Read Guides to the Transition Process. This will ensure that every young person and their families will know what support they will receive and how to access it. We will continue the encouragement of the take up of Direct Payments for both Young People aged over 16, and for Adults. This increases both flexibility and control for individuals, enabling them to live their lives more independently.
- Widen the Transition Partnership to include representatives from the District Councils, Housing Associations and Employment and Training organisations. This will increase the opportunities for young people to move to full adult life with more integrated access to housing and employment opportunities.

What will it mean for you?

Better experiences for young people with disabilities and their families through the transition period, resulting in greater opportunities for their independent living and participation in community life.

For further information, please contact Michael Thomas-Sam, Head of Policy and Service Development in Adult Services (01622 694843) or Colin Feltham (Head of Additional Educational Needs and Resources in Children, Families and Education (01622 605729).

56. Improve older people's economic wellbeing by encouraging the take-up of benefits.

Why is this a priority for action?

For older people to keep healthy and active, they need enough money to cover their basic needs. Older people who are living in poverty are much more likely to have ill health and to need support from health and social care services. That's why we must ensure that older people on low and middle incomes claim the benefits to which they are entitled and to which they have contributed throughout their lives.

What have we done so far?

- Older people receiving social care services are already offered information, advice and, if necessary, assistance by their care manager to claim the relevant benefits. Since April 2007, all areas within Kent Adult Social Services are covered by our new Specialist Finance Teams which include visiting officers specially trained to provide benefit advice and assistance with claims. If cases become complex or there is a need to challenge a decision of the Department of Work and Pensions (DWP), service users are referred to one of our Area Benefit Officers who will assist with this including representing service users at appeal tribunals.
- The KCC County Benefit Service also operates a Benefits Helpline and provides training in benefit issues to staff. Both of these services are available to voluntary organisations. They also have a Benefits site on KCC's public website www.kent.gov.uk/benefits-information. This provides information on all the major benefits with links to relevant government and District Council sites.
- Kent has been working with the DWP and District Councils and is working towards the creation of joint teams. This should lead to a better experience for service users who will not need to provide financial information to so many agencies and a higher take-up of the relevant benefits.
- Kent has, with the District Councils and DWP, set up the Kent Benefits Partnership to increase the take up of council tax benefit amongst the older residents of Kent. They are now helping clients to claim other benefits to which they are entitled.

What extra work will we need to do between now and 2010? We will:

- Carry out media campaigns to increase take up of specific benefits. Such new avenues as Kent TV will be helpful in this.
- Build upon the work of the Kent Benefits Partnership to increase the range of benefit advice.
- Build upon the successful Finance and Benefit Teams, for example furthering the development of joint working with the Pension Service and District Councils. This should lead to a better experience for service users who will not need to provide financial information to so many agencies and a higher take-up of the relevant benefits.
- Be involved with joint take-up campaigns with the voluntary sector.

What will it mean for you?

- Older people in Kent receiving all the benefits they are entitled to, with the various agencies involved working together to make accessing benefits simpler, less time consuming and less stressful for older people.

For further information, please contact Chris Grosskopf, County Benefits Manager in Adult Services (01622 694896).