

By: Graham Gibbens, Cabinet Member, Adult Social Services
Oliver Mills, Managing Director, Kent Adult Social Services

To: Adult Social Services Policy Overview Committee –
22 September 2009

Subject: **TOWARDS 2010 – ANNUAL REPORT**

Classification: Unrestricted

Summary: This report sets out the process for finalising the third *Towards 2010* Annual Report prior to approval by County Council and attaches a draft of the report (for the five Kent adult social services-related targets) for Members' comment.

Introduction

1. *Towards 2010* was formally launched in September 2006. Annual reports on progress against all 63 targets are discussed and approved by County Council each autumn. The purpose of this report is to present the annual position of the five KASS targets and set out the process for finalising the Annual Report prior to presentation for approval to County Council on 15 October 2009.

2. Those *Towards 2010* targets relevant to this committee are shown in the table below together with the relevant status:

Towards 2010 Target	Status
Target 52: Increase the number of people supported to live independently in their own homes. This will include: <ul style="list-style-type: none">• 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	Done and Ongoing
Target 53: Strengthen the support provided to people caring for relatives and friends	On course
Target 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	On course
Target 55: Ensure better planning to ease the transition between childhood and adulthood for young people with disabilities and to promote their independence	On course

Target 56: Improve older people's economic well-being by encouraging the take-up of benefits	On course
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Please note that where targets are cross-directorate they will be reported to all relevant Policy Overview Committees.

3. The separate reports for each target include the following elements:

- Status of the target (either 'More progress needed', 'On course' or 'Done and ongoing')
- List of partners with whom we are delivering this target
- Outcomes delivered so far
- What more are we going to do to deliver the target
- Measurable indicators (where relevant – as agreed at County Council in December 2007).

Approval Process

4. The draft Annual Report will be discussed at the September meetings of all Policy Overview Committees to enable Members to comment on the early draft prior to its finalisation for the Cabinet and County Council meetings.

5. Each Policy Overview Committee will receive the draft reports on the relevant targets relating to their committee's accountabilities. Attached is a draft of the reports for the five Kent Adult Social Services-related targets in the above table.

Recommendations

6. Members are asked to **DISCUSS and APPROVE** the report

Lead Officer:

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Background documents:

T2010 second year annual report. Taken to ASSPOC Sept 2008.

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Target 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

Lead Cabinet Member:
Graham Gibbens

Lead Managing Director:
Oliver Mills

Lead Officers:
David Weiss, Cathi Sacco, Mike Dorman, Michael Thomas-Sam

Status: Done & Ongoing

List the partners with whom we are working to deliver this target:

The success of this target depends on a wide range of activity and partnerships.

Partners include:

- 12 District Councils
- Registered Social Landlords
- Health - PCT's and Mental Health Trust
- Voluntary Agencies – who manage many of the support projects
- Private Sector – e.g. home care providers
- Training Providers such as local FE Colleges - delivering specialist courses on independence for care workers and personal assistants
- Other Statutory Agencies including Police and Ambulance Service

Furthermore the success of this target is closely linked with the performance of other targets in Towards 2010 – particularly those related to health issues in this section.

Outcomes delivered so far:

Housing to Promote Independence. A key aspect of this target is the development of suitable housing to enable people to live independently. A number of housing schemes catering for people with a whole range of needs from older people, through to people with learning disabilities have been developed through PFI's in partnership with District Councils (see previous Annual Reports for more detail). The outcome is based on current work and we fully expect there to be at least 417 new housing units built and ready for occupation by 2010.

Kent Adult Social Services is now represented at the Kent Housing Group and promotes this target with partner Housing Commissioners and providers in Kent.

Direct Payments are being actively promoted, leading to a significant increase in take up. There are now 2,342 people using Direct Payments in Kent. The Kent Card is now being used by 831 people as a banking option for Direct Payments. The outcome has been to give more people the opportunity to have control over the package of support which enables them to live independently.

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TeleHealth and Telecare. These are preventative interventions which embrace new technology to enable people to remain in their own homes. As documented in detail in previous reports, Kent has been a Whole Systems Demonstrator (WSD) site (only 3 were selected by Department of Health). Kent already were forerunners in the development of such interventions and the WSD project enabled Kent to offer the benefits of TeleHealth and Telecare to far more people. The outcome will be for 1,000 extra people to be offered Telecare and 1,000 extra people to be offered TeleHealth. The majority of this work will be completed by the end of the year. The programme end date is July 2010.

Localised Community Based Prevention. KCC continues to invest in a wide range of innovative preventative schemes. These include:

- *Brighter Futures*, which encourages more able older people to support more needy people through volunteering. Originally piloted in West Kent this is now being expanded across the County, but ensuring each project is tailored for its local community.
- INVOKE – described in more detail in Target 54.
- A whole range of local projects often delivered by the Voluntary Sector focusing on a wide range of issues from dementia to ‘falls’ projects.

The outcome has been to enable more people to remain independent. Evidence of this can be seen in the recent Care Quality Commission Inspection of Kent Adult Social Services¹.

Active Lives for Adults (ALfA) is a major change programme focussed on promoting personalisation and independence. In short, enabling people to have more choice and control. New services built around this ethos are being implemented including:

- Enablement services² have been extended substantially. These services are provided in peoples’ homes and are aimed at providing a quick, time limited, response to people who need help to regain their confidence and skills in order to remain independent in their home.
- The Good Day Programme which is transforming day support for people with Learning Disabilities, offering more opportunities and choice.

Safeguarding. To enable people to live independently it is important people feel safe from abuse. KCC with its partners have a strong multi- disciplinary Board which has led on ensuring that safeguarding vulnerable adults is a high priority. Further evidence to support this can be seen in the recent inspection report³.

What more are we going to do?

Promoting Independence continues to be the overall objective which will be driven by Active Lives for Adults. This is a programme of total transformation for all of Kent Adult Social Services whether directly provided or commissioned from other agencies. It will deliver a structure and culture that supports people to develop solutions to their needs, from an increasingly responsive and diverse market place. Fundamental to this is Self-Directed Support (SDS), whereby people can self manage their support or, if they choose to, have somebody else (including Kent Adult Social Services) manage it for

¹ Independence Wellbeing and Choice Inspection

² See previous Annual Reports for more detail.

³ Independence Wellbeing and Choice Inspection

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them. KASS is currently in the middle of implementing this major programme and it will be progressively rolled out during 2009/10.

Fast Track Equipment. Last year a new innovation of enabling delivery of core equipment through the County Duty Service was piloted. It proved successful and is now being rolled out across the County. This fast-track system allows equipment to be delivered quickly following first contact. It will also extend to deal with NHS requests. The outcome of this is to enable people to have fast access to equipment, vital in maintaining independence.

As part of the ALfA programme a strategic review of older people services is being undertaken to ensure that these services are shaped to meet the challenges of personalisation and Self- Directed Support.

Housing. Based on the success of Better Homes/Active Lives we have, in partnership with 5 District Councils, developed another PFI bid to deliver 228 units of social housing for vulnerable people.

A Housing Action Plan has been developed to focus on the needs of people with Learning Disabilities as part of 'Valuing People Now' and implementation of this has begun. The Outcome is to ensure suitable housing solutions are available to enable people with Learning Disabilities to be independent

Telehealth & Telecare. These will continue to be a significant part of our preventative strategy and will continue to expand. The outcome will be to enable more people to be supported independently.

Community based Preventative Services. We will continue to develop preventative services with the private and voluntary sector in partnership with the Health Service. The outcome of this continued work will be to enable more people to live independent fulfilled lives within their community.

Safeguarding. Following the Independence Wellbeing and Choice Inspection an action plan has been agreed with the Care Quality Commission which will further improve the safeguarding in Kent

Measurable Indicator (s)	2005/06	2006/07	2007/08	2008/09	2009/10 Target
Number of people supported by community based services provided by Kent Adult Social Services (including through voluntary sector funding) to live independently, as at 31 March each year	31,027	31,990	32,983	35,473	34,027

Monitoring completed by: Lead Officers
2009

Date: July

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Target 53: Strengthen the support provided to people caring for relatives and friends		
Lead Cabinet Member: Graham Gibbens	Lead Managing Director: Oliver Mills	Lead Officer: Michael Thomas-Sam, Cathi Sacco, Mike Dorman

Status: On course

List the partners with whom we are working to deliver this target:

- Children, Families and Education Directorate
- Communities Directorate
- Kent Children's Fund
- Carers Support Organisations
- University of Kent
- NHS
- Jobcentre Plus (JCP)
- Kent Drug and Alcohol Team (KDAAT)
- Independent providers

The success of this target is closely linked with the performance of other targets in Towards 2010 – particularly those related to health issues in this section.

Outcomes delivered so far:

The Select Committee Report "Carers in Kent" January 2008 set 14 recommendations for Kent. It was reviewed in January 2009. Many of these recommendations as illustrated in the previous Annual Report have been implemented. The outcome of the Select Committee has been to stimulate and give direction to the activity which supports this target.

Kent Adult Carers Strategy was launched in July 2009; the strategy is Kent's response to delivering the National Carers' Strategy which was published in June 2008. There are five outcomes:

- Improving Information Advice and Guidance
- Access to integrated and personalised services
- Carers having a life of their own
- Carers not being forced into financial hardship
- Helping Carers to stay mentally and physically well

The outcomes will be delivered via multi-agency joint commissioning plans. There will be two plans, one for East Kent and one for West Kent. The NHS, Jobcentre Plus and KDAAT have identified Carers Leads who are working in partnership with KASS to deliver the Kent Adult Carers' Strategy and associated commissioning plans. The plans are due to be completed in autumn 2009.

An Annual Carers Report was launched alongside the Kent Adult Carers' Strategy in July 2009. This report has for the first time:

- Captured the true nature of the support offered to carers in Kent.
- Showed the range and depth of support offered across all sectors.

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Kent Carers Emergency Card Scheme was launched in December 2008. The aim of the scheme is to:

- Provide carers with peace of mind when away from the person that they care for.
- Offer carers as much support as necessary to complete their emergency plan.
- Ensure that County Duty or the Out of Hours service will step in to arrange emergency support if the plan fails.
- Ensure that this support is available to all carers not just those carers of people receiving community care services.
- Increase levels of community based respite.

Currently there are over 750 carers signed up to the scheme and the number is growing steadily and the feedback regarding the scheme has been positive.

The Mental Health Matters help-line is now funded from 5pm to 9am on weekdays and 24hrs weekends and holidays. The service is available to carers, and referrals can be made to the Crisis Resolution and Home treatment Teams. This has also received positive feedback.

A Mental Health carer's support group is funded in each locality in Kent. These provide:

- Advice, support and information to carers of people with functional mental health problems
- One to one support for Carers
- Carers Support groups that meet regularly
- Carer's participation in the decision making meetings about the commissioning of mental health services
- Carers Assessment Workers
- Funding for Carers breaks

KASS Carers Assessment Policy was revised in April 2009. This resulted in a trial to outsource the Carers' Assessment to Carers Support Organisations in two pilot sites, Tonbridge and Dover. With the pilot due to end in April 2010 evaluation will take place on a three monthly basis.

Young Carers Strategy 'invisible people' was launched in July 2008 with the following outcomes:

- Guidance has been issued to all schools
- The voice of Kent young carers has been captured by DVD which highlights young carers' issues in training for professionals
- A joint young carers' protocol has been agreed between Kent Adult Social Services and Children, Families and Education to clarify referral routes across Directorates. Training is to begin in Autumn 2009.

The KCC Staff Carers' Leave pilot scheme has been well received and was launched to all staff in June 2009.

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KASS provide a range “short breaks” which benefit carers and the people they support. These include:

- Day care
- Support in the home
- Overnight care
- Adult placements
- Emergency breaks

Information about the number and range of carers services delivered and people support is presented in the Annual Report.

What more are we going to do?

A Carers Advisory Group in Kent has been formed bringing together all the key strategic partners involved in supporting carers together.

Within KASS, training is underway to reinforce the policy implementation and further clarifying duties and responsibilities towards carers to create a far more consistent approach to the assessment and support offered to carers.

West Kent NHS and Kent Adult Social Services have also been successful in its bid to become a Department of Health Carers’ Strategy Demonstrator Site which will bring in about £410,000 over two years.

A group of Carers Support Organisations across Kent has been successful in a bid, fully supported by KASS, to be a pilot site for Caring with Confidence training. This training will form part of learning opportunities developed in conjunction with the joint commissioning plans to ensure that carers are supported as expert partners in care. The first facilitator training has now been completed and the program is expected to commence in the immediate future.

We are exploring mechanisms for information sharing across health, social care and the voluntary sector. Carers Assessments have been considered in discussions regarding Kent Adult Social Services decisions to procure a Common Assessment Framework.

We will continue to develop services, which meet the needs of carers in line with the Select Committee recommendations.

KASS have identified £30,000 for Kent Drug And Alcohol Team to use in order to support carers of people with drug / alcohol problems

KCC, as an employer, is surveying staff to gain an insight into the number of employees juggling caring with employment. The survey will explore if staff would like a Carers’ Staff Forum to be developed.

In addition to the staff survey, Kent Adult Social Services conducted a survey of Carers across Kent, the results were published in July 2009. The purpose of the survey was to measure how satisfied Carers are, with the services they receive from Kent Adult Social Services.

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Measurable Indicator (s)	2007/08 Actual	2008/09 Estimate	2008/09 Actual	2009/10 Target
Satisfaction– based on carer survey. Results published July 2009	New indicator	N/A	68%	70%

Monitoring completed by: Lead Officers
2009

Date: July

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Target 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

Lead Cabinet Member:
Graham Gibbens

Lead Managing Director:
Oliver Mills

Lead Officers:
Nick Sherlock/ Cathi Sacco/ Mike Dorman

Status: On course

List the partners with whom we are working to deliver this target:

The main partners in delivery of this target are the NHS in Kent, particularly the 2 PCT's and the Mental Health Trust. However, the Voluntary and Private Sector in managing many of the community based projects and the District Councils all make significant and valuable contributions to this target.

Furthermore the success of this target is closely linked with the performance of other targets in Towards 2010 – particularly those related to health issues in this section.

Outcomes delivered so far:

KCC has a strong tradition of working closely with the Health Service as evidenced by the established section 75 partnerships. Outlined briefly are some initiatives delivered within the context of this target along with outcomes. More detailed evidence for each of these can be provided if required.

- Joint Commissioning with PCTS. There are Joint Commissioning arrangements in both East Kent and West Kent and Mental Health. There are also Quarterly SMT Meetings. Furthermore, a number of jointly appointed commissioning posts have been established. The outcome is that PCT's, KMPT and KASS have shared priorities at Strategic and Local Levels and resources to commission services to meet these priorities. Evidence of this are the shared cross cutting targets in Kent Agreement 2 (LAA).
- Joint Strategic Needs Assessment. This has been developed as a tool which is being used in identifying joint commissioning priorities. Underneath the overarching JSNA, specialist assessments have been developed around such areas as dementia and mental health. The outcome of these activities has been to ensure that identified priorities and commissioning have been developed from an evidenced based needs assessment.
- Public Health Department. This is now firmly established and led by a jointly appointed Public Health Director. Its agenda for action is set out in The Public Health Strategy (Live Life to the Full) and the Public Health Annual Report. The outcome of the Public Health Department has been to see a wider focus on prevention and health inequalities and develop new ways of working with the Health Service and communities. Such projects as Active Mobs are evidence of this.
- INVOKE⁴ (Independence through the Voluntary action of Kent Elders) is the project that has been developed out of the successful Partnerships for

⁴ More detail on this project have been provided in previous Annual Reports

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Older People bid. This project has introduced a range of initiatives which have supported older people in the community. There are a range of outcomes, which have been drawn out through research and this includes reduction in overnight stays in hospital to ensuring people within the project have received all their benefits.

- Prevention in the Community. Projects in partnership with Health and through joint investment in the Voluntary Sector. This includes *Brighter Futures*, which encourages more able older people to support more needy people through volunteering. Other initiatives range from community support to those with dementia to 'Falls' projects. The outcome has been to enable more people to remain independent. Evidence of this can be seen in the recent Care Quality Commission Inspection of Kent Adult Social Services⁵.
- TeleHealth and Telecare. 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. The outcome of this is to improve the independence, health and wellbeing of people through the use of new technology. This was also evidenced in the recent inspection⁶.
- Reducing delayed transfer of care continues to be an area of high priority across health and social care. There are a whole range of joint initiatives, including Intermediate Care, Enablement, and Rapid Response. Many of these have been described in more detail in previous Towards 2010 reports. The outcome has been to reduce the level of delayed discharges from hospital. This was recognised by the Health Overview and Scrutiny Committee in October 2008 and through the evidence presented to the Care Quality Commission⁷.
- Intermediate Care. In partnership with Health we have developed a wide range of intermediate care projects the objectives of intermediate care are preventing avoidable hospital admission, facilitating safe early discharge from hospitals and maximising people's ability to regain their independence. Intermediate care has played a significant part in tackling delayed discharges from hospital and enabling people to live independently
- Learning Disability. Approximately 400 people will transfer from the NHS to KASS under the Section 256/NHS ACT 2007. This is a huge project which has been outlined in detail in previous Towards 2010 reports. The outcome of this project will be to give this group of people more opportunities of choice and independence. The transfer is rooted in the principles of Valuing People.

The vast majority of the above initiatives will be developed beyond 2010 continuing to deliver better outcomes for people.

⁵ Independence Wellbeing and Choice Inspection

⁶ Independence Wellbeing and Choice Inspection

⁷ KASS submission to CQC for the Annual Review Meeting 30 June 2009

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What more are we going to do?

The major priorities for the next three years focus on working with Health in delivering more personalised services which offer people choice and control – Self Directed Support. A key feature continues to be a focus on community based preventative services, in order to deliver joint priorities outlined in such Strategies as the Carers Strategy, The End of Life Strategy and the Dementia Strategy. A key feature will be the development of shared pathways of care planned jointly. Outlined below are some planned initiatives delivered within the context of this target along with outcomes:

- Mental Health Trust – already well established, the Trust is applying for Foundation Status and the outcome will be to give the Trust more flexibility in setting Local Priorities and commissioning services.
- Joint Commissioning Posts. In line with the major changes needed to implement Self-Directed Support, in partnership with the PCT's, further joint posts focused on strategic commissioning are being established. The outcome of this will be to ensure an integrated approach to commissioning focused on shared priorities.
- Implementation of The Carers Strategy jointly with the PCT's. The outcome will be to put in place more support for carers.
- Whole Systems Demonstrator / Telecare / TeleHealth. The continued implementation of this project will deliver further opportunities for people to use technology to enhance their independence and wellbeing.
- Autistic Spectrum. Recently the KCC have held a Select Committee on this issue and the recommendations have now been published and we will be working jointly to improve the services for this group.
- Common Assessment Framework. We are working with the NHS to develop this through Functional Assessment in Care Environments (FACE). This will mean that we will have a joint co-ordinated assessment process whereby people will only have to answer questions once about their circumstances.

Measurable indicators:

None – This Towards 2010 target has been formally agreed as having an 'aspirational' status and progress is measured via qualitative means.

Monitoring completed by: Lead Officers
July 2009

Date:

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Target 55: Ensure better planning to ease the transition between childhood and adulthood for young people with disabilities and to promote their independence		
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Lead Cabinet Members: Graham Gibbens/Sarah Hohler	Lead Managing Directors: Oliver Mills/Rosalind Turner	Lead Officers: Michael Thomas- Sam/Colin Feltham
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Status: On course

List the partners with whom we are working to deliver this target:

Kent Adult Social Services (KASS) and Children, Families and Education (CFE) are leading the partnership which includes the Kent Learning Disability Partnership Board, Parent Organisations, Primary Care Trusts, Learning Skills Council, Connexions and Schools. We are expanding the partners to include KCC's Communities Directorate, local Further Education Providers and District Councils.

Outcomes delivered so far:

A major driver for the work to support this Target was the Select Committee from which a number of successful initiatives have sprung, overseen by the Transition Board. The

Multi-Agency Transition Protocols are an example of this.

The Protocols set out the clear commitment to every disabled young person in Kent that they will get co-ordinated support to help them move from adolescence to adulthood. The protocols ensure that this transition support will be personalised, co-ordinated around individual needs and reflect the young person's aspirations. The protocol also ensures that young people, their families and the professionals involved all have a clear understanding of who will be involved and what they will do.

Young people who may need additional support with their transition into adult life will be identified as they have their Transition review in Year 9. With the young people and their carer's consent, this links 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.

Training to support the implementation of the Transition Protocols, across all agencies, has been delivered in every locality. This is building on the best practice already within the county and developing local virtual teams who will lead on transition for the local children. The effectiveness of these is being monitored by all the agencies involved.

All the above actions will ensure that the practice around transition is improved upon.

The Young People, Carer and Easy-Read Guides to the Transition Process have been distributed through a network of professionals so that it will be available to every young person who needs it. This will ensure that every young person and their families will know what support they will receive and how to access it. It is also available on each agency's websites and at www.kent.gov.uk/transition.

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The effectiveness of the support given through transition, and the implementation of the Transition Protocols, has been monitored by satisfaction surveys. In the last 6 months, 106 young people or their carers have been asked to rate their satisfaction with the support they have received in the 4 key areas of:

- Involvement of appropriate agencies
- Provision of sufficient information, advice and guidance
- Young person's views and aspirations being central to the process
- Satisfaction with the current support

The percentage of people who said they were happy or very happy ranged from, 77% who were satisfied with their current support, to 68% who said they were satisfied that their views and aspirations were listened to.

Overall 73% said that they were either happy or very happy with the support they have received.

What more are we going to do?

The experiences of young people during and after transition will continue to be monitored. Further groups of young people and their carers will be asked to rate their satisfaction with their support to ensure that the protocols are making an improvement.

The training to support the implementation of the Transition Protocols, across all agencies will be extended to include mainstream schools so that the local virtual transition teams pick up all young people with disabilities who will benefit from supported transition.

The effectiveness of the support will continue to be monitored by asking young adults and their carers how satisfied they were. This will provide a rolling measure as the impact is more widely felt.

The significant increase in uptake of Direct Payments from CFE will continue to be built on and work is ongoing to ensure that the transition from a CFE Direct Payment to a KASS Personal Budget is managed smoothly. This increases both flexibility and control for individuals, enabling them to live their lives more independently. With the development of Self-Directed Support, Personal Budgets will become the norm for every adult needing support.

The Transition Partnership will be widened 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.

Measurable Indicator (s)	2007/08 Actual	2008/09 Target	2008/09 Actual	2009/10 Target
Satisfaction measure being developed based on user survey	New indicator	N/A	73%	80%

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We will ensure that the outcomes achieved by this Towards 2010 target are supported by other Targets:

- Develop multi-agency support to parents and their children (Target 13)
- Listen to young people's views (Target 14)
- Increase the number of people who are supported to live independently (Target 52)
- Strengthen the support to people caring for relatives and friends (Target 53)

Monitoring completed by: Lead Officers
July 2009

Date:

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Target 56: Improve older people's economic well-being by encouraging the take-up of benefits		
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Lead Cabinet Member: Graham Gibbens	Lead Managing Director: Oliver Mills	Lead Officer: Michael Thomas-Sam
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Status: On course

List the partners with whom we are working to deliver this target:

Our partners include the Pension Service, District Councils, Kent Benefits Partnership and Voluntary Organisations e.g. Age Concern, CAB, Citizens Rights for Older People.

Outcomes delivered so far:

Older people receiving social care services from KCC are offered information, advice and, if necessary, assistance to claim all the benefits they are entitled to. We have increased the effectiveness of this work by creating specialist teams and by working with the Pension Service, District Councils and local voluntary organisations. In addition we have provided extra funding to the 12 Citizens Advice Bureau in Kent which will enable them to help more people claim the benefits to which they are entitled.

All of our partnership working is contributing to the increase in benefit take up for older people in Kent. We have been provided with the following information from the Pension Service (part of the DWP that deals with people over 60). As a direct result of joint working with the Pension Service between April 2007 and 31 March 2009 £2.1 million in additional benefits was raised for Kent residents. Broken down this is £885,000 in Pension Credit, £898,000 in Attendance Allowance, £98,000 in DLA, £127,000 in Housing Benefit and £93,000 in Council Tax Benefit. In addition to monetary gain, joint working leads to a better experience for our service users who receive a quicker and less time consuming service.

Many of the Community based preventative projects run by the Voluntary Sector are working with older people to maximise their benefits, as are initiatives such as INVOKE and Brighter Futures described in previous Targets.

What more are we going to do?

We will continue to work with the Pension Service and District Councils to target those older people not receiving all their benefit entitlement. This includes working in the new Gateways and taking part in media campaigns targeted specifically at older people in Kent.

There is always a time lag before figures are available from the DWP. In addition there have been particular problems with data on Council Tax Benefit. The DWP have informed us that this data will be available by the end of the year.

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Measurable Indicator (s)	Aug 06	May 07	May 08	Nov 08	May 09	2009/10 Target
Number of older people who are in receipt of /with underlying entitlement to Attendance Allowance	34,500	35,600	37,510	38,750	Not avail	+5% 36,225
Number of older people who are in receipt of Pension Credit	70,270	70,720	70,980	71,310	Not avail	+5% 73,783
+Number of older people in receipt of council tax benefit	61,690	62,540	Not available	Not available	Not avail	+5% 64,774

Monitoring completed by: Lead Officer

Date: July 2009