

**CHILDREN'S SOCIAL CARE AND HEALTH CABINET
COMMITTEE**

Monday, 16th January, 2017

9.30 am

**Council Chamber, Sessions House, County Hall,
Maidstone**





AGENDA

CHILDREN'S SOCIAL CARE AND HEALTH CABINET COMMITTEE

Monday, 16 January 2017 at 9.30 am
Council Chamber, Sessions House, County Hall,
Maidstone

Ask for: **Jemma West**
Telephone: **03000 419619**

Tea/Coffee will be available 15 minutes before the start of the meeting

Membership (14)

Conservative (8): Mrs J Whittle (Chairman), Mrs A D Allen, MBE (Vice-Chairman),
Mrs P T Cole, Mrs V J Dagger, Mr G Lymer, Mr M J Northey,
Mr C P Smith and Vacancy

UKIP (3) Mrs M Elenor, Mr B Neaves and Mrs Z Wiltshire

Labour (2) Mrs P Brivio and Mrs S Howes

Liberal Democrat (1): Mr M J Vye

Webcasting Notice

Please note: this meeting may be filmed for the live or subsequent broadcast via the Council's internet site or by any member of the public or press present. The Chairman will confirm if all or part of the meeting is to be filmed by the Council.

By entering into this room you are consenting to being filmed. If you do not wish to have your image captured please let the Clerk know immediately

UNRESTRICTED ITEMS

(During these items the meeting is likely to be open to the public)

A - Committee Business

A1 Introduction/Webcast announcement

A2 Apologies and Substitutes

To receive apologies for absence and notification of any substitutes present

A3 Declarations of Interest by Members in items on the Agenda

To receive any declarations of interest made by Members in relation to any matter on the agenda. Members are reminded to specify the agenda item number to which it refers and the nature of the interest being declared

B - Key or Significant Cabinet/Cabinet Member Decision(s) for Recommendation or Endorsement

- B1 Supported Accommodation in a Family Environment Service for Older Children in Care and Care Leavers (SAiFE) (Supported Lodgings) (15/00010) and Housing Related Support for Young People at Risk (HRS) (16/00150) (Pages 7 - 64)

To receive a report from the Cabinet Member for Specialist Children's Services and the Corporate Director of Social Care, Health and Wellbeing, and to consider and endorse or make recommendations to the Cabinet Member on the proposed decision to award a new contract to deliver Supported Accommodation in a Family Environment (SAiFE) for Kent's Older Children in Care, Care leavers and vulnerable young people, and to re-award 24 short-term interim contracts which deliver a total of 465 Housing Related Support units for Young People at Risk from 1st April 2017 to 31st March 2018 and award a retrospective contract for the period up to 31st March 2017, and to delegate authority to the Corporate Director of Social Care, Health and Wellbeing, or other nominated officer, to undertake the necessary actions to implement the decision.

C - Other items for comment/recommendation to the Leader/Cabinet Member/Cabinet or officers

- C1 Care Leavers Service (Pages 65 - 78)

To receive a report from the Cabinet Member for Specialist Children's Services and the Corporate Director of Social Care Health and Wellbeing, and to note the proposed structure of the 18plus Care Leaving Service to meet the increasing demand of Unaccompanied Asylum Seeking Children transitioning into the Service.

- C2 Budget 2017/18 and Medium Term financial plan (Pages 79 - 108)

To receive a report from the Cabinet Member for Specialist Children's Services and the Cabinet Member for Finance and Procurement and Deputy Leader which asks the Committee to Note the draft budget and Medium Term Financial Plan (MTFP), including responses to consultation and Government announcements, and invites Committee Members to make suggestions to the Cabinet Members on any other issues which should be reflected in the draft budget and MTFP.

EXEMPT ITEMS

The Appendices to item C2 were exempt at the time of publishing the agenda but will become public on 12 January 2017 when the County Council's draft budget is published.

John Lynch,
Head of Democratic Services
03000 410466

Friday, 6 January 2017

Please note that any background documents referred to in the accompanying papers maybe inspected by arrangement with the officer responsible for preparing the relevant report.

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From: Peter Oakford, Cabinet Member for Specialist Children's Services

Andrew Ireland, Corporate Director of Social Care, Health and Wellbeing

To: Children's Social Care and Health Cabinet Committee
16 January 2017

Decision Nos: 15/00010 and 16/00150

Subject: **15/00010 - SUPPORTED ACCOMMODATION IN A FAMILY ENVIRONMENT SERVICE FOR OLDER CHILDREN IN CARE AND CARE LEAVERS (SUPPORTED LODGINGS); AND**

16/00150 - HOUSING RELATED SUPPORT FOR YOUNG PEOPLE AT RISK

Classification: Unrestricted

Past Pathway of Paper: 15/00010 - Children's Social Care and Health Cabinet Committee - 21 April 2015

Future Pathway of Paper: Cabinet Member decision

Electoral Division: All

Summary: This report deals with the contractual matters relating to contract awards for the delivery of Supported Accommodation in a Family Environment and Housing Related Support for Young People at Risk.

Recommendations: The Children's Social Care and Health Cabinet Committee is asked to **ENDORSE** the following proposed decisions:

- a) to **AWARD** a new contract to deliver Supported Accommodation in a Family Environment (SAiFE) for Kent's Older Children in Care, Care Leavers and vulnerable young people. (Decision Number 15/00010 - Attached as Appendix A);
- b) to **RE-AWARD** 24 short term interim contracts which deliver a total of 465 Housing Related Support units for Young People at Risk from 1 April 2017 to 31 March 2018 and **AWARD** a retrospective contract for the period up to 31 March 2017. (Decision Number 16/00150 Attached as Appendix B) and;
- c) to **DELEGATE** authority to the Corporate Director of Social Care, Health and Wellbeing, or other nominated officer, to undertake the necessary actions to implement the decisions.

1. Introduction

- 1.1 This report is split into two parts and deals with the contractual matters relating to contract awards for the delivery of Supported Accommodation in a Family Environment (SAiFE) and Housing Related Support (HRS) for Young People at Risk.
- 1.2 In accordance with the standing procedures Cabinet Committees are required to consider and endorse proposed executive decisions before they are formally taken by the Cabinet Member. A review of Specialist Children's Services contracts has identified that this step in the internal governance process was not undertaken for these two contracts, although the legally required procurement process had been followed. Consequently to ensure full compliance with the governance process, the Children's Social Care and Health Cabinet Committee is now being asked to endorse these two proposed decisions (attached as Appendix A and Appendix B).

2. Policy Framework

- 2.1 At the heart of Facing the Challenge is the need to change the way the Council work, not only to improve services, but also to reflect the changing shape of wider public services.
- 2.2 The Council's Children in Care Sufficiency Strategy - Meeting the placement needs of children in care, sets out our approach to providing secure, safe and appropriate accommodation to children in care and care leavers.

3. Decision Number 15/00010 - Supported Accommodation in a Family Environment (SAiFE)

- 3.1 Supported Accommodation in a Family Environment (SAiFE) is a form of temporary supported accommodation for Kent's Older Children in Care (including Unaccompanied Asylum Seeking Children) and Care Leavers (including former Unaccompanied Asylum Seeking Children) who are not ready to live independently. The service provides young people with accommodation and support, which is delivered by "Hosts" within a family setting to develop practical skills and emotional stability.
- 3.2 The new contract for the Supported Accommodation in a Family Environment for older Children in Care and Care Leavers (previously known as Supported Lodgings) commenced on 1 June 2016.

3.4 Financial Implications

- 3.4.1 The total lifetime (i.e. up to 48 months) value of the Contract is £1,343,904. In addition to the contract value the provider passports, on behalf of KCC, support payments to hosts. Costs are broken down into three areas; support paid to Hosts, housing and management fees.
- 3.4.2 Support for young person paid to Hosts:

Support levels	Weekly Cost
Support - Standard	£140
Support - Complex	£190
Support - Intensive	£240

3.4.3 Housing costs are fixed at £50 - £60 per week for young person aged 16 or 17 (ineligible to claim Housing Benefit). Housing is paid from Housing Benefit if the young person is aged 18 or over and paid directly to the Host by the young person.

3.4.4 Monthly management fees are based on demand as follows

Demand (number of arrangements)	Monthly Contract Price
< 150 Arrangements per Month	£20,291
150 – 400 Arrangements per Month	£27,998
> 400 Arrangements per Month	£32,872

3.5 Legal Implications

3.5.1 The Council has a statutory duty to provide suitable and safe accommodation that has the right level of support for Children in Care in accordance with the Children's Act 1989.

3.5.2 The Council must provide Care Leavers with support and financial support to assist in promoting their welfare, especially in relation to maintaining suitable accommodation and promoting education and training.

3.5.3 A fundamental component of the Care Act 2014 is the 'suitability of accommodation' in meeting the at home care and support needs of vulnerable people. The Act and the accompanying regulations and guidance outline how housing can support a more integrated approach and sets out local implementation requirements. Of particular note is that housing also includes housing related support or services.

3.6 Equalities Implications

3.6.1 An EQIA assessment has been undertaken and it has determined that awarding the SAiFE contract would have a low negative impact on service users with protected characteristics.

4. Decision Number 16/00150 - Housing Related Support (HRS) for Young People at Risk

- 4.1 The Council's Specialist Children's Services commissioning team is currently redesigning the accommodation and support pathway for Children in Care, Care Leavers and vulnerable young people.
- 4.2 In September 2015 the 16-25 Accommodation and Support Commissioning Intentions were endorsed and a public consultation on the 'Proposed Changes to Kent's Supported Accommodation and Floating Support Services' ran between 30 November 2015 and 8 February 2016 (which included changes to the HRS service).
- 4.3 All Housing Related Services were expected to be re procured during 2016 as part of a new service. Delays to this intention have resulted in a break in formal contract.
- 4.4 To be able to deliver this work, a Single Source Action to align the contracts with the new programme timetable is required. This will also support placement stability and gradual transition of service users to new service provider/s should existing providers be unsuccessful in the tendering process. In addition a retrospectively decision to rectify the anomalous situation and break in contract is required to cover the period March/September 2016 – 31 March 2017.

4.5 Financial Implications

- 4.5.1 There are 24 contracts which deliver a total of 465 Housing Related Support units for Young People at Risk. The 2016/2017 annual cost of these contracts is £2,973,950.96. Negotiations are currently underway to deliver savings in 2017/18. The period covered by the retrospective Single Source Action figure for 2016 /17 is Accommodation-Based (12 months) £2,761,015.49 plus Floating Support (6 Months) £106,467.25 Total £2,867,482.74. The total to cover these components for up to a maximum of 24 months is £5.9m

4.6 Legal Implications

- 4.6.1 The Council has a statutory duty to provide suitable and safe accommodation that has the right level of support for Children in Care in accordance with the Children's Act 1989.
- 4.6.2 The Council must provide Care Leavers with support and financial support to assist in promoting their welfare, especially in relation to maintaining suitable accommodation and promoting education and training.
- 4.6.3 A fundamental component of the Care Act 2014 is the 'suitability of accommodation' in meeting the at home care and support needs of vulnerable people. The Act and the accompanying regulations and guidance outline how housing can support a more integrated approach and sets out local implementation requirements. Of particular note is that housing also includes housing related support or services.

4.7 Equalities Implications

4.7.1 An EQIA assessment for the Single Source Action for Housing Related Support Services for young people at risk has been undertaken and a low weighting has been determined. The updated EQiA is attached as Appendix 1.

5. Conclusions

5.1 This report seeks to ensure full compliance with the Council's governance for two services which provide support to vulnerable young people, older children in care and care leavers. Both of these services are providing support for children and young people and the Council is currently paying for these services.

6. Recommendations

6.1 Recommendations: The Children's Social Care and Health Cabinet Committee is asked to **ENDORSE** the following proposed decisions:

- a) to **AWARD** a new contract to deliver Supported Accommodation in a Family Environment (SAiFE) for Kent's Older Children in Care, Care Leavers and vulnerable young people. (Decision Number 15/00010 - Attached as Appendix A);
- b) to **RE-AWARD** 24 short term interim contracts which deliver a total of 465 Housing Related Support units for Young People at Risk from 1 April 2017 to 31 March 2018 and **AWARD** a retrospective contract for the period up to 31 March 2017. (Decision Number 16/00150 Attached as Appendix B) and;
- c) to **DELEGATE** authority to the Corporate Director of Social Care, Health and Wellbeing, or other nominated officer, to undertake the necessary actions to implement the decisions.

7. Background Documents

None

8. Report Author

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Relevant Directors

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KENT COUNTY COUNCIL – PROPOSED RECORD OF DECISION

DECISION TO BE TAKEN BY:

**Peter Oakford,
Cabinet Member for Specialist Children's Services**

DECISION NO:

15/00010

For publication

Key decision

Affects more than 2 Electoral Divisions and expenditure of more than £1m.

Subject: Supported Accommodation in a Family Environment Service for Older Children in Care and Care Leavers (SAiFE) (previously known as the Proposal for the delivery of Supported Lodgings for Kent Care Leavers).

Decision: As Cabinet Member for Specialist Children's Services, I propose to:

- a) **AWARD** a new contract to deliver Supported Accommodation in a Family Environment Service for Kent's Older Children in Care, Care Leavers and vulnerable people;
- b) **DELEGATE** authority to the Corporate Director of Social Care, Health and Wellbeing, or other nominated officer, to undertake the necessary actions to implement the decision.

Reason(s) for decision:

The original Supported Lodgings contract was developed as an interim solution during the integration of the 0-16 Children in Care, 16+ Care Leaver service and Service for Unaccompanied Asylum Seeking Children. It was procured via a Single Source Action (SSA), running from 1st October 2014 – 31st June 2015.

In April 2015 Children's Social Care and Health Cabinet Committee were informed of the intention to extend arrangements with the current providers through a Single Source Action.

Subsequent legal advice identified that the existing contract could continue to operate without the need to formally extend through a SSA, on the basis that a formal procurement exercise was underway. A formal procurement exercise was commenced to meet legal requirements and maintain placement stability.

The service was procured through a competitive tender process to comply with the Public Contracts Regulations 2015. The contract commenced on 1 June 2016.

A key premise of the service is that it provides a more cost effective alternative to other forms of supported placements such as adolescent foster care or spot purchased semi-independent placements. All eligible young people placed are claiming Housing Benefits.

The Council has a statutory duty to provide suitable and safe accommodation that has the right level of support for Children in Care in accordance with the Children's Act 1989.

The Council must provide Care Leavers with support and financial support to assist in promoting their welfare, especially in relation to maintaining suitable accommodation and promoting education and training.

Cabinet Committee recommendations and other consultation:

This matter will be discussed at the Children's Social Care and Health Cabinet Committee on 16 January 2017, and the outcome included in the paperwork which the Cabinet Member will be asked to sign when taking the decision.

Any alternatives considered:

Any interest declared when the decision was taken and any dispensation granted by the Proper Officer:

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signed

.....
date

KENT COUNTY COUNCIL – PROPOSED RECORD OF DECISION

DECISION TO BE TAKEN BY:

Peter Oakford,
Cabinet Member for Specialist Children's Services

DECISION NO:

16/00150

For publication

Key decision

Affects more than 2 Electoral Divisions and expenditure of more than £1m.

Subject: Single Source Action Proposal for 24 Housing Related Support contracts for Young People at Risk services (16 – 25 year olds)

Decision: As Cabinet Member for Specialist Childrens Services, I propose to:

- a) **RE-AWARD** 24 short-term interim contracts which deliver a total of 465 Housing Related Support units for Young People at Risk from 1 April 2017 to 31 March 2018. Including;

Provider	Service Name	Annual Payment
Cantercare	Wincheap	£ 75,369.41
Centra	Overton House	£ 18,223.97
	Bridge House	£ 162,334.76
Chapter 1	Calverley Hill	£ 167,206.72
Depaul Trust	The Grove	£ 66,478.50
Family Mosaic	Old Colonial – Teenage Parents	£ 31,023.30
Golding Homes	Maidstone Teenage Parents Service	£ 91,591.73
Home Group Ltd	Ashford Younger Persons Service	£ 212,757.79
	Daisies	£ 57,614.70
	Trinity Foyer	£ 399,544.65
	Dover Young Persons Service	£ 263,606.81
LIFE Housing	Dartford Life	£ 47,111.10
Look Ahead Care and Support	Shepway Young Persons at Risk	£ 92,166.57
Porchlight	New Town Street	£ 87,787.08
	Porchlight Young Person Hostel	£ 263,714.36
	New Wharf	£ 148,391.74
	Dover Housing Support Services	£ 28,718.71
	Swale Young Person at Risk	£ 125,188.14
Sanctuary Housing Association	Maidstone Housing Supported Service	£ 25,527.74
	Young People Floating Support East Kent	£ 119,974.14
	Young People Floating Support West Kent	£ 92,960.41
West Kent YMCA	Ryder House	£ 245,073.38
YMCA Thames Gateway	YMCA Thames Gateway	£ 141,336.61
	Church View	£ 10,248.64
TOTAL		£2,973,950.96

And **AWARD** a retrospective Single Source Action for the period up to 31 March 2017. The

retrospective Single Source Action figure is Accommodation-Based (12 months) £2,761,015.49 plus Floating Support (6 Months) £106,467.25. Total £2,867,482.74.

b) **DELEGATE** authority to the Corporate Director of Social Care, Health and Wellbeing, or other nominated officer, to undertake the necessary actions to implement the decision.

Reason(s) for decision:

Thirteen Suppliers have delivered Housing Related Support Services for Young People at Risk on behalf of Kent County Council (Supporting People) since 1st April 2012. Young People at Risk services currently support 16 and 17 year old Children in Care, Care Leavers, vulnerable 16 and 17 year olds (not in care) and 18+ vulnerable young people.

The 16-25 Accommodation and Support Programme has looked holistically at the Accommodation and Support services, including the 24 Housing Related Support services. Supporting People Housing Related Support services for young people were transferred to Specialist Children Services in May 2015. Changes to the current service model were the subject of a 10 week public consultation which took place between 30 November 2015 and 8 February 2016.

It has recently been agreed that a more robust approach to the commissioning of these services would be within the context of a revised and extended Sufficiency strategy which will look at all provision where there is an accommodation component.

The contracts were extended for a further year (as per the contract) from 1 April 2015 to the 31 March 2016. The two Floating Support contract were also re awarded to 30 September 2016.

The accommodation and support pathway for Children in Care, Care Leavers and vulnerable young people is being reviewed to identify a more effective and efficient pathway linked to a new Sufficiency strategy for KCC. Whilst this review takes place, in order to maintain current provision the Authority needs to contract with the existing providers through a Single Source Action (SSA) for 12 months from April 2017 to March 2018 and agree a retrospectively decision for the period March/September 2016 to 31 March 2017 .

All Housing Related Services were expected to be re procured during 2016 as part of a new service .The gap in formal contracts was due to delays in the intention to be in a procurement process .

Providers have continued to maintain service delivery in line with original contracts.

This will rectify the anomalous situation and align the existing contracts with the new programme timetable, support placement stability and gradual transition of service users to new service provider/s should existing providers be unsuccessful in the tendering process.

The Council has a statutory duty to provide suitable and safe accommodation that has the right level of support for Children in Care. KCC must also accommodate 16 and 17 year old child in need (in accordance with Section 20 of the Children's Act 1989), a child / young person to whom Bail has been denied and children remanded to local authority accommodation (RLAA) and 16 and 17 year old Care Leavers (Relevant).

The Council must provide Care Leavers with support and financial support to assist in promoting their welfare, especially in relation to maintaining suitable accommodation and promoting education and training.

A fundamental component of the Care Act 2014 is the 'suitability of accommodation' in meeting the at home care and support needs of vulnerable people. The Act and the accompanying regulations

and guidance outline how housing can support a more integrated approach and sets out local implementation requirements. Of particular note is that housing also includes housing related support or services.

Cabinet Committee recommendations and other consultation:

This matter will be discussed at the Children's Social Care and Health Cabinet Committee on 16th January 2017, and the outcome included in the paperwork which the Cabinet Member will be asked to sign.

Any alternatives considered:

Consideration has been given to doing nothing. If new interim contracts are not in place service users currently accessing the services may not be able to access the support that they need and may also risk losing their accommodation and becoming homeless.

Any interest declared when the decision was taken and any dispensation granted by the Proper Officer:

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signed

.....
date

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**KENT COUNTY COUNCIL
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)**

**This document is available in other formats, please contact
16-25accommodation@Kent.gov.uk or telephone on 03000
417039**

Directorate: Social Care Health and Wellbeing

Name of policy, procedure, project or service

Housing Related Support for Young People at Risk (including Floating Support.)

What is being assessed?

Single Source Action Proposal for the Housing Related Support services for 12 months (1st April 2017 to 31st March 2018). Services are accessed by 16 – 25 year old Children in Care, Care Leavers and vulnerable young people. There are 24 contracts delivering 465 support units. These are currently delivered by 13 organisations on behalf of KCC.

The services will prioritise young people who are owed a statutory duty or who may need some support to prevent them coming into Care. Fewer young people over 18, whom the council does not have a duty to support, will be supported.

Responsible Owner/ Senior Officer

Karen Mills, Commissioning Manager

Date of Initial Screening

21st December 2016

Date of Full EqIA :

N/A

Version	Author	Date	Comment
D1.0	Robin Cahill	21/12/2016	First Draft
D2.0	Amy Noake	21/12/2016	Second Draft
D3.0	Akua Agyepong	22/12/2016	Comment on second draft
F1.0	Amy Noake	03/01/2016	Final Draft

Screening Grid

Characteristic	Could this policy, procedure, project or service, or any proposed changes to it, affect this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	<p>Yes – The Single Source Action Proposal will affect 16-25 Children in Care, Care Leavers, homeless 16/17 year olds, and vulnerable young people. Any changes will apply to this cohort only.</p> <p>It is possible that be increasing the number of statutory service users utilising services (and improving performance management) that the age profile of service users could decrease.</p>	Medium	Medium	<p>a) Yes – Engage with existing providers to establish potential impact. Ensure EQIA is shared.</p> <p>b) No</p>	<p>Yes (for all protected characteristics)</p> <p>These services will address identified needs on an individual basis, so all service users can be accommodated and supported in the most suitable way.</p> <p>The service will assist service users to meet the following outcomes and therefore promote equal opportunities:</p> <ul style="list-style-type: none"> YP are accommodated in appropriate and suitable accommodation in line with Section 22 of the 1989 Children Act, Regulation 9 of the Care Leavers 2010 regulations and/or KCC Quality Framework, as appropriate. YP thrive in a non-family environment. YP's aspiration is independence and the YP is supported on pathway to independence including: <ul style="list-style-type: none"> YP understands their rights and responsibilities as tenants and licensees. YP is financially competent. YP builds positive relationships and social networks and participates
Disability	<p>No – It is thought that this proposal will not affect this group less favourably.</p> <p>The proposal will ensure that all eligible young people can continue to access the services that they require.</p>	None	None	<p>a) No – The Disabled Childrens and Adults Learning Disability and Mental Health Team will continue to accommodate and support children and young people as appropriate. (No change proposed).</p> <p>b) No</p>	
Gender	<p>Yes – A slightly higher percentage of females (55.3%) are accessing</p>	Low	Low	<p>a) Yes – Engage with existing providers to establish potential</p>	

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 21</p>	<p>services than males (44.7%)</p> <p>From the service users in this cohort, males are underrepresented in Kent (Male 44.7%, Kent 49%), whereas females are overrepresented (Female 55.3%, Kent 51%)¹.</p> <p>It is thought that given the intended increase in statutory service users accessing the services (Care Leavers and 16/17 Children in Care) that the number of males accessing the service could increase. This would be as a result of identified need and a larger proportion of males reaching social care thresholds.</p> <p>However, KCC currently provides five specialist Teenage Parent services. The majority of teenage parents accessing services are female, (accounting for approximately 5% of the 55% of the vulnerable young people cohort) and therefore these changes could affect this group less favourably.</p> <p>However, a larger number of teenage parents currently access non-specific services than that they do specific services. From 2012-16 260 teenage parents accessed a non-specific service whereas only 59</p>		<p>impact. Ensure EQIA is shared.</p> <p>b) No</p>	<p>positively in the community.</p> <ul style="list-style-type: none"> ○ YP can maintain emotional and physical health and well-being. ○ YP is confident, has built resilience and behaves appropriately. ○ YP is engaged with EET and is demonstrating capabilities to maintain long term independence. <p>Providers are expected to evidence and demonstrate that they do not discriminate directly or indirectly against any person because of their gender, age, disability, race, ethnic origin, language, political beliefs, trade union membership (or non-membership) marital status or sexual orientation</p> <p>Service Providers must have an equalities and diversity policy in place for Staff and Service Users. Service Providers must make available the equalities and diversity policy to Staff and Service Users at the earliest opportunity, using whichever format is most suitable.</p> <p>Failure by Service Providers to comply with the requirements will constitute a material breach of the Service Provider’s obligations.</p> <p>KCC will monitor and review the services regularly in line with performance indicators outlined in service specification.</p>
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¹ Kent.gov.uk Facts & Figures

	<p>teenage parents accessed a teenage parent specific service.</p> <p>Please see EQIA on teenage parent services.</p>				
Gender identity	<p>Unknown – there is currently no data available to establish this.</p> <p>However it is thought that any impact would be minimal as service delivery will not change.</p> <p>It is also thought that transgender young people are at higher risk of homelessness and therefore changes whereby fewer vulnerable young people are supported would affect this group less favourably.</p>	Unknown	Unknown but some impact expected	<p>a) Yes - Suggest providers begin to capture data and include in new contract monitoring.</p> <p>b) No</p>	
Race	<p>No – White racial groups are very slightly underrepresented when compared to the wider Kent population, (Service Users 92.84%, Kent 93.7%)²</p> <p>Black racial groups (Service Users 2.19%, Kent 1.11%) and Mixed (Service Users 3.78%, Kent 1.51%)³ are both overrepresented when compared with the wider Kent population.</p> <p>Black racial groups and other mixed races are also over represented in</p>	None	None	<p>a) No - Service are aware of racial needs and will address them regardless of race.</p> <p>b) No</p>	

² Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

³ Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

	the Child in Care and Care Leaver Population. It is thought that given the intended increase in statutory service users accessing the services there will be no or little impact.				
Religion or belief	<p>Unknown – there is currently no data available to establish this.</p> <p>However it is thought that any impact would be minimal as service delivery will not change.</p>	Unknown	Unknown	<p>a) Yes - Include in new contract monitoring</p> <p>b) No</p>	
Sexual orientation	<p>Unknown – there is currently no data available to establish this.</p> <p>However, a higher percentage of Gay/Bi-Sexual respondents (42%) and Gay/Bi-Sexual service users (43%) have disagreed with a proposal to reduce the number of local services when compared with the level of disagreement amongst all respondents (23%). This suggests reducing the number of organisations delivering services could negatively impact upon Gay/Bi-Sexual individuals and therefore could suggest that a Single Source Approval could have a positive impact.</p>	Unknown	Unknown	<p>a) Yes - Include in new contract monitoring</p> <p>b) No</p>	
Pregnancy and maternity	<p>Yes – KCC currently provides five specialist Teenage Parent services. However, a larger number of teenage parents currently access non-specific services than that they</p>	Low	Low	<p>a) Yes - Include in new contract monitoring</p> <p>b) Yes - Teenage Parent Equality Impact Assessment to assess the</p>	

	<p>do specific services. From 2012-16 260 teenage parents accessed a non-specific service whereas only 59 teenage parents accessed a teenage parent specific service.</p> <p>Please see EQIA on teenage parent services.</p>			<p>impact of re-prioritising statutory service users within the teenage parents accommodation services.</p>	
Marriage and Civil Partnerships	<p>N/A – only relates to employment.</p>				
Carer's responsibilities	<p>Unknown – there is currently no data available to establish this.</p> <p>However it is anticipated the proposal would not impact this protected characteristic. Services will address needs of individual.</p>	Unknown	Unknown	<p>a) Yes - Include in new contract monitoring</p> <p>b) No</p>	

Part 1: INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function – see Risk Matrix

Low	Medium	High
Low relevance or Insufficient information/evidence to make a judgement.	Medium relevance or Insufficient information/evidence to make a Judgement.	High relevance to equality, /likely to have adverse impact on protected groups

State rating & reasons

Low

It is considered as Low because;

- Age - Services (and changes) relate to 16-25 year old Children in Care, Care Leavers and Vulnerable Young People only and therefore this group are affected more than others. Given the proposed change, more statutory service users (16/17 year old children in care and care leavers) will be able to access the service, suggesting the age of service users could decrease.
- Race – Black racial groups (Service Users 2.19%, Kent 1.11%) and Mixed (Service Users 3.78%, Kent 1.51%)⁴ are both overrepresented when compared with the wider Kent population. Black racial groups and other mixed races are also over represented in the Child in Care and Care Leaver Population. It is thought that given the intended increase in statutory service users accessing the services there will be no or little impact.
- Gender – Currently, more female young people are accessing the service. Given the proposed increase in statutory service users, more males could be accessing the service next year. Additionally currently provides 5 specialist Teenage Parent services. This may affect females, particularly teenage mothers, less favourably. There may be an impact on Teenage Parents who are not owed a statutory duty (see separate EQIA).
- Impact is unknown for gender identity, religion or belief, sexual orientation, carer’s responsibilities. Actions will be taken to identify impact.

Context

Thirteen Suppliers have delivered Housing Related Support Services for Young People at Risk on behalf of Kent County Council (Supporting People) since 1st April 2012.

The 16-25 Accommodation and Support Programme has looked holistically at the Accommodation and Support services, including the 24 Housing Related Support services. Supporting People Housing Related Support services for young people

⁴ Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

were transferred to Specialist Children Services in May 2015. Changes to the current service model were the subject of a 10 week public consultation which took place between 30th November 2015 and 8th February 2016.

It has recently been agreed that a more robust approach to the commissioning of these services would be within the context of a revised and extended Sufficiency strategy which will look at all provision where there is an accommodation component. This is being developed with KCC property colleagues to ensure a sustainable solution is developed.

To be able to deliver this work, a Single Source Action to align the existing contracts with the new programme timetable is required. This will also support placement stability and gradual transition of service users to new service provider/s should existing providers be unsuccessful in the tendering process.

Aims and Objectives

This proposal would mean that:

- Services could continue with minimal disruption to service users
- There is a longer time scale to transition current service users to a new service to ensure that their individual needs continue to be met.
- KCC would have greater knowledge regarding the impact of remodelling these services in line with future commissioning intentions for young people.

Beneficiaries

The beneficiaries are 16-25 year old Children in Care, Care Leavers and Vulnerable Young People.

Currently, Housing Related Support services provide support for a large cohort of Vulnerable Young People, and fewer Care Leaver and Children in Care.

The proposed change to the service will increase the number of statutory service users (16/17 year old children in care and care leavers) accessing services. Support will be refocused to ensure it is aimed at those most in need.

Information and Data

At present there are 465 young people supported by Housing Related Support Services. This number will be sustained through a Single Source Action (if approved) in 2017/18.

It is proposed that more Children in Care, Children on the edge of Care and Care Leavers access services and fewer vulnerable young people over 18 access services.

Current Service Users – Young People at Risk Services (excluding TP services)

Between 2012 and 2016, the Supporting People Service (specifically for young people) has supported 1993 young people.⁵

The following data shows the number of service users supported from 2014-2015. Please note the number of young people supported is higher than the number of available units, as these contracts are short-term, so a unit could support more than one person in a year.

Between 2015-2016, the Supporting People Service has supported 503 young people. Of these, 55 were care leavers (10.9%)⁶

Age

Age	Actual	%
16	23	4.57%
17	74	14.71%
18	106	21.07%
19	85	16.90%
20	69	13.72%
21	58	11.53%
22	37	7.36%
23	30	5.96%
24	21	4.17%
Total	503	100%

The Supporting People Service offers support for 16-25 year olds. The majority of service users are aged 17-21, making up 77.9% of the overall service users.

Gender

Gender	Actual	%
Male	225	44.73%
Female	278	55.27%
Total	503	100%

A slightly higher percentage of females (55.3%) are accessing services than males (44.7%)

⁵ Supporting People Data, Cohort Review, 2012-2016

⁶ Supporting People Data, Cohort Review, 2012-2015

From the service users in this cohort, males are underrepresented in Kent (Male 44.7%, Kent 49%), whereas females are overrepresented (Female 55.3%, Kent 51%)⁷.

Race

	Race	Actual	%
White:	White British	460	91.45%
	White Irish	1	0.20%
	Other White Background	6	1.19%
Mixed/Multiple Ethnic Group:	White & Asian	1	0.20%
	White & Black African	4	0.80%
	White & Black Caribbean	9	1.79%
	Other Mixed Background	5	0.99%
Asian/Asian British:	Pakistani	2	0.40%
Black/African/Caribbean/Black British:	African	6	1.19%
	Caribbean	1	0.20%
	Other Black Background	4	0.80%
Other Ethnic Group:	Any other ethnic group	4	0.80%
Total		503	100%

The majority of young people accessing a service are White British (91.45%).

White racial groups are slightly underrepresented when compared to the wider Kent population, (Service Users 92.84%, Kent 93.7%)⁸

Black racial groups (Service Users 2.19%, Kent 1.11%) and Mixed (Service Users 3.78%, Kent 1.51%)⁹ are both overrepresented when compared with the wider Kent population.

Teenage Parent Services

As part of the Supporting People Services contracts, KCC offers 5 specialist **Teenage Parent Services** across Kent, providing short term accommodation and support. These are located in:

- Maidstone
- Gravesham
- Dartford x2
- Canterbury.

The 5 providers offer a total of 29 units (this is included in the above 465 for Supporting People Services). The services have accommodated 47 Teenage Parents between 2012 and 2015.

⁷ Kent.gov.uk Facts & Figures

⁸ Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

⁹ Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

There is also a larger cohort of vulnerable Teenage Parents accessing other accommodation and support services across Kent. From 2012-2015 Kent's Supporting People services have provided accommodation and support for 224 Teenage Parents.¹⁰

Demographics of Teenage Parents Accessing Housing-Related Accommodation in Kent by (2012-2015)				
Source: Supporting People Data 2012-2015 ¹¹				
	2012-2013	2013-2014	2014-2015	Total
Total number of individuals accessing a <i>specialised</i> teenage parents service	22	14	11	47
Total number of teenage parents (16-21 yrs) accessing <i>any</i> service	92	93	39	224

The number of teenage parents accessing a specialised teenage parent service is small, in comparison to teenage parents accessing *any* housing/support service.

Gender

Number of Teenage Parents by Gender 2012-2015		
Source: Teenage Parent Data 2012-2015 ¹²		
Gender	Actual	%
Male	0	0.00%
Female	47	100.00%
Total	47	100%

From 2012-2015, 100% of those accessing the specialised Teenage Parent services are female, with 0 males being supported. These service users account for 5% of the 55% of the vulnerable young people cohort.

Age

The Teenage Parent service provides accommodation and support for 16-22 year olds.

Number of Teenage Parents by Age 2012-2015		
Source: Teenage Parent Data 2012-2015 ¹³		
Age	Actual	%
16	8	17.02%
17	10	21.28%
18	13	27.66%
19	6	12.77%
20	6	12.77%
21	3	6.38%

¹⁰ Supporting People Data, 2012-2015

¹¹ Supporting People Data, 2012-2015

¹² Teenage Parent Data, Supporting People 2012-2015

¹³ Teenage Parent Data, Supporting People 2012-2015

22	1	2.13%
Total	47	100%

The majority of teenage parents accessing a specific teenage parent service between 2012 and 2015 were aged 16-18 year olds (66%).

All teenage parents accessing a service are living with a baby. Any changes to the service will also affect the babies.

Race

Number of Teenage Parents by **Race** 2012-2015

Source: Teenage Parent Data 2012-2015¹⁴

	Ethnicity	Actual	%
White:	White British	43	91.49%
	White Irish	0	0.00%
	Other White Background	1	2.13%
Mixed/Multiple Ethnic Group:	White & Asian	0	0.00%
	White & Black African	0	0.00%
	White & Black Caribbean	1	2.13%
	Other Mixed Background	0	0.00%
Asian/Asian British:	Pakistani	0	0.00%
	Other Asian Background	0	0.00%
Black/African/Caribbean/Black British:	African	0	0.00%
	Caribbean	0	0.00%
	Other Black Background	0	0.00%
Other Ethnic Group:	Any other ethnic group	2	4.26%
	Total	47	100%

The data shows that 93.6% of the young people accessing a specialised Teenage Parent service are within the White racial groups. This is representative of the overall Kent population (93.7%).

White British make up the majority of the teenage parent population (91%), this is entirely representative of the Supporting People service users (91%).

¹⁴ Teenage Parent Data, Supporting People 2012-2015

Religion

Number of Teenage Parents by Religion 2012-2015		
Source: Teenage Parent Data 2012-2015 ¹⁵		
Religion/Belief	Actual	%
Christian	8	17.02%
Buddhist	0	0.00%
Hindu	0	0.00%
Jewish	0	0.00%
Muslim	0	0.00%
Sikh	0	0.00%
Other religion	2	4.26%
No religion	16	34.04%
Religion not stated	21	44.68%
Total	47	100%

At June 2011, the majority (63%) of Kent's population were Christians and 27% of the population had no religion.¹⁶

Only 17% of teenage parents accessing a specific service between 2012 and 2015 are Christians, making this cohort largely underrepresented when compared with the wider Kent population.

However, almost half of the teenage parents accessing a specific service did not state their religion, which could explain why there is a large underrepresentation of Christians.

The young person's religion will not affect the service they receive, as all service users will have fair access to services.

Sexual Orientation

Between 2012 and 2015, 46 out of the 47 (97.8%) service users reported that they were heterosexual, with the data unknown for the other service user.¹⁷

Gender Identity

Between 2012 and 2015, 40 teenage parents (85%) are not transgender. The remaining 7 (15%) are unknown, or data is missing.¹⁸

An Equality Impact Assessment for the withdrawal of specific support from the teenage parent service has been conducted to assess the impact.

¹⁵ Teenage Parent Data, Supporting People 2012-2015

¹⁶ Kent's Facts & Figures – kent.gov.uk

¹⁷ Teenage Parent Data, Workbooks, Supporting People 2012-2015

¹⁸ Teenage Parent Data, Workbooks, Supporting People 2012-2015

Potential New Service Users - The proposed change to the service will increase the number of statutory service users (16/17 year old children in care and care leavers) accessing services. Support will be refocused to ensure it is aimed at those most in need.

KCC currently has a child in care population of 2,107¹⁹ (as at 30th November 2016). The increase in UASC has significantly increased from 257 at July 2014 to 471 at June 2015²⁰ to 684 at November 2016²¹.

Children in Care

Age

There are 707 16 and 17 year old Children in Care²². Please note, below shows only 16/17 year old Children in Care (36% of the total Children in Care).

Total Number of **Children in Care** in Kent by **Age**
June 2015 (source SCS Performance Management Report)²³

Age	Actual	%
16	315	16.17%
17	392	20.12%
Total	1948	100%

Kent has a significantly higher proportion of children in care aged 16 to 18, at 36% (707 16/17 year olds) than the England average which is 21% (over 16's CIC as at 31/3/15²⁴).

Given the proposed change, it is anticipated that there will be an increase in statutory service users; therefore more 16/17 year olds may be accessing service.

Gender

Number of **Children in Care** by **Gender**
June 2015 (source SCS Performance Management Report)²⁵

Gender	Total	%
Male	1255	64.43
Female	693	35.57
Total	1948	100

The majority of children in care are male (64%). Only 35% of the children in care population are female.²⁶

¹⁹ SCS quarterly performance report November 2016

²⁰ SCS quarterly performance report July 2015

²¹ SCS quarterly performance report November 2016

²² SCS quarterly performance report July 2015

²³ SCS quarterly performance report July 2015

²⁴ Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

²⁵ SCS quarterly performance report July 2015

²⁶ SCS quarterly performance report July 2015

Male children in care are overrepresented in Kent (Male 65%, Kent 49%). Whereas, female children in care and female service users are underrepresented (Female 35%, Kent 51%)²⁷

Race

Total Number of **Children in Care** in Kent by **Race**
June 2015 (source SCS Performance Management Report)

28

Race	Actual	%
White	1376	70.64%
Mixed	89	4.57%
Asian	22	1.13%
Black	146	7.49%
Other	315	16.17%
Not Known	0	0.00%
Total	1948	100

PLEASE NOTE THIS DATA IS FOR ALL CHILDREN IN CARE AND NOT JUST 16 to 17 YEAR OLDS.

Mixed (CIC 4.6%, Kent 1.51%), Black (CIC 7.5%, Kent 1.11%) and other (CIC 16.2%, Kent 0.46%) are overrepresented in the children in care cohort in Kent. White (CIC 70.6%, Kent 93.7%) and Asian (CIC 1.13%, Kent 3.25%) are underrepresented in the children in care cohort in Kent.²⁹

Care Leavers

Age

Total Number of **Care Leavers** in Kent by **Age**
June 2015 (source SCS Performance Management Report)³⁰

Age	Actual	%
16	14	1.47%
17	26	2.72%
18	308	32.25%
19	248	25.97%
20	251	26.28%
21	61	6.39%
22	23	2.41%

²⁷ Kent.gov.uk Facts & Figures

²⁸ SCS quarterly performance report July 2015

²⁹ Kent.gov.uk Facts & Figures and SCS quarterly performance report July 2015

³⁰ SCS quarterly performance report July 2015

23	24	2.51%
24	0	0.00%
25	0	0.00%
Total	955	100%

At June 2015, the average age of care leavers in Kent is between 18 and 20, making up 84.5% of the entire care leavers population.

Gender

Number of **Care Leavers** by **Gender**
June 2015 (source SCS Performance Management Report)³¹

Gender	Total	%
Male	637	66.70
Female	318	33.30
Total	955	100

Kent has a significantly higher percentage of male Care Leavers (66.7%) than female Care Leavers (33.3%).

Male Care Leavers are overrepresented in Kent (Male 61%, Kent 49%). Whereas, female Care Leavers are underrepresented (Female 26%, Kent 51%)³²

Ethnicity

Total Number of **Care Leavers** in Kent by **Ethnicity**
June 2015 (source SCS Performance Management Report)³³

	Ethnicity	Actual	%
White:	White British	517	54.14%
	White Irish	1	0.10%
	Any other white background	35	3.66%
	Traveller of Irish heritage	0	0.00%
	Gypsy/Roma	1	0.10%
Mixed/Multiple Ethnic Groups:	White and Black Caribbean	15	1.57%
	White and Black African	6	0.63%
	White and Asian	0	0.00%
	Any other mixed background	16	1.68%
Asian/Asian British:	Indian	4	0.42%
	Pakistani	1	0.10%
	Chinese	0	0.00%
	Any other Asian background	11	1.15%

³¹ SCS quarterly performance report July 2015

³² Kent.gov.uk Facts & Figures

³³ SCS quarterly performance report July 2015

Black/African/Caribbean/Black British:	Caribbean	1	0.10%
	African	121	12.67%
	Any other back background	3	0.31%
Other ethnic group:	Any other ethnic group	223	23.35%
	Refused	0	0.00%
	Information not yet obtained	0	0.00%
	Not recorded	0	0.00%
	Total	955	100%

The majority of Care Leavers in Kent are White British (54%). However, White British are underrepresented when compared to Kent 89%.³⁴

Other ethnic groups (CL 23.4%, Kent 0.46%) and Black African (CL 12.7%, Kent 0.79%) are largely overrepresented in the care leaver's population.³⁵

³⁴ Kent.gov.uk Facts & Figures

³⁵ Kent.gov.uk Facts & Figures

Involvement and Engagement

A 16-25 Accommodation Working Group was established in March 2015 to support the delivery of the 16 to 25 Accommodation and Support Programme. This group meets bi-monthly and has key stakeholders on its membership. A copy of the Terms of Reference is available on request.

KCC has already completed the following engagement activities with key stakeholders:

Young People/Service Users:

- Sufficiency Participation Events (Nov 14 & Apr 15)
- Your Voice Matters Survey (July 2014)
- Care/ Pathway Plan including Pathway Project and IRO report (March 15)
- National Research – CYP views (March 15)
- Care Leaver Apprentices attended Working Group to support communication, engagement and consultation (September 2015)
- Teenage Parent Service User views gathered (October 2015)
- Workshop with the Young Adults Council (October 2015)

The Market:

- Market Engagement Survey (April 15)
- Engagement on Commissioning Intentions (August 15)
- Information Sharing with Current Providers (Ongoing)
- Site Visits to Current Services (Ongoing)
- Meet the Market Events (20th October and 3rd November 2015)

Partners and Practitioners:

- Meetings with 12 DC/BC Housing Officers (April 15)
- Engagement on Commissioning Intentions (August 15)
- Care Leaver Pathway Project (Ongoing)
- Joint Planning and Policy Board (July 15)
- 16-17 year old Homelessness Protocol Workshop (October 2015)

KCC has also undertaken a Public consultation “Proposed changes to Kent’s Supported Accommodation and Floating Support Services” between Monday 30th November 2015 and Monday 8th February 2016. Notification of the consultation launch was sent to approximately 1,500 stakeholders. 209 responses were received to the public consultation. Public Consultation Activity included;

- 6 focus groups with service users to further support the consultation and to support identification of any potential impact on users. In total, KCC engaged with 52 young people in this way.
- Engagement with service users accessing the 5 Teenage Parent services. In total, KCC engaged with 20 young people in this way.
- Engagement with the 5 Teenage Parent providers to discuss the service they provide and their views on moving towards a generic service.

December 2016

- Engagement with all 13 Supporting People providers to discuss the proposals in the Public Consultation document and the potential impact. Feedback was submitted via the Public Consultation questionnaire.
- Engagement with the Housing Options Group to discuss the proposals and Individual engagement meetings with 10 District/Borough Councils were also held throughout December 2015 and January 2016.
- Contact with 6 charities that work with LGBT, Transgender and Young Carers. The charities were asked for their views regarding the proposed changes and whether they felt the changes would negatively impact upon their client groups. The charities were also asked to share the document with any young people they work with.

The table below summaries the views of key Stakeholders, including: Service Users; The Market; Partners and Practitioners.

Profile of those responding to the consultation

Protected characteristic	Consultation Responses (relates to those who responded to the 'About you' questions)	Comparison to Kent Population	Comparison to Service User Population
Age	<p>All Respondents 70 respondents indicated that they were 16-24 (33%). 104 respondents indicated that they were aged 25-59 (50%). 16 respondents indicated that they were aged 60+ (8%).</p>	<p>16-24 year olds responding to the consultation are overrepresented when compared with the wider Kent population (33% Respondents, Kent 11.5%)</p>	
<p>Disability</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 38</p>	<p>All Respondents 28 respondents indicated that they had a disability (13%). 160 respondents did not consider themselves to have a disability (77%).</p> <p>Service Users 18 service users indicated that they had a disability (26%). 48 service users did not consider themselves to have a disability (69%).</p>	<p>Amongst the respondents, individuals with a disability are underrepresented (13% Respondents, 17.6% Kent). Please note: the 17.6% is the percentage of Kent residents with a 'long-term health problem or disability'.</p>	<p>Data not available.</p>
Gender	<p>All Respondents 123 respondents indicated that they were female (59%). 67 respondents indicated that they were male (33%).</p> <p>Service Users 33 service users indicated that they were female (47%). 34 service users indicated that they were male (49%).</p>	<p>Male respondents are underrepresented when compared to Kent (Male 33%, Kent 49%). Whereas, female respondents are slightly overrepresented (Female 59%, Kent 51%)</p>	<p>Male service users who responded to the consultation are slightly underrepresented when compared to all service users (Male 49%, All 60%). Whereas, female service users who responded to the consultation are slightly overrepresented (Female 47%, All 40%)</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 39</p>	<p>Race</p> <p>Respondents 169 respondents indicated that they were White British (81%). 4 respondents indicated that they belonged to a Black ethnic group (2%). 4 respondents indicated that they were White Gypsy/Roma (2%). 4 respondents indicated that they were White Irish (2%). 3 respondents indicated that they were Asian (1%).</p> <p>Service Users 64 service users indicated that they were White British (91%). 3 indicated that they were White Gypsy/Roma (4%).</p>	<p>Amongst the respondents, White British are slightly underrepresented (81% Respondents, 89% Kent).</p> <p>Those indicating they belong to a Black ethnic group are slightly overrepresented (2% Respondents, 1.1% Kent).</p> <p>White Gypsy/Roma individuals are overrepresented when compared to Kent (2% Respondents, 0.3% Kent).</p> <p>White Irish respondents are overrepresented when compared to Kent (2% Respondents, 0.7% Kent).</p> <p>Asian respondents are underrepresented (1% Respondents, 3.25% Kent).</p>	<p>Amongst the service users who responded, White British are underrepresented (91% Respondents, 70% All).</p> <p>Those indicating they belong to a White Gypsy/Roma group are overrepresented when compared to the wider Service User population (4% Respondents, 0.3% All)</p>
<p>Religion or belief</p>	<p>Respondents 49 respondents indicated that they were Christian (23%). 129 respondents indicated that they had no religion (62%).</p> <p>Service Users</p>	<p>Amongst the respondents, Christians are underrepresented when compared with the wider Kent population (23% Respondents, Kent 62%). Those indicating that they have no religion are overrepresented</p>	<p>Amongst the service users who responded, Christian are underrepresented when compared to the wider service user population (10% Service users, 19% All).</p>

	7 service users indicated that they were Christian (10%). 55 service users indicated that they had no religion (79%).	(62% Respondents, 27% Kent).	
Sexual orientation	<p>Respondents 168 respondents indicated that they were Heterosexual (80%). 12 respondents indicated that they were Gay/Bi-Sexual (6%).</p> <p>Service Users 43 service users indicated that they were Heterosexual (61%). 7 service users indicated that they were Gay/Bi-Sexual (10%).</p>	Data not available.	Data not available.

Feedback on the Proposals

Proposal A – Who will use these services

<p>Options</p>	<p>Option 2 - Prioritise young people who are owed a statutory duty or who may need some support to prevent them coming into Care (children in care, care leavers and 16-17 year olds at risk of homelessness)</p>	<p>Option 3 - Limiting services to those who are owed a statutory duty only; young people over 18, whom the council does not have a statutory duty to support, will not be supported.</p>
<p>General Feedback:</p> <p style="text-align: center;">Page 41</p>	<p>Respondents 46% disagree to some extent with Option 2 41% agree to some extent with Option 2</p> <p>Service Users 52% disagree to some extent with Option 2 31% agree to some extent with Option 2</p> <p>Comments included:</p> <ul style="list-style-type: none"> • 11% respondents felt that Option 2 would lead to an increase in homelessness or anti-social behaviour. • 39% commented that over 18s are not ready for independent living and that there is no alternative provision available to them. 	<p>Respondents 79% disagree to some extent with Option 3 14% agree to some extent with Option 3</p> <p>Service Users 90% disagree to some extent with Option 3 5% agree to some extent with Option 3</p> <p>Comments included:</p> <ul style="list-style-type: none"> • 34% felt that over 18s needed support and were not ready for independent living; the needs of over 18 are no different to the needs of under 18s • 7% felt that access to services should be based on individual need not legal status.
<p>Age</p>	<p>Respondents 46% disagree to some extent with Option 2 16-24 year olds 51% of 16-24 year old respondents disagree to some extent with Option 2</p>	<p>Respondents 79% disagree to some extent with Option 3 16-24 year olds 87% of 16-24 year old respondents disagree to some extent with Option 3</p>

<p>Page 42</p>	<p><u>Service Users</u> 52% of 16-24 year old service users disagree to some extent with Option 2</p> <p>Comments included:</p> <ul style="list-style-type: none"> • <i>“Everybody deserves and should be entitled to support. We are all people and suffering is suffering regardless of age or family situation.”</i> • <i>“Everyone that is on the streets is a priority as it’s no fun and very dangerous.”</i> <p>This analysis suggests that Proposal A, Option 2 would have no negative impact upon this protected characteristic.</p>	<p><u>Service Users</u> 90% of 16-24 year old service users disagree to some extent with Option 3</p> <p>Comments included:</p> <ul style="list-style-type: none"> • <i>“Everyone gets treated the same irregardless of age, colour, size etc.”</i> • <i>“Only one person in xxxxx is under 18, the rest would have been rough sleeping. I’m a young girl; I would survive day by day whatever means even if it means prostitution.”</i> <p>A higher percentage of 16-24 year olds (87%) have disagreed with Proposal A, Option 3 when compared with the level of disagreement amongst all respondents (79%). This suggests Proposal A, Option 3 could negatively impact upon 16-24 year olds.</p>
<p>Gender</p>	<p><u>Respondents</u> 46% of all respondents disagree to some extent with Option 2 Male - 48% of male respondents disagreed to some extent with Option 2 Female - 41% of female respondents disagree to some extent with Option 2</p> <p><u>Service Users</u> 52% of all service users responding disagree to some extent with Option 2 Male - 53% of male service users disagreed to some extent with Option 2</p>	<p><u>Respondents</u> 79% of all respondents disagree to some extent with Option 3 Male- 81% of male respondents disagreed to some extent with Option 3 Female - 76% of female respondents disagreed to some extent with Option 3</p> <p><u>Service Users</u> 90% of all service users responding disagree to some extent with Option 3 Male - 91% of male service users disagreed to some extent with Option 3</p>

	<p>Female - 48% of female service users disagreed to some extent with Option 2</p> <p>Amongst the Males disagreeing, comments included:</p> <ul style="list-style-type: none"> • <i>“The need is real for 18+ as well and a huge section of the public will be at risk without these services.”</i> <p>This analysis suggests that Proposal A, Option 2 would have no negative impact upon this protected characteristic.</p>	<p>Female 85% of female service users disagreed to some extent with Option 3</p> <p>Amongst the Males who disagreed, comments included:</p> <ul style="list-style-type: none"> • <i>“Having left the Army at 21, if support wasn’t available, I would still be on the streets. Not everyone who needs help is under 18.”</i> <p>This analysis suggests that Proposal A, Option 3 would have no negative impact upon this protected characteristic.</p>
<p>Disability Page 43</p>	<p><u>Respondents</u> 46% disagree to some extent with Option 2 Disability - 54% of respondents with a disability disagree to some extent with Option 2. No Disability - 42% of respondents without a disability disagree to some extent with Option 2.</p> <p><u>Service Users</u> 52% disagree to some extent with Option 2 Disability - 50% of service users with a disability disagree to some extent with Option 2 No Disability - 48% of service users without a disability disagree to some extent with Option 2.</p> <p>Comments from service users with a disability included:</p> <ul style="list-style-type: none"> • <i>“All I can say is that I am 19 and if it wasn’t for [provider] I wouldn’t be here today.”</i> 	<p><u>Respondents</u> 79% disagree to some extent with Option 3 Disability - 82% of respondents with a disability disagree to some extent with Option 3 No Disability - 76% of respondents without a disability disagree to some extent with Option 3</p> <p><u>Service Users</u> 90% disagree to some extent with Option 3 Disability 89% of service users with a disability disagree to some extent with Option 3. No Disability 88% of service users without a disability disagree to some extent with Option 3.</p> <p>Comments from service users with a disability included:</p>

	<p>A higher percentage of disabled respondents (54%) have disagreed with Proposal A, Option 2 when compared with the level of disagreement amongst all respondents (46%). However the level of disagreement is not higher amongst respondents who are service users with a disability.</p>	<ul style="list-style-type: none"> “xxxx has helped me, they took me off the streets. I dread to think what would happen to me and my mental health if I had to leave at 18.” <p>This analysis suggests that Proposal A, Option 3 would have no negative impact upon this protected characteristic.</p>
<p>Sexual Orientation</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 44</p>	<p><u>Respondents</u> 46% disagree to some extent with Option 2 Heterosexual - 44% of heterosexual respondents disagree to some extent with Option 2. Gay/Bi-Sexual - 58% of gay/bi-sexual respondents disagree to some extent with Option 2.</p> <p><u>Service Users</u> 52% disagree to some extent with Option 3 Heterosexual - 51% of heterosexual service users disagree to some extent with Option 2 Gay/Bi-Sexual - 50% of gay/bi-sexual service users disagree to some extent with Option 2.</p> <p>Comments from these service users included:</p> <ul style="list-style-type: none"> “To not support anyone over 18 would be a massive shame and a large amount of our population left with nothing at all. The percentage of homelessness would rise dramatically.” <p>A higher percentage of gay or bi-sexual respondents (58%) have disagreed with Proposal A, Option 2 when</p>	<p><u>Respondents</u> 79% disagree to some extent with Option 3 Heterosexual - 76% of heterosexual respondents disagree to some extent with Option 3 Gay/Bi-Sexual - 83% of gay/bi-sexual respondents disagree to some extent with Option 3.</p> <p><u>Service Users</u> 90% disagree to some extent with Option 3 Heterosexual - 86% of heterosexual service users disagree to some extent with Option 3 Gay/Bi-Sexual - 83% of gay/bi-sexual service users disagree to some extent with Option 3.</p> <p>This analysis suggests that Proposal A, Option 3 would have no negative impact upon this protected characteristic.</p>

	<p>compared with the level of disagreement amongst all respondents (46%). However the level of disagreement is not higher amongst respondents who are gay or bi-sexual service users.</p>	
<p>Race</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 45</p>	<p>Respondents 46% disagree to some extent with Option 2 White British - 48% of White British respondents disagree to some extent with Option 2.</p> <p>Service Users 52% disagree to some extent with Option 2 White British - 53% of White British service users disagree to some extent with Option 2</p> <p>The level of responses amongst other racial groups was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal A would have no negative impact on White British.</p>	<p>Respondents 79% disagree to some extent with Option 3 White British - 79% of White British respondents disagree to some extent with Option 3</p> <p>Service Users 90% disagree to some extent with Option 3 White British - 81% of White British service users disagree to some extent with Option 3.</p> <p>The level of responses amongst other racial groups was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal A, Option 3 would have no negative impact upon this protected characteristic.</p>
<p>Religion</p>	<p>Respondents 46% disagree to some extent with Option 2 Christian -35% of Christian respondents disagree to some extent with Option 2. Other – 33% of ‘Other’ respondents disagree to some extent with Option 2</p> <p>Service Users 52% disagree to some extent with Option 3</p>	<p>Respondents 79% disagree to some extent with Option 3 Christian- 76% of Christian respondents disagree to some extent with Option 3 Other – 67% (2 responses) of ‘Other’ respondents disagree to some extent with Option 2</p> <p>Service Users 90% disagree to some extent with Option 3</p>

	<p>Christian - 43% of Christian service users disagree to some extent with Option 2</p> <p>The level of responses amongst other religions was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal A, Option 2 would have no negative impact upon this protected characteristic.</p>	<p>Christian - 86% of Christian service users disagree to some extent with Option 3.</p> <p>The level of responses amongst other religions was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal A, Option 3 would have no negative impact upon this protected characteristic.</p>
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Proposal B – Reviewing the Service Offer

<p>Page 4</p>	<p>Proposal B - Providing a generic offer; this would mean that all services would be able to cater for the needs of all service user groups and there would be no separate targeted services.</p>	
<p>General Feedback:</p>	<p>Respondents 34% disagree to some extent with Proposal B 52% agree to some extent with Proposal B</p> <p>Service Users 27% disagree to some extent with Proposal B 34% agree to some extent with Proposal B</p> <p>Comments included:</p> <ul style="list-style-type: none"> • Teenage parents and babies should be separate and babies could be at risk (16%) • Specialist services are better/one size does not fit all (22%) • No one would feel labelled or singled out (4%) 	
<p>Age</p>	<p>Respondents</p>	

	<p>34% disagree to some extent with Proposal B 16-24 year olds - 29% of 16-24 year old respondents disagree to some extent with Proposal B</p> <p><u>Service Users</u> 27% disagree to some extent with Proposal B 16-24 year olds - 30% of 16-24 year old service users disagree to some extent with Proposal B.</p> <p>Comments from 16-24 year olds included:</p> <ul style="list-style-type: none"> • <i>“I think certain services should stay separate as there are different needs for some people like offenders and young mums”</i> • <i>“People go through different things together and different groups can’t understand each other. People support each other (peer groups)”</i> <p>This analysis suggests that Proposal B would have no negative impact upon this protected characteristic.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 47 Gender</p>	<p><u>Respondents</u> 34% disagree to some extent with Proposal B Male - 31% of male respondents disagree to some extent with Proposal B Female - 33% of female respondents disagree to some extent with Proposal B</p> <p><u>Service Users</u> 27% disagree to some extent with Proposal B Male - 29% of male service users disagree to some extent with Proposal B. Female - 27% of female service users disagree to some extent with Proposal B.</p> <p>Comments amongst those disagreeing included;</p> <ul style="list-style-type: none"> • <i>“Being separated from groups means that you don’t get the same support.”</i> • <i>“Because it wouldn’t work with young teens and mothers and babies.”</i> <p>This analysis suggests that Proposal B would have no negative impact upon this protected characteristic.</p>

<p>Disability</p>	<p><u>Respondents</u> 34% disagree to some extent with Proposal B Disability - 11% of respondents with a disability disagree to some extent with Proposal B No Disability - 34% of respondents with no disability disagree to some extent with Proposal B</p> <p><u>Service Users</u> 27% disagree to some extent with Proposal B Disability - 6% of service users with a disability disagree to some extent with Proposal B. No Disability - 33% of service users without a disability disagree to some extent with Proposal B.</p> <p>This analysis suggests that Proposal B may have a <u>positive</u> impact on this protected characteristic. A lower percentage of disabled respondents (11%) including disabled service users (6%) disagreed with Proposal B when compared with the level of disagreement amongst all respondents (34%).</p>
<p>Sexual Orientation age 48</p>	<p><u>Respondents</u> 34% disagree to some extent with Proposal B Heterosexual - 32% of heterosexual respondents disagree to some extent with Proposal B Gay/Bi-Sexual - 28% of gay/bi-sexual respondents disagree to some extent with Proposal B</p> <p><u>Service Users</u> 27% disagree to some extent with Proposal B Heterosexual- 28% of heterosexual service users disagree to some extent with Proposal B Gay/Bi-Sexual- 29% of gay/bi-sexual service users disagree to some extent with Proposal B</p> <p>Comments from gay/bi-sexual individuals who disagreed included;</p> <ul style="list-style-type: none"> • <i>“Individuals have individual need and therefore each case must be considered separately and on its own merits; these are real people we are thinking about, not boxes breakfast cereals sitting on a supermarket shelf!”</i> <p>This analysis suggests that Proposal B would have no negative impact upon this protected characteristic.</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 49</p> <p>Race</p>	<p><u>Respondents</u> 34% disagree to some extent with Proposal B White British- 31% of White British respondents disagree to some extent with Proposal B</p> <p><u>Service Users</u> 27% disagree to some extent with Proposal B White British - 25% of White British service users disagree to some extent with Proposal B</p> <p>Amongst those White British individuals disagreeing, comments included;</p> <ul style="list-style-type: none"> • <i>“Equality and diversity celebrates the differences between us how can we support young vulnerable adults if we say they are all the same.”</i> <p>The level of responses amongst other racial groups was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal B would have no negative impact upon this protected characteristic.</p>
<p>Religion</p>	<p><u>Respondents</u> 34% disagree to some extent with Proposal B Christian - 29% of Christian respondents disagree to some extent with Proposal B</p> <p><u>Service Users</u> 27% disagree to some extent with Proposal B Christian - 14% of Christian service users disagree to some extent with Proposal B (only one service user)</p> <p>The level of responses amongst other religions was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal B would have no negative impact upon this protected characteristic.</p>

Proposal C - Joining up accommodation based support and floating support services

	<p>Proposal C: Joining up accommodation based support and floating support services to create a seamless service that is able to deliver a range of accommodation and personalised support.</p>
<p>General Feedback:</p> <p>Page 50</p>	<p>Respondents 11% disagree to some extent with Proposal C 75% agree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C 73% agree to some extent with Proposal C</p> <p>Comments included;</p> <ul style="list-style-type: none"> • It depends on the individual young person - young people need differing levels of support (16%)
<p>Age</p>	<p>Respondents 11% disagree to some extent with Proposal C 16-24 year olds - 9% of 16-24 year old respondents disagree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C 16-24 year olds - 7% of 16-24 year old service users disagree to some extent with Proposal C.</p> <p>Comments from 16-24 year olds who disagreed included;</p> <ul style="list-style-type: none"> • <i>“I think it should be optional because although we are learning to live independently when we move out from here, we should be ready to live fully independently.”</i>

	<p>This analysis suggests that Proposal C would have no negative impact upon this protected characteristic.</p>
<p>Gender</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 51</p>	<p>Respondents 11% disagree to some extent with Proposal C Male - 16% of male respondents disagree to some extent with Proposal C Female - 8% of female respondents disagree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C Male - 9% of male service users disagree to some extent with Proposal C Female - 6% of female service users disagree to some extent with Proposal C</p> <p>Comment included;</p> <ul style="list-style-type: none"> • <i>“Support in accommodation services is vastly different to floating support services and vice versa. Client situation is vastly different. Support contract times different.”</i> <p>This analysis suggests that Proposal C would have no negative impact upon this protected characteristic.</p>
<p>Disability</p>	<p>Respondents 11% disagree to some extent with Proposal C Disability - 7% of respondents with a disability disagree to some extent with Proposal C No Disability - 12% of respondents with no disability disagree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C Disability - 0% of service users with a disability disagree to some extent with Proposal C No Disability - 10% of service users without a disability disagree to some extent with Proposal C</p> <p>This analysis suggests that Proposal C may have a positive impact on this protected characteristic. A lower</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 5</p>	<p>percentage of disabled respondents (7%) including 0% of disabled service users, disagreed with Proposal C when compared with the level of disagreement amongst all respondents (11%).</p> <p>Sexual Orientation</p> <p>Respondents 11% disagree to some extent with Proposal C Heterosexual - 12% of heterosexual respondents disagree to some extent with Proposal C Gay/Bi-Sexual - 0% of gay/bi-sexual respondents disagree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C Heterosexual -7% of heterosexual service users disagree to some extent with Proposal C Gay/Bi-Sexual - 0% of gay/bi-sexual service users disagree to some extent with Proposal C</p> <p>This analysis suggests that Proposal C may have a <u>positive</u> impact on this protected characteristic. A lower percentage of gay and bi-sexual respondents (0%) including gay and bi-sexual service user respondents (0%) disagreed with Proposal C when compared with the level of disagreement amongst all respondents (11%).</p>
<p>Race</p>	<p>Respondents 11% disagree to some extent with Proposal C White British- 12% of White British respondents disagree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C White British - 9% of White British service users disagree to some extent with Proposal C</p> <p>Comments included:</p> <ul style="list-style-type: none"> • <i>“I think that is going to stop more one to one sessions, and may stop the amount of time I get to see my support worker”</i> <p>The level of responses amongst other racial groups was too low to give a proportionate representation of disagreement.</p>

	This analysis suggests that Proposal C would have no negative impact upon this protected characteristic.
Religion	<p>Respondents 11% disagree to some extent with Proposal C Christian - 14% of Christian respondents disagree to some extent with Proposal C</p> <p>Service Users 9% disagree to some extent with Proposal C Christian - 0% of Christian service users disagree to some extent with Proposal C (only seven Christian service users)</p> <p>The level of responses amongst other religions was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal C would have no negative impact upon this protected characteristic.</p>

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Proposal D – Lining up services with areas of the County

	Proposal D - Reducing the number of organisations delivering services	Preferred Option (this was not presented as a Proposal, instead respondents were asked to give their preferred option) – Option 1: Current Model Option 2: Countywide Model Option 3: 4 Area Based Model
General Feedback:	<p>Respondents 23% disagree to some extent with Proposal D 54% agree to some extent with Proposal D</p> <p>Service Users</p>	<p>Respondents Option 1: Current Model 12% of all respondents preferred the current model Option 2: Countywide 25% of all respondents preferred a Countywide model</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 36</p>	<p>26% disagree to some extent with Proposal D 43% agree to some extent with Proposal D</p> <p>Comments included;</p> <ul style="list-style-type: none"> • <i>“There seems to be too many people/organisations doing completely different things.”</i> 	<p>Option 3: 4 Area Based Services 48% of all respondents preferred an Area Based model</p> <p>Service Users</p> <p>Option 1: Current Model 17% of all service users preferred the current model</p> <p>Option 2: Countywide 30% of all service users preferred a Countywide model</p> <p>Option 3: 4 Area Based Services 34% of all service users preferred an Area Based model</p> <p>Comments included:</p> <ul style="list-style-type: none"> • Young people should be able to maintain a local connection (10%) • More choice of accommodation is important (6%).
<p>Age 16-24</p>	<p>Respondents 23% disagree to some extent with Proposal D 16-24 year olds- 24% of 16-24 year old respondents disagree to some extent with Proposal D</p> <p>Service Users 26% disagree to some extent with Proposal D 16-24 year olds - 25% of 16-24 year old service users disagree to some extent with Proposal D</p> <p>This analysis suggests that Proposal D would have no negative impact upon this protected characteristic.</p>	<p>Respondents 48% preferred Option 3, whereas 37% preferred either Option 1 or 2. 16-24 year olds – 34% of 16-24 year old respondents preferred Option 3. 47% preferred either Option 1 or 2.</p> <p>Service Users 34% preferred Option 3, whereas 47% preferred either Option 1 or 2. 16-24 year olds - 33% of 16-24 year old service users preferred Option 3. 46% preferred either Option 1 or 2.</p> <p>Comments included;</p> <ul style="list-style-type: none"> • <i>“County wide would secure support in all areas of Kent</i>

		<p><i>which would mean no one in need of the service(s) would have difficulty getting them.”</i></p> <p>Overall, a lower percentage of 16-24 year olds have preferred Option 3 (34%) than the percentage of all respondents (48%).</p> <p>However the percentage preferring Option 3 is not lower amongst respondents who are service users aged 16-24.</p>
<p>Gender</p> <p style="text-align: center;">Page 55</p>	<p><u>Respondents</u> 23% disagree to some extent with Proposal D Male - 27% of male respondents disagree to some extent with Proposal D Female - 23% of female respondents disagree to some extent with Proposal D</p> <p><u>Service Users</u> 26% disagree to some extent with Proposal D Male - 21% of male service users disagree to some extent with Proposal D Female - 27% of female service users disagree to some extent with Proposal D</p> <p>This analysis suggests that Proposal D would have no negative impact upon this protected characteristic.</p>	<p><u>Respondents</u> 48% preferred Option 3, whereas 37% preferred either Option 1 or 2. Male - 36% of male respondents preferred Option 3. 48% of male respondents preferred either Option 1 or 2. Female 51% of female respondents preferred Option 3. 37% of female respondents preferred either Option 1 or 2.</p> <p><u>Service Users</u> 34% preferred Option 3, whereas 47% preferred either Option 1 or 2. Male 26% of male service users preferred Option 3. 50% of male service users preferred either Option 1 or 2. Female 45% of female service users preferred Option 3. 39% of female service users preferred Option 1 or 2.</p> <p>Comment included;</p> <ul style="list-style-type: none"> • <i>“I feel that the services for young people (16-24 yr olds)</i>

		<p><i>should not be a postcode lottery and every young person (16-24) deserves to have the opportunity to access the same service.”</i></p> <p>Fewer male respondents preferred Option 3 (36%) including male service users (26%) when compared with the percentage of all respondent who preferred Option 3 (48%).</p> <p>This suggests that implementing a 4 area based model could negatively impact upon Males.</p>
<p>Disability</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 56</p>	<p><u>Respondents</u> 23% disagree to some extent with Proposal D Disability - 25% of respondents with a disability disagree to some extent with Proposal D No Disability - 24% of respondents with no disability disagree to some extent with Proposal D</p> <p><u>Service Users</u> 26% disagree to some extent with Proposal D Disability - 16% of service users with a disability disagree to some extent with Proposal D No Disability - 27% of service users with no disability disagree to some extent with Proposal D</p> <p>This analysis suggests that Proposal D may have a positive impact on this protected characteristic. A lower percentage of disabled service users (16%) disagreed with Proposal D when compared with the level of disagreement amongst all service users responding (26%).</p>	<p><u>Respondents</u> 48% preferred Option 3, whereas 37% preferred either Option 1 or 2. Disability 39% of respondents with a disability preferred Option 3, whereas 50% preferred either Option 1 or 2. No Disability 47% of respondents with no disability preferred Option 3, whereas 38% preferred either Option 1 or 2.</p> <p><u>Service Users</u> 34% preferred Option 3, whereas 47% preferred either Option 1 or 2. Disability 28% of service users with a disability preferred Option 3, whereas 56% preferred either Option 1 or 2. No Disability 38% of service users with no disability preferred Option 3, whereas 44% preferred either Option 1 or 2.</p>

		<p>Comments included;</p> <ul style="list-style-type: none"> • “Everyone should have same no matter where you live.” <p>A lower percentage (39%) of respondents with a disability including disabled service users (28%) preferred Option 3 when compared with all respondents (48%).</p> <p>This suggests that implementing Option 3 could have a negative impact upon individuals with a disability.</p>
<p>Sexual Orientation</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 57</p>	<p><u>Respondents</u> 23% disagree to some extent with Proposal D Heterosexual - 21% of heterosexual respondents disagree to some extent with Proposal D Gay/Bi-Sexual - 42% of gay/bi-sexual respondents disagree to some extent with Proposal D</p> <p><u>Service Users</u> 26% disagree to some extent with Proposal D, Question 1 Heterosexual - 19% of heterosexual service users disagree to some extent with Proposal D Gay/Bi-Sexual - 43% of gay/bi-sexual service users disagree to some extent with Proposal D</p> <p>Comments from gay/bi-sexual individuals who disagreed included;</p> <ul style="list-style-type: none"> • “Smaller independent / private providers can often offer better responses and more direct and effective interventions than large 'mega-organisations'. It is never wise to place all your 	<p><u>Respondents</u> 48% preferred Option 3, whereas 37% preferred either Option 1 or 2. Heterosexual 46% of heterosexual respondents preferred Option 3, whereas 38% preferred either Option 1 or 2. Gay/Bi-Sexual 25% of gay/bi-sexual respondents preferred Option 3, whereas 67% preferred either Option 1 or 2.</p> <p><u>Service Users</u> 34% preferred Option 3, whereas 47% preferred either Option 1 or 2. Heterosexual 35% of heterosexual service users preferred Option 3, whereas 35% of preferred either Option 1 or 2. Gay/Bi-Sexual 0% of gay/bi-sexual service users preferred Option 3, whereas 86% preferred Option 1 or 2.</p>

	<p><i>eggs in one basket!"</i></p> <p>A higher percentage of Gay/Bi-Sexual respondents (42%) and Gay/Bi-Sexual service users (43%) have disagreed with Proposal D when compared with the level of disagreement amongst all respondents (23%).</p> <p>This suggests reducing the number of organisations delivering services could negatively impact upon Gay/Bi-Sexual individuals.</p>	<p>Comments included;</p> <ul style="list-style-type: none"> • <i>"I would like to feel that whatever area I lived in in Kent, I would be able to reach or be referred to any service appropriate."</i> <p>A lower percentage (25%) of gay/bi-sexual respondents, including 0% of the gay/bi-sexual service users preferred Option 3 compared with the percentage of all respondents who preferred Option 3 (48%).</p> <p>This suggests that implementing a 4 area model could have a negative impact upon gay/bi-sexual individuals.</p>
<p>Race</p> <p>Page 58</p>	<p><u>Respondents</u> 23% disagree to some extent with Proposal D, Question 1 White British - 25% of White British respondents disagree to some extent with Proposal D</p> <p><u>Service Users</u> 26% disagree to some extent with Proposal D, Question 1 White British - 27% of White British service users disagree to some extent with Proposal D</p> <p>The level of responses amongst other racial groups was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal D would have no negative impact upon this protected characteristic.</p>	<p><u>Respondents</u> 48% preferred Option 3, whereas 37% preferred either Option 1 or 2. White British 44% of White British respondents preferred Option 3, whereas 28% preferred either Option 1 or 2.</p> <p><u>Service Users</u> 34% preferred Option 3, whereas 47% preferred either Option 1 or 2. White British 34% of White British service users preferred Option 3, whereas 28% of preferred either Option 1 or 2.</p> <p>Comments included;</p> <ul style="list-style-type: none"> • <i>"Countywide would secure support in all areas of Kent which would mean no one in need of the service(s) would</i>

		<p><i>have difficulty getting them.”</i></p> <ul style="list-style-type: none"> • <i>“I would like to feel that whatever area I lived in in Kent, I would be able to reach or be referred to any service appropriate.”</i> <p>Other race groups were not captured, or the level of responses was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that a 4 area model would have no negative impact upon this protected characteristic.</p>
<p>Religion Page 59</p>	<p><u>Respondents</u> 23% disagree to some extent with Proposal D, Question 1 Christian - 24% of Christian respondents disagree to some extent with Proposal D, Question 1</p> <p><u>Service Users</u> 26% disagree to some extent with Proposal D, Question 1 Christian - 29% of Christian service users disagree to some extent with Proposal D, Question 1</p> <p>The level of responses amongst other religions was too low to give a proportionate representation of disagreement.</p> <p>This analysis suggests that Proposal D would have no negative impact upon this protected characteristic.</p>	<p><u>Respondents</u> 48% preferred Option 3, whereas 37% preferred either Option 1 or 2. Christian 49% of Christian respondents preferred Option 3, whereas 38% preferred either Option 1 or 2.</p> <p><u>Service Users</u> 34% preferred Option 3, whereas 47% preferred either Option 1 or 2. Christian 57% of Christian service users preferred Option 3, whereas 43% of preferred either Option 1 or 2.</p> <p>Other religious groups were not captured, or the level of responses was too low to give a proportionate representation of disagreement.</p>

		This analysis suggests that a 4 area model would have no negative impact upon this protected characteristic.
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Potential Impact

Age, Gender and Pregnancy and Maternity.

Impact is none or unknown for race, religion or belief, disability, gender identity, sexual orientation, marriage and civil partnership, carer's responsibilities.

Adverse Impact:

By extending the current provision for a further year there could be an adverse impact on the following groups:

- Age - Services relate to 16-25 year old Children in Care and Care Leavers and Vulnerable Young People only and therefore this group are affected more than others. Given the proposed change, more statutory service users (16/17 year old children in care and care leavers) will be able to access the service, suggesting the age of service users could decrease.
- Gender – Given the proposed increase in statutory service users, more males could be accessing the new service. This may affect females, particularly teenage mothers, less favourably.
- Pregnancy & Maternity –KCC currently provides 5 specialist Teenage Parent services. There may be an impact on Teenage Parents who are not owed a statutory duty (see separate EQIA).

It is noted that by maintaining current provision it negates any potential positive impacts that retendering the contract could provide.

These opportunities will be explored in more detail in the EqIA for the retendering of service.

Positive Impact:

A Single Source Action Proposal for Housing Related Support Accommodation and Floating Support Services will mean;

- A continuation of service for young people by service providers with whom they have a current relationship.
- There is a longer time scale to transition current service users to a new service to ensure that their individual needs continue to be met.
- KCC would have greater knowledge regarding the impact of remodelling these services in line with future commissioning intentions for young people.

Overall, the proposed remodelling of the services will ensure that:

- Statutory service users are prioritised,
- Service User's individual needs are met,
- There is a consistent service offer and
- More young people are placed in their 'ideal accommodation' (as identified by practitioners).

JUDGEMENT

- Option 1 – Screening Sufficient **YES**
- Option 2 – Internal Action Required **YES**
- Option 3 – Full Impact Assessment **NO**

Action Plan

The action plan below will be delivered over the forthcoming months. When developing the service specification and undertaking the procurement the action plan will need to be carefully considered to ensure any adverse effects on protected characteristic groups are minimised.

Monitoring and Review

The action plan will be reviewed on a monthly basis post consultation and until the procurement exercises have taken place, the new contract is in place, and that KCC is satisfied all protected characteristics have been adequately considered with negative impacts minimised.

Sign Off

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

Senior Officer

Signed: 

Name: Karen Mills

DMT Member

Signed:



Name: Mark Lobban

Job Title: Director of Commissioning

Date:

Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale
Gender Identity, Sexual Orientation, Carers' Responsibilities, Marriage and Civil Partnerships and Religion,	There is no data relating to these groups – potential impact is unknown	Providers to begin capturing this data Include in new contract monitoring	This will assist in identifying any impact this programme may have on each protected characteristic and if there is action can be taken to prevent any adverse impact. The new service will assist in delivering services that meet this group's needs.	RC/KM	April 2018
Age, and Gender	Potential impact	Engage with existing providers. Ensure EQIA is shared.	Establish potential impact and put in place actions to mitigate.	RC/KM	April 2018
Pregnancy & Maternity	Impact of remodelling the 5 teenage parent services to accept all YP.	EqIA to access the possible closure of teenage parent services. Engagement with service users – visits.	This will identify the impact of remodelling or closure.	RC/KM	Completed
All	Transition	Ensure exit and transition arrangements are incorporated within Single source contract and continue to work with current providers to ensure individual needs are identified and addressed.	Service users are accommodated in line with their individual needs	Current Providers, Procurement, Strategic Commissioning, Accommodation Support Advisors, Social Workers and Personal Advisors.	Ongoing

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From: Peter Oakford, Cabinet Member for Specialist Children’s Services
 Andrew Ireland, Corporate Director of Social Care Health and Wellbeing

To: Children’s Social Care and Health Cabinet Committee – 16 January 2017

Subject: **REVIEW OF THE 18PLUS CARE LEAVING SERVICE**

Classification: Unrestricted

Past Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary: This paper reviews the Care Leaving Service in light of the significant increase in Unaccompanied Asylum Seeking Children who began arriving in July 2015 and became looked after by the Council and who are now reaching 18 years of age and transitioning into the 18plus Care Leaving Service. The review has been undertaken to ensure there are appropriate resources allocated to meet this increased need and manageable workloads for staff with sufficient management capacity to oversee the casework.

Recommendation: The Children’s Social Care and Health Cabinet Committee is asked to **NOTE** the proposed structure of the 18plus Care Leaving Service to meet the increasing demand of Unaccompanied Asylum Seeking Children transitioning into the Service.

1. Introduction

1.1 This paper is produced in order to address the transition of Unaccompanied Asylum Seeking Children (UASC) from the Looked After system into the 18plus Care Leaving Service. There were significant numbers of UASC who began arriving in July 2015 and became looked after by the Council. These Young People are now reaching 18 years of age and are transitioning into the 18plus Care Leaving Service and are entitled to services. The 18plus Care Leaving Service is required to respond to this increase with a proposed new structure and increased resources (staffing) so that the service provided can appropriately meet the level of need.

2. Financial Implications

2.1 This paper deals only with the staffing costs associated with the proposed restructure and includes the costs for Citizen Care Leavers and Asylum Care Leavers (ACL). The associated costs for living, accommodation and other care

leaving allowances will be dealt with in subsequent reports. The current Leaving Care Service is funded by (1) the Council's base budget for supporting Citizen Care Leavers, and (2) the Home Office Asylum Grant for Care Leavers for those previously UASC.

- 2.2 The current staffing structure for Citizen Care Leavers has a base budget of £962.5k; however this is not sufficient for the new proposed structure which requires £1,330k assuming no vacancy factor is built in. An increase is therefore required of £367k.
- 2.3 The current cost of the Care Leaver Service for Asylum has to be covered by the weekly grant rate of £200 per young person which the Council is able to claim from the Home Office. However this also has to cover other support and accommodation costs for those young people. The total gross cost for the Service which is required to support the 600 Citizen Care Leavers and 900 Asylum Care Leavers is £3,709k, of which it is assumed £2,379k will be funded from Home Office Grant, leaving a base budget requirement of £1,330k. The above does however assume that any shortfall in funding in relation to the total spend on Asylum Care Leavers is held against the overall Asylum Accounts, pending further negotiation with the Home Office.

3. Policy Framework and Legal Implications

- 3.1 This paper has taken account of The Children Act 1989 guidance and regulations, Volume 3: planning transition to adulthood for Care Leavers 2010 and the revision in January 2015. This legislation sets out the expectations of Local Authorities and their statutory responsibilities.
- 3.2 Care Leavers is an Ofsted limiting judgement and therefore if the service is found to be inadequate the service provision to children and young people by social care will not meet minimum overall requirements. Ofsted has expectations of care leaving services and these are outlined in their inspection reports. Case law has also outlined the Local Authority responsibilities to ensure that pathway plans are overseen by qualified Social Workers stopping short of expecting services to be delivered by Social Workers.

4. Human Resources Implications

- 4.1 There are Human Resource policy implications:
 - The span of management oversight should be no more than six layers from Corporate Director to operational delivery
 - There is an expectation that the average span for a manager should be a minimum of seven FTE reports.
- 4.2 The proposed structure is not compliant with the Human Resource expectations.
 - 4.2.1 To ensure compliance:

- There should be seven FTE reports within the Team Managers line management in Citizen Care Leaver's Teams increasing the oversight of a Team Manager from 150 cases to 175 cases
- The Head of Service for the Care Leaving Service should be responsible for seven reports within their line management structure
- The Service Manager for ACLs should be responsible for seven reports within their line management structure.

4.3 Current proposals

- With the additional Service Manager for ACLs there are seven layers of management to the Team Manager
- The Head of Service would be responsible for the Accommodation Team Manager, the Business Manager and at least four Team Managers.

5.1 Current Risks

- 5.1 If there is a reduction in the management capacity in the service there is insufficient management oversight and progression of the strategic issues in relation to progressing asylum issues and risk management within the service.
- 5.2 This level of casework does not afford sufficient Team Manager oversight of cases including risk management. It should also be taken into account that the Team Managers are providing oversight of young people who are referred to as 'missing' and chairing risk management meetings as well as allocating and supervising staff.
- 5.3 There are current Judicial Reviews pending regarding the lack of social work oversight with the pathway planning process. This proposed re-structure is an opportunity to deliver oversight and appropriate manageable caseloads for staff and managers.
- 5.4 The span from Corporate Director to Team Manager also creates more than six layers when the Service Manager for ACL reports to the Head of Service Care Leavers, therefore is not compliant with the HR policy on spans and layers. The HR policy is to create efficiencies and in the case of ACL the funding for the Service Manager post is met from the Home Office grant and should not be subject to KCC HR structure.

6. Current Structure

- 6.1 There is a Head of Care Leavers 18plus responsible for the Kent Care Leaver 18plus Service reporting to the Assistant Director, Corporate Parenting. There are currently three Team Managers who are responsible for Senior Personal Advisers (SPA) and Personal Advisers (PA).
- 6.2 The teams are split into three geographical areas North, West and South. It is proposed that there is a service for the East as there is currently no care leaving presence in this area.

6.3 The teams were set up on basic principles:

- PAs hold caseloads of 30 Young People
- SPAs to hold caseloads of 15 Young People and supervise a maximum of four staff
- Social Workers (SW) hold 15 complex cases and case work related to immigration issues
- There are five PA vacancies as of November 2016 which are being recruited with permanent staff.

6.4 There are eight SPAs, 32 PAs, and three SWs in the County's 18plus Care Leaving Service as at August 2016. The numbers of PAs is being continuously reviewed to take account of the significant increases in the numbers of Young People who are reaching the age of 18 in the next two years. This increase relates to the transfer of the UASC into the 18plus Care Leaving Service as they reach the age of 18 years. The SWs are responsible for age assessment, Human Rights Assessments and Judicial Reviews as well as a focus on some of the more complex cases and concerning cases.

6.5 The 18plus Care Leaving Service provides all statutory duties, as prescribed in the Childrens (Leaving Care) Act 2000 to Kent leaving care Young People aged 18-25 years. The Service provides care leaving services to UASC and the provision of services does not differentiate between UASC and Citizen Young People. The 18plus Care Leaving Service also manages an accommodation provision which provides housing options for Young People aged 16 to 21 years of age. This service works with the twelve District Councils to ensure there are processes in place for Care Leavers to access appropriate housing. There is a Team Manager for Accommodation Services and six Accommodation Officers.

7. Statistical Analysis of the Current Workloads and Staffing

7.1 18plus Care Leaving Service data was used for those already known as at 31 August 2016, and this is the starting and fixed point to forecast the growth through 2016/17 and beyond. As at 31 August 2016 the 18plus Care Leaving Service was supporting a total of 1,109 Young People (540 UASC and 569 Citizen Young People).

Table 1
Total number of Young People supported by the
18plus Care Leaving Service as at 31 August 2016

UASC	CITIZEN	TOTAL
540	569	1,109

7.2 To plan 18plus Care Leaving Service delivery and ensure there are appropriate resources in place to meet demand, an analysis of the current numbers of Looked After Children and likely numbers of Care Leavers has been undertaken. There are challenges with predicting the increases and changes in the volume of Care

Leavers over time. Reliability on the forecast of the numbers of Care Leavers reduces further into the future and therefore are best estimates. The forecasting for the numbers of young people has been based on historical data and assumptions have been made using this information to make future predictions on the numbers of young people who will become 18 and will require a Care Leavers service.

7.3 The numbers of Care Leavers and the estimated increases are noted in Table 1a below. The table is based on numbers of Care Leavers at year end (31 March 2017) based on:

- The number of Care Leavers that are open currently and that are projected to remain open until they are 21 years. At present, a small cohort of Care Leavers both UASC and Citizen remain open cases beyond the age of 21 years of age; however there is a marked difference between these two groups and accessing services post 21 years. Eligibility for services post 21 is outlined in current legislation. There is a higher percentage of ACLs who remain open and accessing services post 21; they are more likely to remain in education than the percentage of Citizen Care Leavers who remain in education. Therefore a different percentage has been applied for ACLs and Citizen Care Leavers who remain allocated a PA beyond the age of 21. The forecast uses Specialist Children's Services Management Information Unit figures based on previous financial years to provide the indicator of what is likely to happen in the future. This forecast will also change if the current Children's Bill becomes law, as all Care Leavers will be eligible for services post 21 and up to 25 years of age.
- The current cohort of Looked After Children has been projected forward and are included in the estimate of the numbers who will become Care Leavers. Some Young People will not be eligible for care leaving and this has been taken into account and the figure is based on historical trends.
- The most significant estimate relates to the numbers who are likely to become looked after in future. This estimate is based on history and takes into account the UASC cap for Local Authorities and is in place along with dispersal. This estimate allows for a percentage who will be in care beyond 16 years of age (as 'qualifying'), and again a percentage for those who will remain post 21.
- The figures below exclude those who are current Care Leavers and reported to the police as missing persons at 31 August 2016. This equated to 61 ACLs and four Citizen Care Leavers. Additionally there are 61 UASC and three Citizen looked after who are missing and turning 18 in the period below. These have also been excluded from the respective years.

7.3.1 It is clear that there are significant increased workloads in the 18plus Care Leaving Service in the period July 2016 to March 2018.

Table 1a

Figure at year end	UASC	Citizen	Total (exc missing)
2016/17	696	621	1317
2017/18	871	563	1434
2018/19	770	530	1300
2019/20	576	544	1120
2020/21	453	542	995
2021/22	449	625	1074

Table 2

Care Leavers turning 18 and 21 up to March 2018
based on current Looked After Children (LAC) list and Care Leavers caseload at 31 August 2016

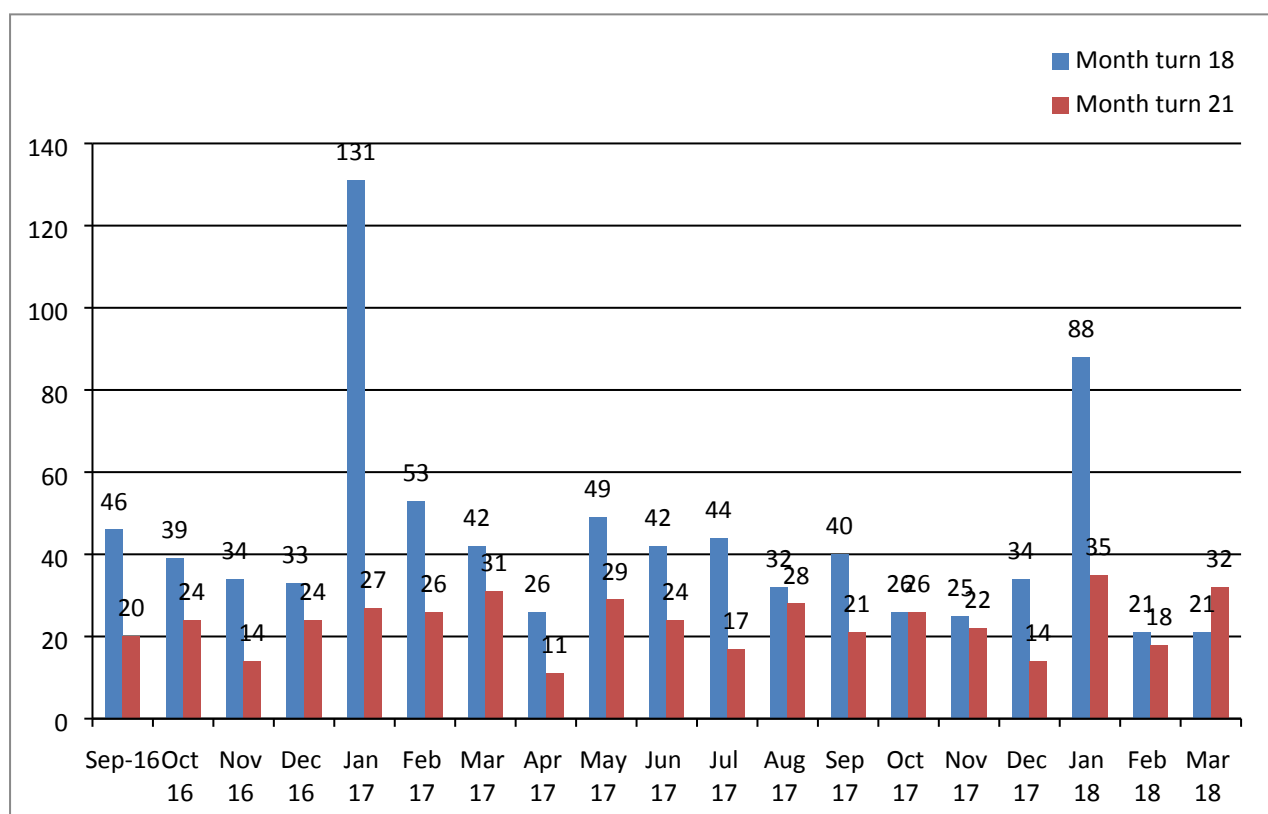
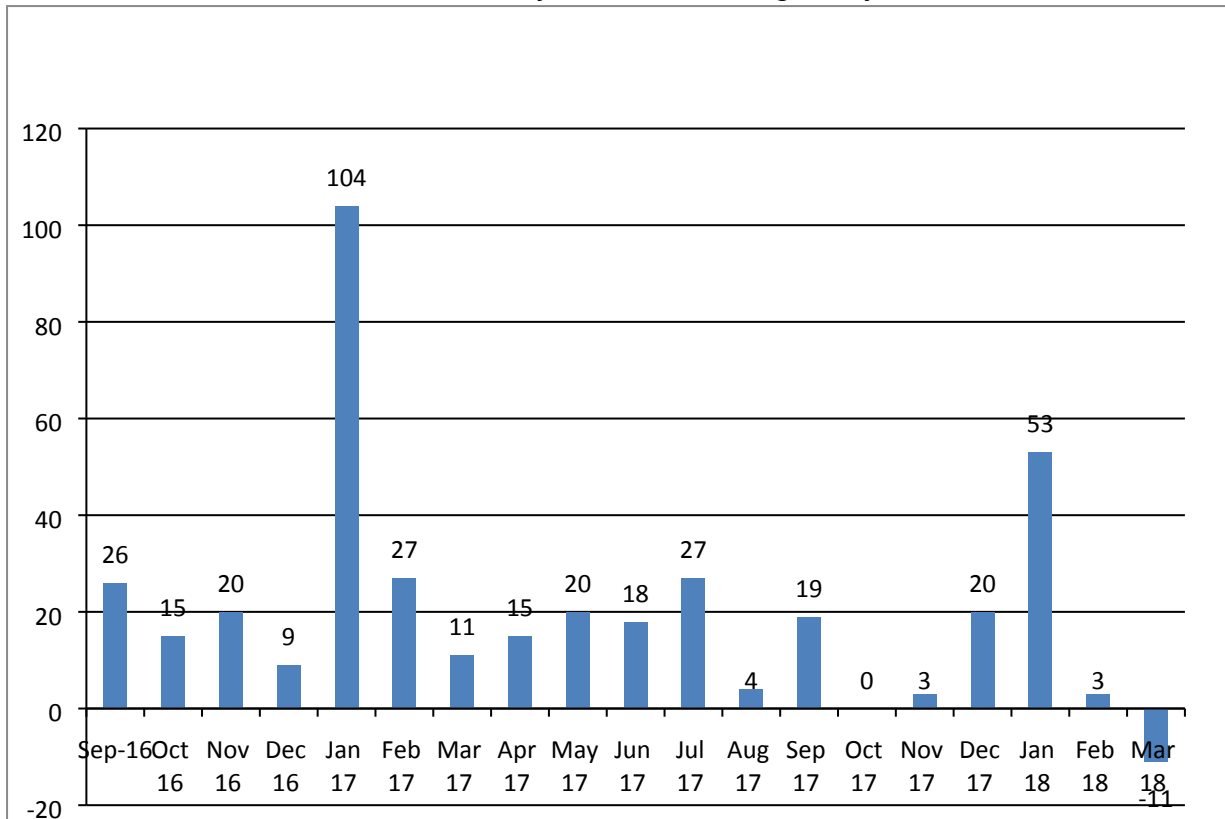


Table 3

Net increases of 18plus Care Leaving Service users per month (Expected)
based on those already LAC and turning 18 by month



7.4 The increase with UASC has required resources to be increased, and this has been at a pace given the numbers of young people arriving. The service continues to absorb the impact of the numbers of UASC turning 18 and plan service delivery in light of the pressures for services. This is a significant challenge given the accompanying issues for UASC including the PREVENT agenda, management of missing young people; Home Office liaison for immigration, benefit and legislative issues. Ensuring appropriate accommodation and educational provision have also been a focus, given the increasing numbers and these resources being placed under significant pressure.

8. Work Loads for Social Workers and Cases held by Team Managers

8.1 Total workload capacity on current staffing

- 8 senior Personal Advisers @ 15 cases =120
- 32 Personal Advisers @ 30 cases = 960
 - **Total workload capacity = 1,080**
- 2 Social Workers = 1 x ARE (Human Rights Assessments and Age Assessments)
- 1 x case holding up to 18 cases =18
- 1x Senior Practitioner case holding x 12 cases
- Total held by qualified staff = 54 cases complex, high risk
- 3 Team Managers = holding missing Young People as at September 2016 = 77 cases

9. Missing Young People

Table 4

Future Care Leavers (known LAC) who are turning 18 by month who were recorded as missing at time of extract

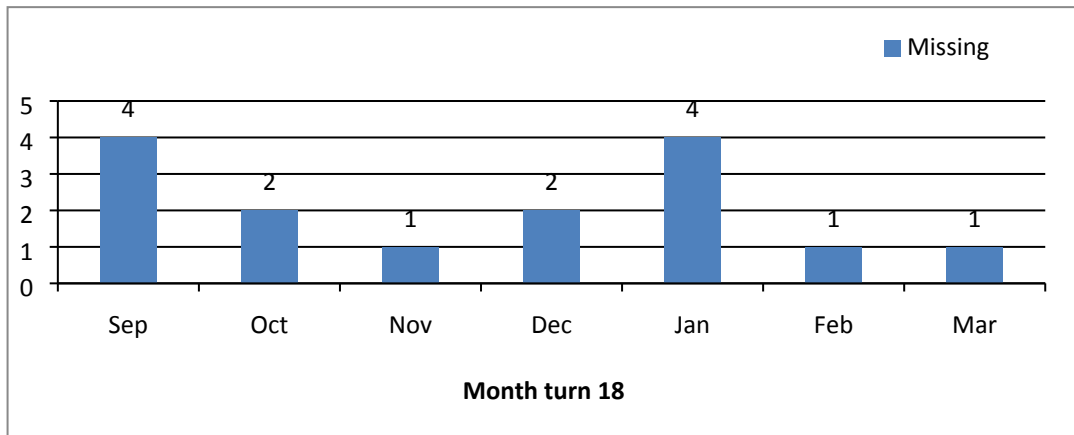


Table 5

Current Care Leavers who are missing – as at end of August 2016

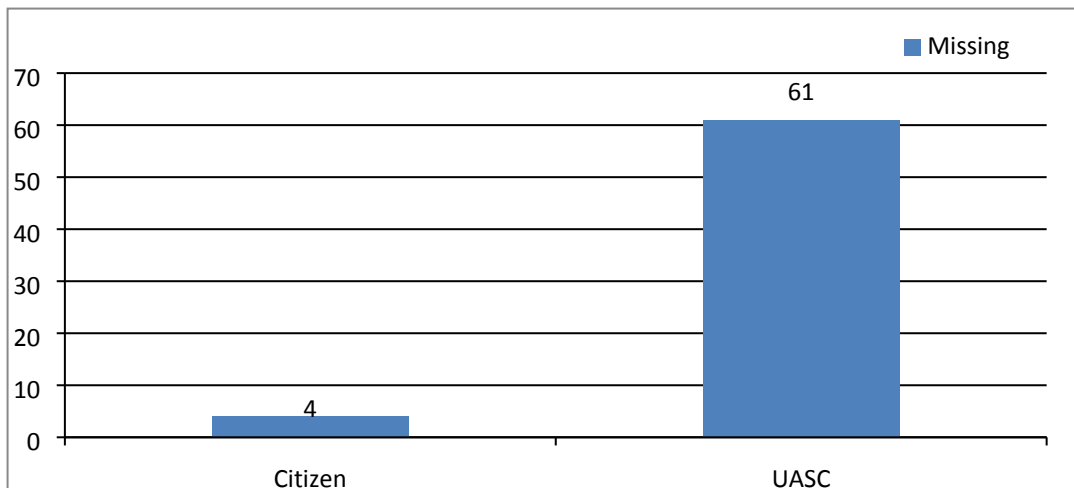


Table 6
Length of time UASC have been missing

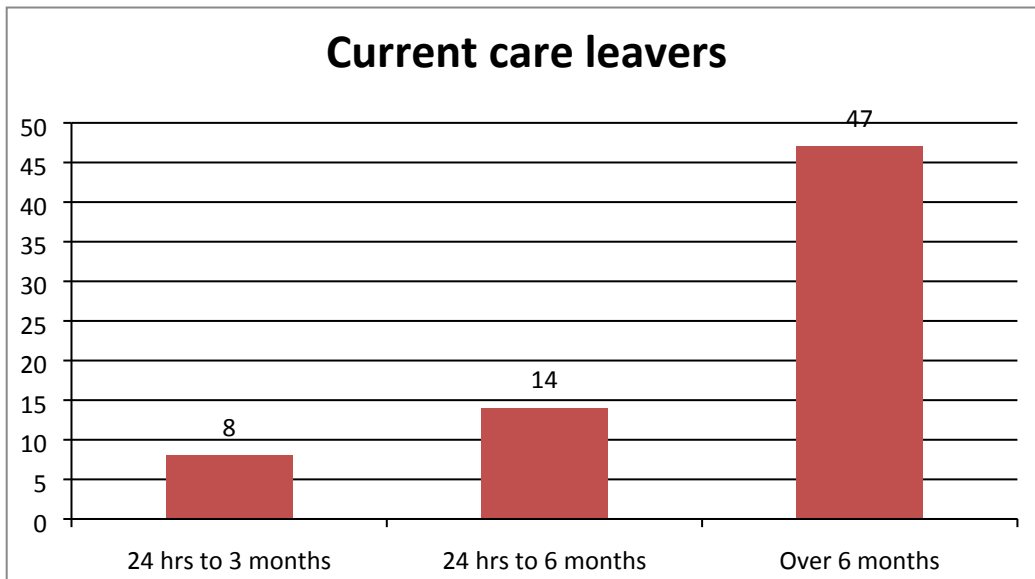


Table 7
Net increases of 18plus Care Leaving Service users during 2017-18

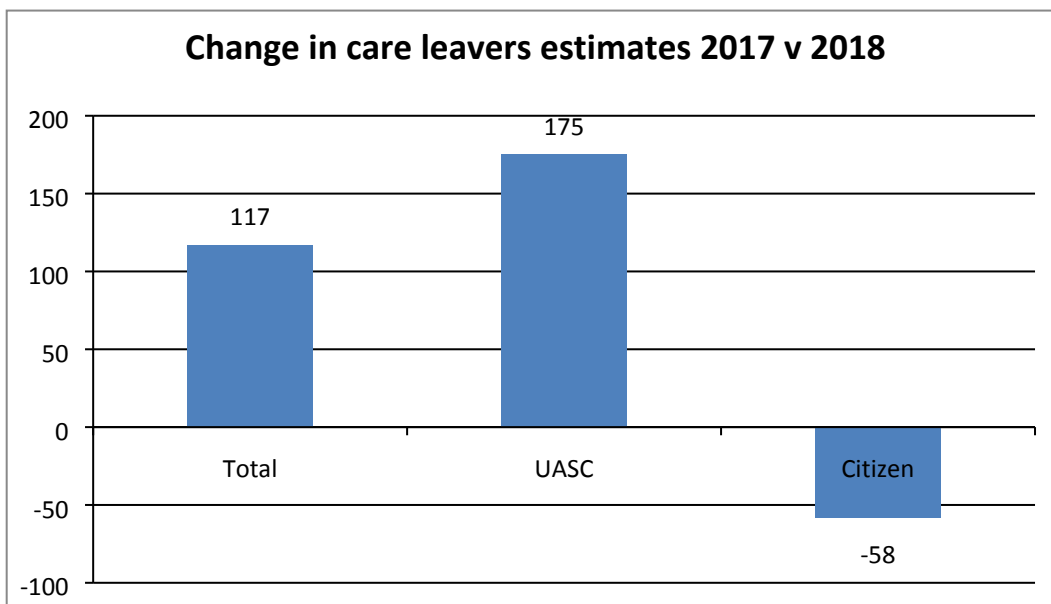
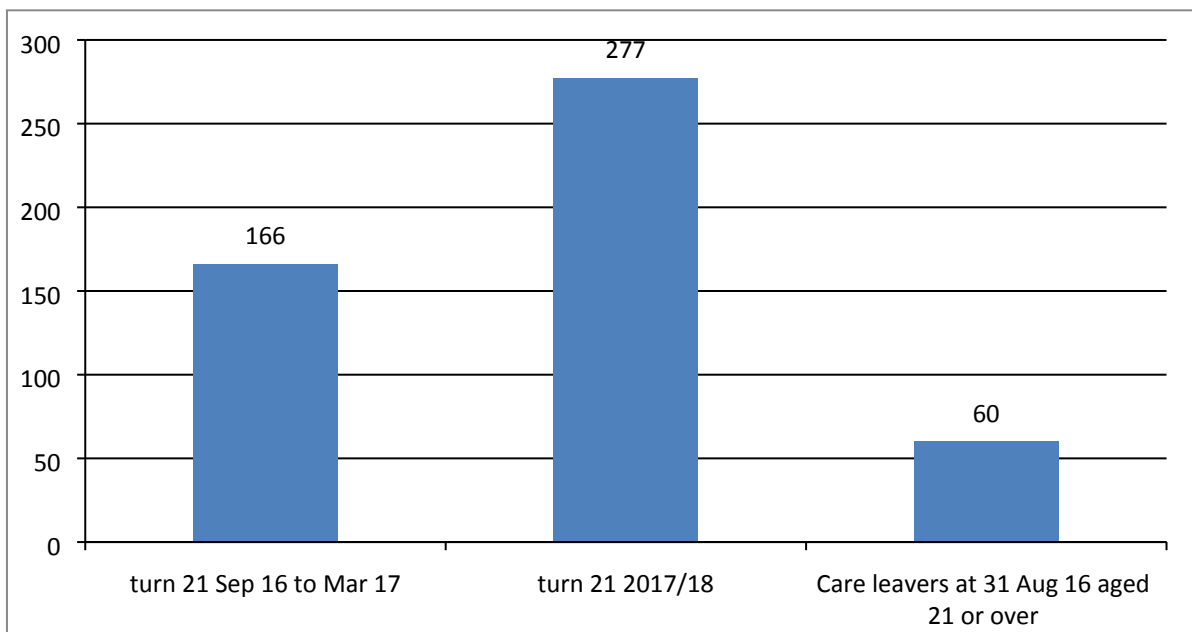


Table 8

Those turning 21 and may close by March 2018. Included is a count of those aged 21 or over and still open to Care Leaving Service



10. Proposed Structure

- 10.1 The remit of the care leaving teams is for 18plus and the UASC as they move into the care leaving service should reflect this change in status with the term Asylum Care Leavers being applied.
- 10.2 The proposed structure has to take into account qualified social workers are needed to complete cases in relation to All Rights Exhausted; Human Rights Appeals; Age Assessments and liaison with the Home Office regarding delay in progressing applications for immigration status. Social work qualified staff are also required to work with young people where there is high risk including risk of drugs overdose, adults subject to adult sexual exploitation and serious mental health issues.
- 10.3 Current workload excluding missing young people (as at September 2016, Appendix 1):- $1123-77= 1046$. Missing young people are not currently allocated cases and are managed by the Team Managers.
- 10.4 The proposed new structure sets out two service delivery points one for Asylum Care Leavers (ACL) and one for Citizen young people. This will allow for the flexibility that is required for increasing the number of staff with the increase in the care leavers. The same increases are not expected for citizen. The principle on which citizen teams have been based is similar to the other service teams in Kent with Team Managers having oversight of no more than 150 cases. The number of cases is more than 150 for the ACL Team as there are also social work posts within the service and therefore increased qualified social work oversight in the leaving care service. The personal advisors are not social work qualified and the

oversight and intervention of Team Manager who is social work qualified is essential (outlined in case law).

10.5 New Structure Proposal

1 x Head of Service for Care Leavers 18plus (KR14)

1x Business Manager Care Leavers 18plus

Asylum Care Leavers

1x Service Manager UASC (KR13) (proposal to rename UASC as Asylum Care Leavers (ACL) to reflect transition arrangements)

Asylum Care Leaving Team

1x Team Manager

1x Senior Personal Adviser

5x Personal Advisers x 25 cases

1 Social Worker x 18 cases

Total Cases in Team = 168

Administrative staff x1 per team

➤ Caseload for ACL as at 31st March 2017 = 696 cases

This equates to 4.2 Teams

➤ 1x Team Manager Accommodation Service primarily this service manages Asylum accommodation.

➤ March 2018 the ACL caseload will increase to 871 cases

This equates to 5.2 teams.

Citizen Teams Proposed Structure

1x Team Manager

1x Senior Personal Adviser = 25 cases

5x Personal Advisers = 25 cases

Total cases per team = 150 cases

Administrative Staff x1 Per Team

➤ Caseload for Citizen as at 31st March 2017 is 621

This equates to 4.1 Teams

➤ 31st March 2018 the citizen workload is 563

This equates to 3.8 Teams

Overview of Service Requirements

➤ The total number of Teams for a total workload of 1,317 as at 31 March 2017 = 8.3 Teams (Appendix 1).

➤ The total number of Teams for a total workload of 1,434 as at March 2018 = 9 Teams (Appendix 2).

11. Equality Implications

There are no equality implications associated with this report, but if any equality implications are identified as work on the development of the Service progresses, an Equality Impact Assessment will be completed.

12. Conclusion

- 12.1 This paper sets out the proposal for the restructuring of the Care Leaving Service to provide 18plus care leavers with increased resource to manage and support the transfer of UASC into ACL.
- 12.2 The proposed restructure is necessary for the Service to meet its statutory requirements. Additional future requirements in respect of citizen Care Leavers will be met through Demography Monies in the 2017/18 budget build.

13. Recommendation

13.1 Recommendation: The Children's Social Care and Health Cabinet Committee is asked to **NOTE** the proposed structure of the 18plus Care Leaving Service to meet the increasing demand of Unaccompanied Asylum Seeking Children transitioning into the Service.

14. Background Documents

None

15. Contact Details

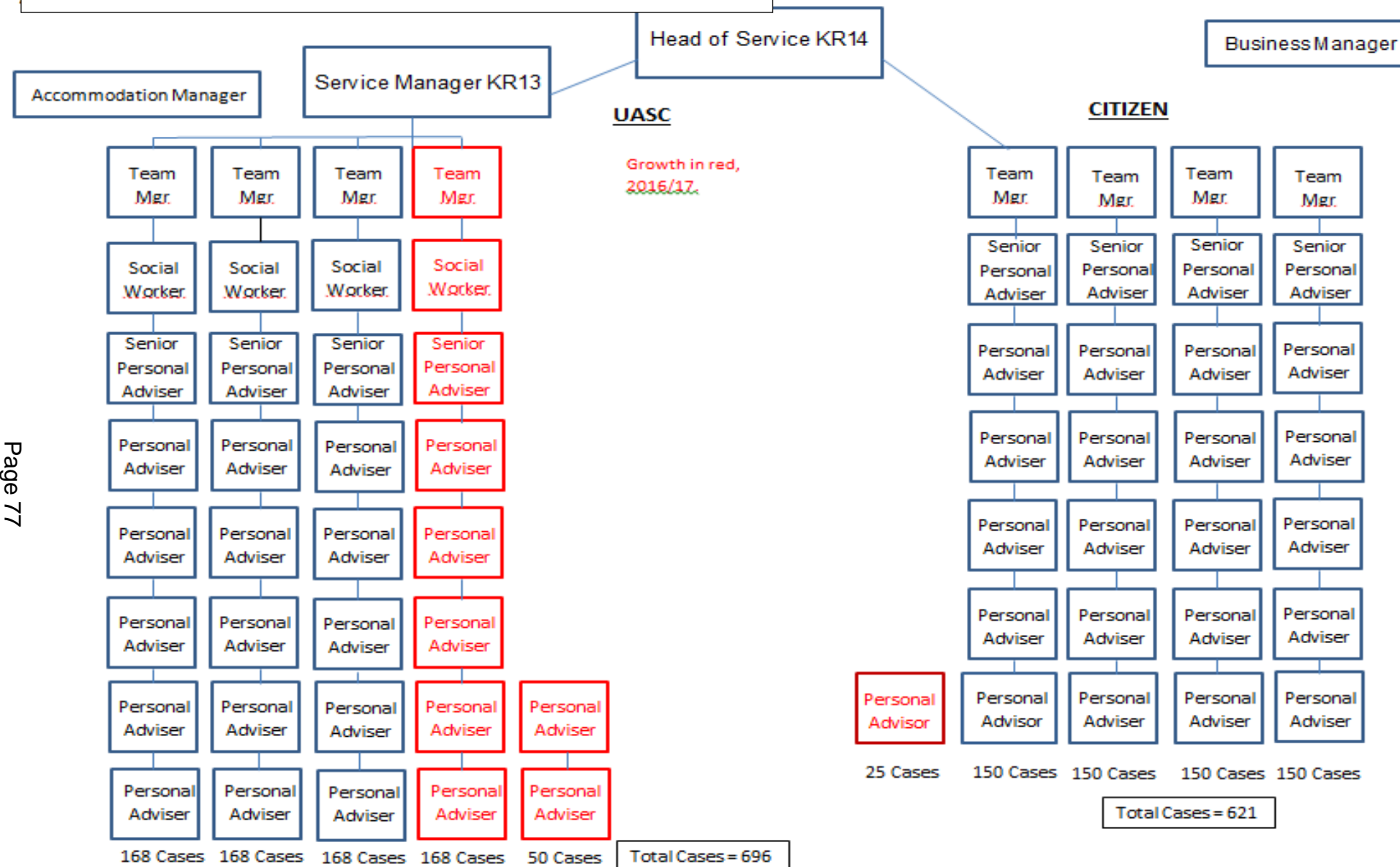
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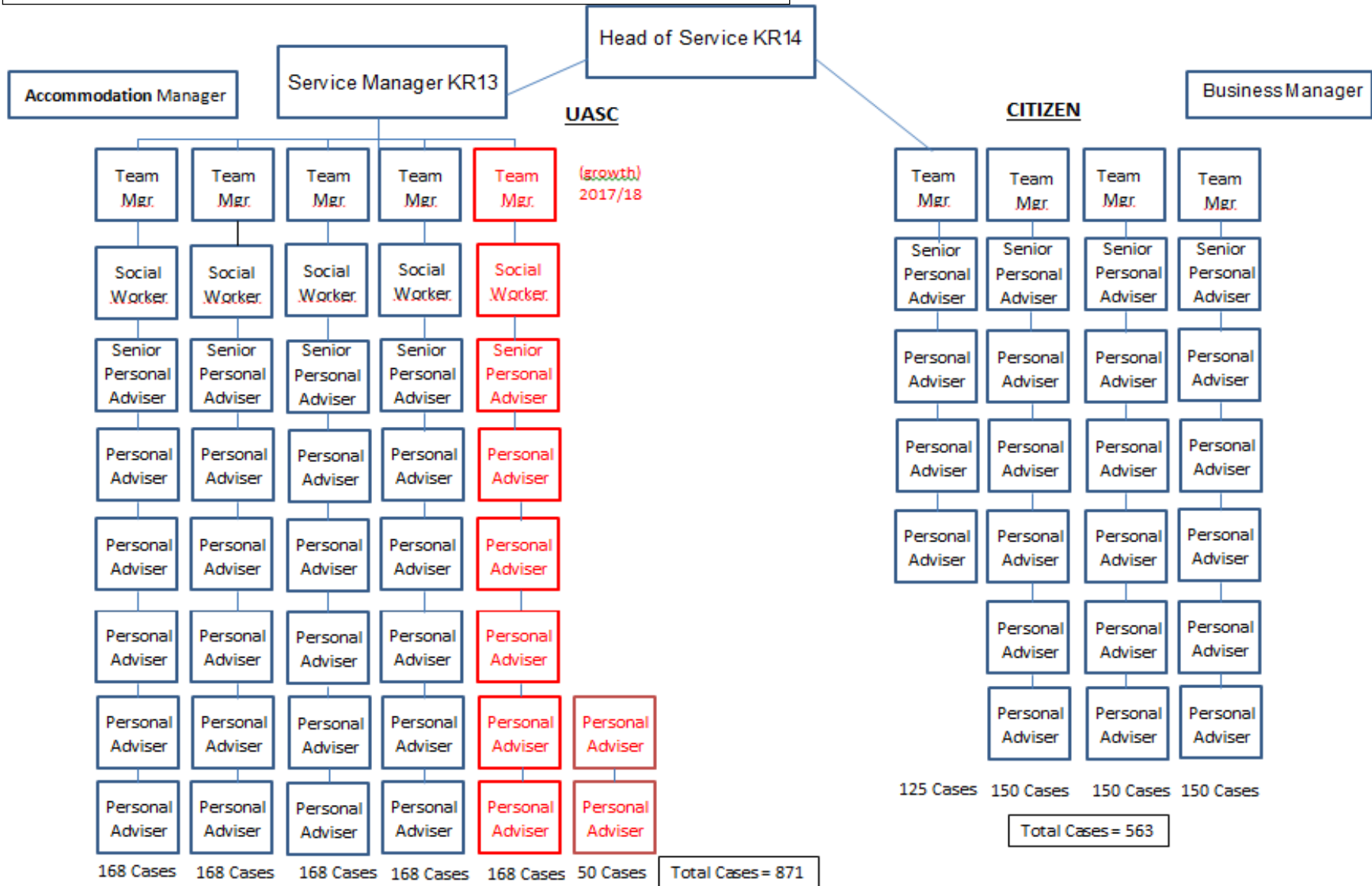
Lead Director

Philip Segurola
Director, Specialist Children's Services
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Philip.segurola@kent.gov.uk

Appendix 1 Total No. of Teams for Total Workload of 1,317 as at 31.03.17 = 8.3 teams



Appendix 2 – Total No. of Teams for Total Workload of 1,434 as at 31.03.18 = 9 teams



From: Peter Oakford, Cabinet Member for Specialist Children's Services Specialist Children's Services
John Simmonds, Cabinet Member for Finance and Procurement and Deputy Leader

To: Children's Social Care and Health Cabinet Committee – 16 January 2017

Subject: Draft 2017-18 Budget and Medium Term Financial Plan

Classification: Unrestricted

Electoral Division: All

Summary: County Council debated the authority's Autumn Budget Statement on 20 October. The Autumn Budget Statement report set out an update to the Medium Term Financial Plan (MTFP) for 2017-18 and 2018-19 including progress on proposals to close the unidentified budget gap in the original plan. County Council reaffirmed the role of Cabinet Committees in scrutinising the budget. This report is designed to accompany the final draft 2017-18 Budget and 2017-20 MTFP published on 12 January. The report is exempt until these drafts are published. The report provides further detail on the key assumptions which underpin the budget proposals and savings relevant to the remit of the Children's Social Care and Health Cabinet Committee. The report also includes information from KCC's budget consultation, the Chancellor's Autumn Budget Statement and provisional local government finance settlement.

Recommendation(s)

The Children's Social Care and Health Cabinet Committee is asked to **NOTE** the draft budget and MTFP (including responses to consultation and Government announcements).

The Children's Social Care and Health Cabinet Committee is **INVITED TO MAKE SUGGESTIONS** to the Cabinet Member for Finance and Procurement and Cabinet Member for Specialist Children's Services on any other issues which should be reflected in the draft budget and MTFP prior to Cabinet on 23 January and County Council on 9 February 2017

1. Introduction

1.1 The MTFP sets out the overall national and local fiscal context, KCC's revenue and capital budget strategies, and KCC's treasury management and risk strategies. It also includes a number of appendices which set out the high level 3 year revenue budget plan, a more detailed one year plan by directorate, prudential and fiscal indicators, and an assessment of KCC's reserves. The financial plans in the MTFP take into account all of the significant changes from the current year including additional spending demands, changes to funding, and the consequential savings needed to balance the budget to the available funding. This incremental approach to

budgeting and financial planning is adopted by the vast majority of local authorities.

- 1.2 Since 2014-15 the one-year detailed financial analysis in the MTFP has been produced in directorate format (previously this was produced in Cabinet portfolio format). This enables the MTFP to mirror the council's financial monitoring, reporting and management arrangements. The directorate format (and indeed the previous portfolio format) is not ideal to reflect Cabinet Committee remits as the two are not always aligned. It is not possible to re-present the budget to reflect Cabinet Committees remits in the time available. Consequently each committee will receive the relevant directorate MTFP plan and will need to ignore those aspects which are not relevant e.g. the Children's Social Care and Health Committee will receive the plans for the whole of the Social Care Health and Wellbeing Directorate and will need to ignore the Adults aspects. The draft 2017-18 MTFP for the Social Care, Health and Wellbeing Directorate is attached as appendix 1 to this report.
- 1.3 The draft directorate revenue budget is presented in the A to Z service format for Cabinet Committee scrutiny. We have used this format since 2011-12 which is designed to reflect the services we provide to Kent residents, businesses and local communities. We believe this is the most helpful format to present the budget proposals for scrutiny. The draft 2017-18 revenue budget for the Social Care, Health and Wellbeing Directorate is attached as appendix 2 to this report. The A to Z format is not designed to reflect how directorates are organised. Section 8 of the draft budget book presents the manager analysis setting out the overall amounts delegated to individual directors and heads of service within directorates. We do not believe it necessary or appropriate for Cabinet Committees to scrutinise these delegations.
- 1.4 The final draft budget presented to County Council on 9 February includes Section 6 which sets out all of the changes to each line of the A to Z budget. These detailed variation statements show how the MTFP translates into the spending proposals for individual service lines. This section takes a significant amount of resource to produce and there is not enough time available to produce these detailed statements for Cabinet Committees. We are continuing to develop systems which aim to enable these detailed variation statements to be produced at the same time the draft budget is launched (and thus be available for Cabinet Committee scrutiny) but at the moment these systems do not exist.
- 1.5 The draft capital programme is also presented in directorate format. The draft 2017-20 capital programme for the Social Care, Health and Wellbeing Directorate is attached as appendix 3 to this report.
- 1.6 All three financial appendices are exempt from publication until the council's final draft Budget and MTFP is published. These final draft plans will be considered at County Council on 9 February and will be published well in advance of the required timetable for County Council papers to enable members to have sufficient time to consider the proposals and any alternatives. We intend publish these papers before the Cabinet

Committees meetings so that the appendices are unrestricted by the time of the meeting.

2. Financial Context

- 2.1 The overall financial context remains largely unchanged from that reported to County Council on 20 October following the Chancellor's Autumn Statement on 23 November. The funding settlement from central government, including Revenue Support Grant (RSG), is anticipated to include the reductions outlined in the indicative settlement published last year.
- 2.2 Since the October report we have had provisional tax base calculations and collection fund balances which are higher than we had anticipated and help to resolve the unidentified savings. However, some of the spending demands are also greater arising from higher than the budgeted spend in 2016-17 (and need to be reflected in 2017-18 budget) and higher forecast future inflation/demand. Details of the assumptions underpinning spending demands are explored later in this report. Some savings options have also been revised since the October report.
- 2.3 The provisional Local Government Finance Settlement was announced on Thursday 15 December. The settlement sets out the provisional allocation of key government funding streams for 2017/18 and indicative allocations for 2018/19 and 2019/20. The settlement also includes the government's estimate of the change in local authority overall spending power taking into account both government funding and council tax.
- 2.4 Overall the context for local government spending over the medium term remains "flat-cash" between 2015/16 to 2019/20. This flat-cash includes council tax, additional social care funding and reductions in central government grants. Flat-cash means there is no overall additional funding for rising costs or demand pressures, therefore these have to be compensated by savings and spending reductions. Consequently, KCC's position remains that flat-cash for the local government sector is not good enough as this represents a significant reduction in real spending power.
- 2.5 The settlement offered additional funding for social care within the same overall flat-cash envelope with two key changes:

Greater flexibility in social care council tax precept – whilst this remains at 6% over the three years of the settlement (2017/18 to 2019/20), authorities have choice to raise up to 3% in any year (as long as overall the 6% limit over 3 years is not breached). This would enable council tax increases to be brought forward early although council tax charges in 2019/20 cannot be any greater than they would have been under the previous Spending Review (SR2015) announcement.

A new one-off Social Care Support Grant in 2017/18, funded out of New Homes Bonus (NHB) by bringing forward the proposed changes from 2018/19. In Kent this is at the expense of districts (which

collectively receive £6.2m less NHB than announced in SR2015) and KCC receives a net £4.6m more (allowing for both the new social care grant and our loss of NHB).

The final draft budget includes how KCC intends to respond to these two significant changes.

- 2.6 The table below sets out a high level summary of changes to the 2017-18 budget equation since the Autumn Budget Statement was published for County Council on 20 October.

	Autumn Budget Statement £m	Final Draft budget £m	Movement £m
Spending demands	57.2	66.3	9.1
Grant reductions	51.1	46.4	-4.6
Council Tax:			
– Increase in line with 2% referendum limit	-11.8	-11.9	-0.1
– Social Care Levy	-12.1	-12.2	-0.1
– Growth in taxbase & change in collection fund surplus	-0.9	-6.4	-5.4
Business Rates	-3.1	-3.2	-0.1
Savings	-80.4	-79.1	1.3

Note - this table, shows each element to nearest decimal place including totals, consequently the totals may not appear to add-up but are accurate

- 2.7 This equation of rising spending demands/costs compounded by reducing government funding, offset by council tax increases and the need for significant base budget savings continues the challenging theme of recent years. The 2017-18 Budget is likely to be the most difficult we have faced during the period of austerity since 2010.
- 2.8 The most significant movements between the Autumn Budget Statement and the Final Draft budget are explained in the table below:

Movement	Explanation
Spending Demands (increased by +£9.1m)	<p><u>Budget realignments:</u></p> <ul style="list-style-type: none"> • +£3.2m Children’s Social Care budget realignment to reflect 2016-17 activity • +£2.0m SEN transport budget realignment to reflect higher journey costs than budgeted in 2016-17 • +£0.8m Learning Disability & Mental Health budget realignment to reflect 2016-17 activity • +£0.6m Waste tonnage budget realignment <p><u>Pay:</u></p> <ul style="list-style-type: none"> • -£2.0m removal of estimated pressure to increase employer pension contribution rate, which is no longer needed following the actuarial revaluation of pension fund <p><u>Prices:</u></p>

	<ul style="list-style-type: none"> • +£6.8m New provision to increase prices for adult social care contracts to facilitate market sustainability as required under Care Act 2014 • +£1.3m updates to general price provisions reflect Q2 monitoring and latest CPI assumptions • -£1.5m reduction to estimated National Living Wage pressure following Chancellor's Autumn Budget Statement on 23 November <p><u>Demography</u></p> <ul style="list-style-type: none"> • -£1.5m reduction to estimated Older People & Physical Disability demography pressure
Grant reductions (improvement of £4.6m)	<ul style="list-style-type: none"> • +£6.2m Social Care Support Grant announced in provisional local government finance settlement on 15 December • -£1.5m reduction to provisional New Homes Bonus Grant announced in the local government finance settlement
Growth in taxbase & change in collection fund surplus (improvement of £5.4m)	<ul style="list-style-type: none"> • £3.1m growth in council tax base resulting from: increase in number of households; change in discounts; and reviews of local Council Tax Reduction Schemes • £2.3m increase in assumed 2016-17 council tax collection fund surplus
Savings and Income (reduction of £1.3m)	<ul style="list-style-type: none"> • A number of changes as presented in revised MTFP to take into account of latest proposals and phasing and the impact of changes to spending demands and funding outlined above

2.9 This equation of rising spending demands/costs compounded by reducing government funding, offset by council tax increases and the need for significant base budget savings continues the challenging theme of recent years. The 2017-18 Budget is likely to be the most difficult we have faced during the period of austerity since 2010.

3. Budget Consultation

3.1 The budget communication and consultation campaign was launched on 13 October to coincide with the publication of the County Council Autumn Budget Statement papers. The campaign was aimed at reaching a wide audience of Kent residents, businesses and other interested parties to better inform them of the budget challenge arising from a combination of additional spending demands (which are unfunded) and reductions in central government funding. As a result of the campaign we hoped that sufficient numbers would be inspired to engage with the consultation.

3.2 The campaign was primarily delivered through the council's website <http://www.kent.gov.uk/about-the-council/have-your-say/budget-201718>. This dedicated page provided a high level summary of the financial challenge with links to consultation questionnaire, budget modelling tool and more detailed supporting information. In total the site had 1,416 unique page views between 13 October and 27 November, 489 accessed from internal users and 927 external visits. The peak traffic for internal

users was immediately following the launch i.e. 13/14/17 October, which accounted for 302 of the 489 visits. The peak traffic for external users was Monday 14th November (125 of the 927 visits).

3.3 In total 512 responses were received either through the dedicated webpage or the general consultations page. A handful of written responses were also received. A summary of the responses is presented below. The questionnaire explored 4 key issues:

- Council tax increases in relation to the referendum requirement
- Council tax increases for social care precept
- KCC's overall budget strategy
- The level of awareness of the financial challenge

The questionnaire also allowed for any other comments.

3.4 Details of the consultation responses will be presented as part of Cabinet and County Council budget papers. For the sake of brevity we have published the report on all consultation activity as a background document to Cabinet Committee reports rather than including all the information in each committee report. This consultation can be accessed via the link at the end of this report.

4. Specific Issues for the Children's Social Care and Health Cabinet Committee

4.1 Appendices 1, 2 and 3 set out the main budget proposals relevant to the Social Care, Health and Wellbeing Directorate that will be included in the final draft MTFP, revenue budget and capital programme. These appendices are exempt until the final draft MTFP and budget book are published. These proposals must be considered in light of the general financial outlook for the County Council for 2017-18 which is for further reductions in overall funding even after planned council tax increases, and flat-cash over the medium term. This means we have no funding for additional spending demands and consequently will continue to need to make budget savings each and every year.

4.2 Savings from any new policy initiatives are shown in the exempt appendices and any significant issues will be raised during the Cabinet Committee meeting following publication of the final draft MTFP and Budget (scheduled for 12th January). Due to the exempt nature of the appendices these proposals cannot be covered in detail in the report.

5. Conclusions

5.1 The financial outlook for the next 3 years continues to look exceptionally challenging. Although the medium term outlook is flat cash i.e. we should have a similar spending in 2019-20 to 2015-16, there is a dip in 2017-18 which makes the forthcoming year the most difficult. Furthermore, the flat cash equation includes additional funding raised through Council Tax, the 2% precept for social care and the Better Care Fund. This additional income is required to fund rising spending demands (and may not be enough to fund all demands). This means the Council will still need to find substantial savings in order cover any shortfall against spending demands

and to compensate for the reductions in RSG (and any other changes in specific grants including those referred to in this report).

- 5.2 At this stage the forecasts for 2018-19 and 2019-20 are our best estimates. If these estimates prove to be accurate then the savings needed to balance the budgets in these years would be less than we have faced for a number of years. At this stage we have made no presumptions on the possible consequences of 100% business rate retention. We know that the extra business rates we will be able to retain will come with additional responsibilities although we have no indication what these might be and whether there will be enough money to cover the cost. We also know the government is reconsidering the calculation of the existing baseline which determines the top-up we receive (and the tariffs other authorities pay). Once again at this stage we have made no presumption about the outcome of this review until we know more.
- 5.3 Appendices 1 and 2 include the latest estimates for unavoidable and other spending demands for 2017/18 and future years. These estimates are based on the latest budget monitoring and activity levels as reported to Cabinet in November (quarter 2). Committees no longer receive individual in-year monitoring reports and therefore members may wish to review the relevant appendices of the Cabinet report before the meeting.

6. Recommendation(s)

- 6.1 The Children's Social Care and Health Cabinet Committee is asked to **NOTE** the draft budget and MTFP (including responses to consultation and Government announcements).
- 6.2 The Children's Social Care and Health Cabinet Committee is **INVITED TO MAKE SUGGESTIONS** to the Cabinet Member for Finance and Procurement and Cabinet Member for Specialist Children's Services on any other issues which should be reflected in the draft budget and MTFP prior to Cabinet on 23 January and County Council on 9 February 2017

7. Background Documents

- 7.1 Consultation materials published on KCC website and the outcome report.

Budget Consultation Materials - <http://www.kent.gov.uk/about-the-council/finance-and-budget/budget-201718>

Budget Consultation Outcome - <http://consultations.kent.gov.uk/consult.ti/BudgetConsultation2017/consultationHome> (exempt until 12 January 2017)

- 7.2 The Chancellor of the Exchequer's Spending Review and Autumn Statement on 23rd November 2016 and OBR report on the financial and economic climate.

Autumn Budget Statement - <https://www.gov.uk/government/publications/autumn-statement-2016-documents>

OBR Forecasts <http://budgetresponsibility.org.uk/efo/economic-and-fiscal-outlook-november-2016/>

7.3 The provisional Local Government Finance Settlement 2017-18 announced on 15 December 2016.

<https://www.gov.uk/government/collections/provisional-local-government-finance-settlement-england-2017-to-2018>

8. Contact details

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Appendix 1- SCHW Cabinet Committees, MTFP Sections

Embargoed Draft

Heading	Description	Older People & Physical Disability £000s	Learning Disability & Mental Health £000s	Disabled Children's Services £000s	Specialist Children's Services £000s	Commissioning £000s	Public Health £000s	Corporate Director SCH&W £000s	Total SCH&W Directorate £000s
2016-17 Base	Approved budget by County Council on 11th February 2016	144,321.8	178,233.6	19,725.9	106,030.1	28,360.2		14,405.9	491,077.5
Base Adjustments (internal)	Changes to budgets which have nil overall affect on net budget requirement	-539.2	4,887.9	-193.3	386.7	12,463.8	0.0	-10,297.8	6,708.1
Revised 2016-17 Base		143,782.6	183,121.5	19,532.6	106,416.8	40,824.0	0.0	4,108.1	497,785.6
Additional Spending Pressures									
Net Budget Realignment	<i>Necessary adjustments to reflect current and forecast activity levels from in-year monitoring reports</i>								
Adult Social Care	Realignment of budget following changes in activity at the time of budget build.		753.0						753.0
Children's Social Care	Realignment of budget following changes in activity at the time of budget build.				3,152.2				3,152.2
Replace use of one-offs	Impact of not being able to repeat one-off use of reserves and underspends in approved base budget for 2015-16		380.0		500.0	1,383.0			2,263.0
Pay and Prices									
Inflation									
Adult Social Care	Implementing the national living wage strategy, recognising an impact of the national minimum wage increases and honouring contractual agreements for eligible adult social care contracts and services through a formulaic and targeted approach. Separate provision for providers claiming financial viability issues for price negotiations to be agreed by the Corporate Director in accordance with KCC virement procedures.							7,267.3	7,267.3
SCHW Sustainability Provision	Provision to enable the Corporate Director for Social Care to comply with requirement under the Care Act to facilitate a diverse and sustainable market for high quality care and support in their area							6,800.0	6,800.0
Children's Social Care	Provision for price negotiations with external providers and uplift to in-house foster carers in line with DFE guidance			189.2	978.1				1,167.3
Demography									
Older People	Additional spending associated with increasing population and demographic make-up of the population Growth in client numbers and additional costs resulting from existing and new clients whose needs are becoming more complex	3,400.0							3,400.0
Adults with a Learning Disability	Growth in client numbers and additional costs resulting from existing and new clients whose needs are becoming more complex		6,400.0						6,400.0
Mental Health	Growth in client numbers and additional costs resulting from existing and new clients whose needs are becoming more complex		700.0						700.0
Children's Social Care	Estimated impact of an increase in the population of children in Kent, leading to increased demand for specialist children's services			160.0	2,900.0				3,060.0

Appendix 1- SCHW Cabinet Committees, MTFP Sections

Embargoed Draft

Heading	Description	Older People & Physical Disability £000s	Learning Disability & Mental Health £000s	Disabled Children's Services £000s	Specialist Children's Services £000s	Commissionin g £000s	Public Health £000s	Corporate Director SCH&W £000s	Total SCH&W Directorate £000s
Government & Legislative									
Deprivation of Liberty Safeguards	Additional DOLS assessments following the Cheshire Judgement 2014, previously funded from initial grant					562.2			562.2
Service Strategies & Improvements									
Sustainable Transformation Plan	KCC's contribution towards the project management costs of the Health Sustainable Transformation Plan							300.0	300.0
	Total Additional Spending Demands	3,400.0	8,233.0	349.2	7,530.3	1,945.2		14,367.3	35,825.0

Appendix 1- SCHW Cabinet Committees, MTFP Sections

Embargoed Draft

Heading	Description	Older People & Physical Disability £000s	Learning Disability & Mental Health £000s	Disabled Children's Services £000s	Specialist Children's Services £000s	Commissioning £000s	Public Health £000s	Corporate Director SCH&W £000s	Total SCH&W Directorate £000s
Savings and Income									
Transformation Savings									
Adults Older People / Physical Disability - Phase 2	Continued roll out of Phase 2 transformation including initiatives aimed at promoting better integration with health services and a better range of support services for clients leaving hospital back to home	-3,626.5							-3,626.5
Adults Older People / Physical Disability - Phase 3	Initial estimate of potential savings which could be achieved through Phase 3 of social care transformation	-1,000.0						-1,700.0	-2,700.0
Adults with a Learning Disability - Phase 2	Continued rollout of Phase 2 transformation including initiatives aimed at reducing dependence on care services for vulnerable adults		-1,179.9						-1,179.9
Adults with a Learning Disability - Phase 3	Initial estimate of potential savings which could be achieved through Phase 3 of social care transformation		-2,500.0						-2,500.0
Adults with a Learning Disability - HRS	Estimated savings to be achieved from commissioning of new combined service incorporating previous separate services of Supporting Independence Service and Housing Related Support Service to be more outcome focussed and promote independent living					-400.0			-400.0
Income									
Client Charges	Uplift in social care client contributions in line with benefit uplifts for 2017-18, parental contribution for children placed in care, and inflationary increases for other activity led services including young person's travel pass, libraries, and registration	-2,026.7	-143.7		-100.0				-2,270.4
Social Care	Improved negotiations with Health partners in relation to continuing health care eligibility	-75.0	-75.0	-25.0	-25.0				-200.0

Appendix 1- SCHW Cabinet Committees, MTFP Sections

Embargoed Draft

Heading	Description	Older People & Physical Disability £000s	Learning Disability & Mental Health £000s	Disabled Children's Services £000s	Specialist Children's Services £000s	Commissioning £000s	Public Health £000s	Corporate Director SCH&W £000s	Total SCH&W Directorate £000s
Efficiency Savings									
Staffing									
Staffing Restructures	Service re-design, integration of services and more efficient ways of working resulting in a reduction of staff costs. The delivery of these savings will be with appropriate stakeholder engagement and detailed consultations		-125.0		-802.0	-659.3			-1,586.3
Contracts & Procurement									
Learning Disability Supported Living	Contract re-negotiations with supported living providers		-600.0						-600.0
Domiciliary Care	Ensuring that contracted providers can deliver volume and therefore avoiding more expensive spot market contracts	-500.0							-500.0
Fostering	New placements with Independent Fostering Agencies anticipated to be at lower cost due to increased placement availability			-17.7	-116.3				-134.0
Older People	Cessation of funding for Health "step down" beds	-570.0							-570.0
Adults with a Learning Disability	Full year effect of savings achieved in 2016-17		-380.0						-380.0
Kent Support and Assistance Service	Review of the KSAS service, ensuring that expected service critical costs that will still be required to support social care users are retained					-840.5			-840.5
Adults Mental Health	Estimated savings to be achieved from commissioning of new combined service incorporating previous separate services of Supporting Independence Service and Housing Related Support Service to be more outcome focussed and promote independent living					-250.0			-250.0
Substance Misuse	Improved commissioning of substance misuse service alongside Public Health activity					-200.0			-200.0
Homelessness	Joint working with partner organisations to introduce a new homelessness strategy focussed on prevention and better outcomes that ensures support is provided to vulnerable homeless people in Kent					-300.0			-300.0
Integrated Commissioning	Increased efficiencies through integrated commissioning and working with the NHS	-1,500.0	-500.0						-2,000.0
Other									
Operational Support Unit	Efficiencies across operational support unit		-125.0						-125.0
Adult Social Care	Review calculation of bad debt provision in relation to client income for social care debt	-1,454.0	-46.0						-1,500.0
Discretionary Spend	Pro-rata cut to discretionary spend							-214.0	-214.0

Appendix 1- SCHW Cabinet Committees, MTFP Sections

Embargoed Draft

Heading	Description	Older People & Physical Disability £000s	Learning Disability & Mental Health £000s	Disabled Children's Services £000s	Specialist Children's Services £000s	Commissioning £000s	Public Health £000s	Corporate Director SCH&W £000s	Total SCH&W Directorate £000s
Financing Savings									
Policy Savings									
Soft Landscaping	Review of contracts								
Children's Social Care	Review means testing for financial support to new Adopters and Special Guardians				-100.0				-100.0
Care Leavers & Supported Accommodation	More efficient commissioning of supported accommodation for young people aged 16+				-300.0				-300.0
Adults with a Learning Disability	Implementation of accommodation model for the short breaks service		-145.0						-145.0
Older People / Physical Disability	Review In-House services	-380.0							-380.0
Your Life Your Home - Mental Health	Review of people in Mental Health residential placements with a view to provide a service in an alternative setting		-700.0						-700.0
Older People / Physical Disability Charging	Change to charging policies	-302.0							-302.0
Accommodation for Offenders	Reviewing with partners specialist accommodation with an expectation that suitable alternative accommodation will be jointly commissioned					-350.0			-350.0
Older People / Physical Disability Residential Homes	Full year effect of closure of in-house residential homes	-608.9							-608.9
Other	Other minor policy savings				-120.0				-120.0
Total Savings and Income		-12,043.1	-6,519.6	-42.7	-1,563.3	-2,999.8		-1,914.0	-25,082.5
Public Health & other grants									
Public Health - Grant Reduction	Estimated reduction in Public Health Grant						1,753.0		1,753.0
Public Health - Service Reduction	Public Health Service Reductions						-1,753.0		-1,753.0
Proposed Budget		135,139.5	184,834.9	19,839.1	112,383.8	39,769.4	0.0	16,561.4	508,528.1

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Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
		Adults and Older People								
		<i>Direct Payments</i>								
1	18,499.3	Learning Disability (aged 18+)	0.0	19,874.9	19,874.9	0.0	-39.5	-875.5	18,959.9	Approximately 1,200 clients are expected to be receiving an on-going direct payment. These people have been assessed as being eligible for social care support, but have chosen to arrange and pay for their own care and support services instead of receiving them directly from the local authority. There will also be a number of one-off direct payments made during the year for such things as items of equipment and respite care.
2	963.5	Mental Health (aged 18+)	0.0	1,067.3	1,067.3	0.0	-84.3	0.0	983.0	Approximately 200 clients are expected to be receiving an on-going direct payment; there will also be a number of one-off direct payments made during the year.
3	9,650.2	Older People (aged 65+)	0.0	11,313.0	11,313.0	0.0	-2,658.6	-186.5	8,467.9	Around 1,100 clients will be receiving an on-going direct payment; there will also be a number of one-off direct payments made during the year.
4	11,725.0	Physical Disability (aged 18-64)	0.0	12,159.8	12,159.8	0.0	0.0	-982.2	11,177.6	Around 1,100 clients are expected to be receiving an on-going direct payment; there will also be a number of one-off direct payments made during the year.
		<i>Domiciliary Care</i>								
5	741.5	Learning Disability (aged 18+)	0.0	838.7	838.7	0.0	0.0	-14.0	824.7	Domiciliary care provided by the independent sector supporting approximately 100 people to live at home.
6	2,425.8	Older People (aged 65+) - In house service (Kent Enablement at Home service)	8,152.5	-5.3	8,147.2	-51.0	-5,670.4	0.0	2,425.8	Domiciliary care provided by the in-house Kent Enablement at Home Service (KEaH) which provides intensive short term support/enablement to people to allow them to regain or extend their independent living skills.
7	22,104.5	Older People (aged 65+) - Commissioned service	0.0	32,061.6	32,061.6	0.0	-5,767.0	-71.0	26,223.6	Domiciliary care provided by the independent sector to support approximately 3,600 people to live at home. In addition, this budget includes a number of small contracts for services primarily with Health, including the night sitting service, recuperative care and rapid response.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
8	579.4	Physical Disability (aged 18-64) - In house service	0.0	579.4	579.4	0.0	0.0	0.0	579.4	Domiciliary care provided by the in-house Kent Enablement at Home Service (KEaH) which provides intensive short term support/enablement to people to allow them to regain or extend their independent living skills.
9	5,055.0	Physical Disability (aged 18-64) - Commissioned service	0.0	4,939.0	4,939.0	0.0	0.0	-28.4	4,910.6	Domiciliary care provided by the independent sector supporting approximately 650 people to live at home.
Non Residential Charging Income										
10	-4,554.4	Learning Disability (aged 18+)	0.0	0.0	0.0	0.0	-5,127.0	0.0	-5,127.0	Assessed client contributions for people receiving community based services including domiciliary care, supported accommodation, day care and direct payments.
11	-9,153.5	Older People (aged 65+)	0.0	0.0	0.0	0.0	-10,789.5	0.0	-10,789.5	Assessed client contributions for people receiving community based services including domiciliary care, supported accommodation, day care and direct payments.
12	-1,457.8	Physical Disability (aged 18-64)	0.0	0.0	0.0	0.0	-1,465.9	0.0	-1,465.9	Assessed client contributions for people receiving community based services including domiciliary care, supported accommodation, day care and direct payments.
13	-145.0	Mental Health (aged 18+)	0.0	0.0	0.0	0.0	-163.6	0.0	-163.6	Assessed client contributions for people receiving community based services including domiciliary care, supported accommodation, day care and direct payments.
Nursing and Residential Care										
14	68,136.7	Learning Disability (aged 18+)	0.0	72,771.9	72,771.9	0.0	-5,907.2	0.0	66,864.7	Around 1,000 clients are provided with services through the independent sector. This service also provides permanent residential care for preserved rights clients through the independent sector. This does not include respite services which are included within the Support to Carers budget below.
15	9,509.4	Mental Health (aged 18+)	0.0	10,569.3	10,569.3	0.0	-872.4	0.0	9,696.9	Around 300 clients are provided with services through the independent sector. This service also provides permanent residential care for preserved rights clients through the independent sector. This does not include respite services which are included within the Support to Carers budget below.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
16	17,181.7	Older People (aged 65+) - Nursing	0.0	32,782.7	32,782.7	0.0	-17,398.1	0.0	15,384.6	Around 1,150 clients are provided with this service through the independent sector. This does not include respite services which are included within the Support to Carers budget below.
17	14,367.9	Older People (aged 65+) - Residential - In house service	8,859.9	11,017.4	19,877.3	0.0	-3,988.6	-1,922.2	13,966.5	KCC residential services predominately providing long term and recuperative services through 230 residential care/respite beds and 85 nursing care beds.
18	22,863.3	Older People (aged 65+) - Residential - Commissioned Service	0.0	58,381.3	58,381.3	0.0	-35,178.1	0.0	23,203.2	Approximately 2,400 permanent clients on average provided with services through the independent sector as well as recuperative and other short term placements. This service also provides permanent residential care for preserved rights clients provided through the independent sector. This does not include respite services which are included within the Support to Carers budget below.
19	11,770.9	Physical Disability (aged 18-64)	0.0	13,899.7	13,899.7	0.0	-1,717.5	0.0	12,182.2	Approximately 300 clients are provided with this service through the independent sector.
		Supported Living								
20	2,289.4	Learning Disability (aged 18+) - In house service	2,310.6	1,026.2	3,336.8	0.0	-134.5	-912.9	2,289.4	This service provides support to clients through the independent living scheme and Kent Pathway Service (Learning Disability enablement service). The costs associated with the Better Homes Actives Lives PFI project are also included here.
21	4,318.1	Learning Disability (aged 18+) - Shared Lives Scheme	324.6	4,412.9	4,737.5	0.0	0.0	0.0	4,737.5	The Shared Lives scheme places approximately 150 people with non-related Adult Carers.
22	40,903.5	Learning Disability (aged 18+) - Other Commissioned Supported Living arrangements	0.0	48,063.1	48,063.1	0.0	-118.5	-94.0	47,850.6	Services provided through the independent sector for approximately 1,550 people in supported living.
23	2,403.3	Mental Health (aged 18+) - Commissioned service	0.0	2,835.3	2,835.3	0.0	-124.5	-13.9	2,696.9	Approximately 380 clients provided with supported living / supported accommodation services through the independent sector.
24	0.0	Mental Health (aged 18+) - In house service	0.0	256.0	256.0	0.0	0.0	-256.0	0.0	Costs associated with the Better Homes Actives Lives PFI project.
25	31.5	Older People (aged 65+) - In house service	0.0	8,344.3	8,344.3	0.0	0.0	-8,312.8	31.5	Costs associated with the Better Homes Actives Lives PFI project.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
26	408.9	Older People (aged 65+) - Commissioned service	0.0	419.2	419.2	0.0	0.0	0.0	419.2	Approximately 100 clients provided with supported living / supported accommodation services through the independent sector.
27	3,313.8	Physical Disability (aged 18-64) - Commissioned service	0.0	3,592.6	3,592.6	0.0	0.0	-15.6	3,577.0	Approximately 310 clients provided with supported living / supported accommodation services through the independent sector.
Other Services for Adults and Older People										
28	5,139.2	Adaptive & Assistive Technology	423.4	9,705.6	10,129.0	0.0	-4,880.7	0.0	5,248.3	Occupational Therapy & Sensory Disability services working in partnership with Health, Hi Kent and Kent Association for the Blind to provide approximately 70,000 items of equipment. Collaborating with health on the delivery of Telehealth and Telecare services to enable Kent residents to remain living in their own homes by installing equipment in approximately 3,000 homes a year.
29	1,317.8	Community Support Services for Mental Health (aged 18+)	1,202.4	210.7	1,413.1	0.0	-57.2	0.0	1,355.9	Community outreach services provided by both KCC and independent sector supporting clients with mental health problems.
Day Care										
30	6,016.7	Learning Disability (aged 18+) - In house service	5,300.5	786.9	6,087.4	0.0	-70.7	0.0	6,016.7	Day care/day services provided by KCC.
31	8,217.7	Learning Disability (aged 18+) - Commissioned service	0.0	8,696.9	8,696.9	0.0	0.0	-18.5	8,678.4	Day care/day services provided by the independent sector.
32	781.6	Older People (aged 65+) - In house service	628.8	82.4	711.2	0.0	-23.3	0.0	687.9	Day care/day services provided by KCC.
33	884.5	Older People (aged 65+) - Commissioned service	0.0	1,066.4	1,066.4	0.0	0.0	0.0	1,066.4	Day care/day services provided by the independent sector.
34	974.2	Physical Disability (aged 18-64)	0.0	983.1	983.1	0.0	0.0	0.0	983.1	Day care/day services provided by the independent sector.
35	17,187.0	Housing Related Support for Vulnerable People (Supporting People)	332.5	17,312.4	17,644.9	-393.2	0.0	-181.7	17,070.0	Includes provision for vulnerable people to receive support to enable independent living in their own home through the provision of long and short term supported accommodation, a home improvement agency, community alarms and floating support.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
36	550.0	Legal Charges	0.0	550.0	550.0	0.0	0.0	0.0	550.0	Costs for in-house legal support and external legal fees for care proceedings for Adult social care.
37	2,184.4	Other Adult Services	0.0	2,127.0	2,127.0	0.0	-259.5	-148.6	1,718.9	A range of other services including: - approximately 33,000 home delivered hot meals, - providing one-off support to those who have no recourse to Public Funds. In addition there are a number of budgets/savings held here which are to be allocated during 2016-17 once plans have been finalised: - savings yet to be allocated to other social care services within the A-Z service analysis, - Provision to enable the Corporate Director for Social Care to comply with requirement under the Care Act to facilitate a vibrant, diverse and sustainable market for high quality care and support in their area, - Efficiencies through integrated commissioning and working with the NHS, - provision to fulfil responsibilities under the Care Act.
38	1,562.8	Safeguarding	1,381.5	937.7	2,319.2	0.0	-111.1	-126.4	2,081.7	A multi agency partnership/framework to ensure a coherent policy for the protection of vulnerable adults.
		Social Support								
39	3,292.7	Carers - In house service	2,165.0	366.0	2,531.0	0.0	0.0	0.0	2,531.0	KCC residential services predominately providing respite services to support carers.
40	6,658.6	Carers - Commissioned service	0.0	11,262.5	11,262.5	-57.5	-4,318.6	0.0	6,886.4	Services supporting carers, which are provided through the independent and voluntary sectors.
41	3,709.5	Information and Early Intervention	0.0	5,162.0	5,162.0	-552.8	-729.4	-246.9	3,632.9	Social support provided through the voluntary sector and the independent sector in terms of information, early intervention services, low level support and prevention services to try to enable clients to remain independent.
42	6,310.1	Social Isolation	0.0	9,340.4	9,340.4	-2,083.6	-901.9	0.0	6,354.9	Services providing support to prevent social isolation, provided through the independent sector and the voluntary sector, such as befriending services.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
43	1,487.4	Support & Assistance Service (Social Fund) including refugee families	252.4	1,644.5	1,896.9	0.0	0.0	-1,250.0	646.9	This service supports residents, with immediate need and who are in crisis, to live independently by signposting to alternative appropriate services and helping with the purchase of equipment and supplies to ensure the safety and comfort of the most vulnerable in our society. Includes support to refugee families under the Government's Syrian vulnerable persons relocation scheme.
Children's Services										
<i>Children in Care (Looked After)</i>										
44	1,290.0	Fostering - Disabled Children - In house service	0.0	1,334.4	1,334.4	0.0	0.0	0.0	1,334.4	Short and medium term family based care for about 40 Kent children (including longer term care for older children). This includes payments to connected persons (relatives and friends).
45	22,685.0	Fostering - Non-Disabled Children - In house service	1,757.6	21,087.4	22,845.0	-151.0	-100.0	0.0	22,594.0	Short and medium term family based care for 910 Kent children (including longer term care for older children). This includes payments to connected persons (relatives and friends). The County Fostering Team is also included here.
46	939.2	Fostering - Disabled Children - Commissioned from Independent Fostering Agencies	0.0	944.3	944.3	0.0	0.0	0.0	944.3	Short and medium term family based care (including longer term care for older children) for about 140 Kent children.
47	5,843.4	Fostering - Non-Disabled Children - Commissioned from Independent Fostering Agencies	0.0	6,576.4	6,576.4	0.0	0.0	0.0	6,576.4	Short and medium term family based care (including longer term care for older children) for about 20 Kent children.
48	167.3	Legal Charges - Disabled Children	0.0	167.3	167.3	0.0	0.0	0.0	167.3	Costs for in-house legal support and external legal fees for care proceedings for Specialist Children's Services relating to those with a disability.
49	6,570.7	Legal Charges - Non-Disabled Children	0.0	6,570.7	6,570.7	0.0	0.0	0.0	6,570.7	Costs for in-house legal support and external legal fees for care proceedings for Specialist Children's Services relating to those without a disability.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
50	2,518.6	Residential Children's Services - Disabled Children - In house service (Short Breaks Units)	2,791.9	409.1	3,201.0	-12.7	-669.7	0.0	2,518.6	Provision of 5 in house units for short breaks (for both looked after and non looked after children, including those with a disability).
51	3,191.0	Residential Children's Services - Disabled Children - Commissioned from Independent Sector	0.0	4,699.2	4,699.2	-467.3	-932.7	0.0	3,299.2	Independent sector residential care for estimated 35 children (both looked after and non looked after children with a disability).
52	7,787.1	Residential Children's Services - Non-Disabled Children - Commissioned from Independent Sector	0.0	9,415.0	9,415.0	0.0	-594.4	0.0	8,820.6	Independent sector residential care for estimated 57 children (both looked after and non looked after children without a disability).
53	1,808.1	Supported Accommodation - Non-Disabled Children - Commissioned from Independent Sector	0.0	2,465.6	2,465.6	0.0	0.0	0.0	2,465.6	Approximately 80 Looked after young people aged 16 and 17 in Supported Accommodation Placements.
54	1,454.8	Virtual School Kent	1,608.2	3,200.7	4,808.9	-81.6	-2.8	-3,409.7	1,314.8	Supporting approx. 2,100 looked after children (including approx. 680 Unaccompanied Asylum Seeking Children) focussing on their education & health needs.
		Children in Need								
55	6,511.8	Family Support Services - Disabled Children	0.0	6,965.6	6,965.6	0.0	-305.0	0.0	6,660.6	Community based family support services including day care, direct payments and payments to voluntary organisations.
56	2,313.5	Family Support Services - Non-Disabled Children	0.0	2,263.8	2,263.8	0.0	-153.1	0.0	2,110.7	Community based family support services including day care, direct payments and payments to voluntary organisations.
		Other Children's Services								
57	11,448.1	Adoption & other permanent care arrangements for children	1,909.2	11,899.0	13,808.2	0.0	-103.0	0.0	13,705.2	Permanent care for Kent children who are unable to live with their birth families. Includes adoption payments, child arrangement orders & special guardianship orders.
		Asylum Seekers:								
58	0.0	- Aged under 16	0.0	4,428.3	4,428.3	0.0	0.0	-4,428.3	0.0	Supporting unaccompanied asylum seekers under the age of 16.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
59	0.0	- Aged 16 & 17	0.0	10,450.1	10,450.1	0.0	0.0	-10,450.1	0.0	Supporting unaccompanied asylum seekers aged 16 or 17.
60	550.0	- Aged 18 and over (care leavers)	0.0	8,747.6	8,747.6	0.0	0.0	-8,197.6	550.0	Supporting unaccompanied asylum seekers aged 18 or over (who were previously in care when aged under 18) as Care Leavers.
61	2,669.1	Care Leavers	3,095.4	3,147.6	6,243.0	-2,563.2	0.0	-624.7	3,055.1	A service for young people aged 18+ who have previously been in care, including the contract management fee for the overall supported accommodation service for both care leavers and 16 and 17 year olds in care
62	4,657.1	Safeguarding	5,085.1	694.0	5,779.1	-682.2	-439.8	0.0	4,657.1	Performance management of services for vulnerable children in Kent. Statutory education safeguarding functions with services commissioned by schools and other settings providing additional support and challenge.
		Community Services								
63	290.5	Local Healthwatch & NHS Complaints Advocacy	0.0	681.0	681.0	0.0	0.0	-469.5	211.5	Local Healthwatch and NHS Complaints Advocacy are statutory services commissioned by KCC. Local Healthwatch will ensure that patients, users of social care services and their carers, and the public have a say in how these services are commissioned and delivered on their behalf. NHS Complaints Advocacy will support people who wish to complain about any NHS Health Service or Public Health Service.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
		Public Health								
64	0.0	Children's Public Health Programmes: 0-5 year olds Health Visiting Service	0.0	21,850.2	21,850.2	0.0	0.0	-21,850.2	0.0	The Health Visiting Service is a universally available service that supports over 90,000 young children between the ages of 0-5. It has a crucial role in the early years of a child's development providing ongoing support for all children and families. It leads the delivery of the Healthy Child Programme (HCP) during pregnancy and the early years of life, from 0-5 years. It includes the Family Nurse Partnership (FNP) which is an evidence based, preventative programme targeted to vulnerable young mothers aged 19 and under having their first baby. This is a nurse led intensive home-visiting programme from early pregnancy to the age of two.
65	0.0	Other Children's Public Health Programmes	0.0	11,338.2	11,338.2	0.0	0.0	-11,338.2	0.0	This includes universal school nursing, which contributes to screenings and assessments, school-readiness and healthy school provision. Other initiatives are also aimed at children's emotional wellbeing, healthy weight and infant feeding programmes. Approximately 26,500 children will participate in the National Child Measurement Programme.
66	100.0	Drug & Alcohol services	184.1	14,253.8	14,437.9	0.0	-5,055.4	-9,382.5	0.0	Includes provision for approximately 5,000 adults across Kent to access structured alcohol and drug treatment services and in excess of 8,000 to receive brief interventions; in excess of 3,000 young people to be engaged by substance misuse early intervention and specialist services. This also covers prescribing-related costs for adult and young people substance misusers.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
67	0.0	Integrated Health & Lifestyle Service	0.0	6,281.0	6,281.0	0.0	0.0	-6,281.0	0.0	This funding supports the delivery of the following key outcomes: reductions in smoking prevalence, levels of inactivity, poor diet, obesity levels, poor mental wellbeing, and excessive drinking; and increasing the uptake of NHS Health Checks. This includes the mandated Health Checks programme for adults where approximately 91,000 invites will be issued with the aim of 45,000 residents receiving a Health Check. The provision of Health Trainers will ensure community engagement and access to services. The funding enables the delivery of a range of interventions that support people to improve their health and change their unhealthy behaviour under the banner One You Kent and contributes to Healthy Living Centres across Kent. One You Kent is part of a national campaign which aims to encourage adults, particularly those in middle age, to take control of their health to enjoy significant benefits now, and in later life.
68	0.0	Public Health - Mental Health Adults	0.0	2,164.8	2,164.8	0.0	0.0	-2,164.8	0.0	Access to Early Intervention services across Kent addressing the mental well-being of residents in need, from the workplace all the way through to war veterans in the community. A number of projects will help to identify specific needs in the community including the nationally recognised "Men's Sheds" programme to encourage older men to socialise together and improve their quality of life, and hopefully their levels of general health.
69	0.0	Public Health Staffing, Advice and Monitoring	3,121.9	281.7	3,403.6	-9.8	-447.7	-2,946.1	0.0	Management, commissioning and operational delivery of core and statutory public health advice and monitoring services to ensure delivery of KCC's responsibilities as a Public Health Authority.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
70	0.0	Sexual Health Services	0.0	12,170.8	12,170.8	0.0	-1,000.0	-11,170.8	0.0	Commissioning of mandated contraception and sexually transmitted infection advice and treatment services. This includes approximately 35,000 15-24 year olds screened for Chlamydia as part of the national screening programme; over 6,000 long acting reversible contraceptive devices inserted, with almost 5,000 being removed; and almost 28,000 first appointments and 7,000 follow up appointments in respect of Genito-Urinary Medicine, both in county and out of county.
71	0.0	Targeting Health Inequalities	31.0	3,026.7	3,057.7	0.0	-61.0	-2,996.7	0.0	This funding supports District and Borough Councils across Kent to deliver public health outcomes and to influence the wider determinates of health to create healthy communities that promote long term positive lifestyle choices. In addition it funds the delivery of the following key outcomes: reductions in smoking prevalence, levels of inactivity, poor diet, obesity levels, poor mental wellbeing, and excessive drinking; and increasing the uptake of NHS Health Checks. This funding also supports the client pathway for One You Kent.
72	0.0	Tobacco Control	0.0	145.0	145.0	0.0	0.0	-145.0	0.0	A partnership with health and local councils to influence policy on illicit tobacco, smoke free places and vaping.
73	403,001.4	Total Direct Services to the Public	50,918.5	599,094.1	650,012.6	-7,105.9	-118,422.2	-111,512.3	412,972.2	
		<u>Assessment Services</u>								
74	37,719.8	Adult's Social Care Staffing	37,355.4	3,514.9	40,870.3	-37.2	-2,928.0	-185.3	37,719.8	Social care staffing providing assessment of community care needs undertaken by Case Managers and Mental Health Social Workers.
75	5,327.1	Children's Social Care Staffing - Disabled Children	5,089.6	469.1	5,558.7	-80.0	-151.6	0.0	5,327.1	Social Care staffing providing assessment of children & families needs and ongoing support to looked after disabled children.
76	36,248.9	Children's Social Care Staffing - Non-Disabled Children	38,214.2	2,520.0	40,734.2	-3,170.2	-169.5	0.0	37,394.5	Social Care staffing providing assessment of children & families needs and ongoing support to looked after non-disabled children.

Appendix 2 - Directorate Specific A to Z Service Analysis

Social Care, Health & Wellbeing

Row Ref	2016-17 Revised Base	Service	2017-18 Proposed Budget							Affordable Activity
	Net Cost		Staffing	Non staffing	Gross Expenditure	Internal Income	External Income	Grants	Net Cost	
	£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	
77	79,295.8	Total Assessment Services	80,659.2	6,504.0	87,163.2	-3,287.4	-3,249.1	-185.3	80,441.4	
		<u>Management, Support Services and Overheads</u>								
		Directorate Management and Support for:								These budgets include the directorate centrally held costs, which include the budgets for, amongst other things, the strategic directors and heads of service.
78	7,098.5	Social Care, Health & Wellbeing (SCH&W)	4,663.6	4,032.0	8,695.6	-235.2	-160.0	-1,132.7	7,167.7	
		Support to Frontline Services:								
79	4,656.9	Adult's Social Care Commissioning	4,471.3	161.1	4,632.4	-40.0	-69.5	-41.0	4,481.9	Responsible for developing and delivering a commissioning strategy and procurement priorities for both Accommodation Solutions and Community Support for all vulnerable adults.
80	1,121.4	Adult's Social Care Performance Monitoring	786.7	134.7	921.4	0.0	0.0	0.0	921.4	Responsible for performance monitoring and information services for adults social care.
81	1,796.4	Children's Social Care Commissioning	1,691.1	43.3	1,734.4	0.0	0.0	0.0	1,734.4	Responsible for developing and delivering a commissioning strategy and procurement priorities for Specialist Children's Services
82	815.2	Children's Social Care Performance Monitoring	741.2	67.9	809.1	0.0	0.0	0.0	809.1	Responsible for performance monitoring and information services for children's social care.
83	15,488.4	Total Management, Support Services and Overheads	12,353.9	4,439.0	16,792.9	-275.2	-229.5	-1,173.7	15,114.5	
84	497,785.6	TOTAL	143,931.6	610,037.1	753,968.7	-10,668.5	-121,900.8	-112,871.3	508,528.1	

Row Ref	SOCIAL CARE, HEALTH & WELLBEING							
	SECTION 3 - CAPITAL INVESTMENT PLANS 2017-18 TO 2019-20 BY YEAR							
			Three Year Budget £'000		Cash Limits			
					2017-18 £'000	2018-19 £'000	2019-20 £'000	
	Rolling Programmes	Description of Project						
1	Home Support Fund & Equipment	Provision of equipment and/or alterations to individuals' homes	1,500		500	500	500	
2	Total Rolling Programmes		1,500		500	500	500	
			Total Cost of Scheme £'000	Prior Years Spend £'000	Cash Limits			
					2017-18 £'000	2018-19 £'000	2019-20 £'000	Later Years £'000
	Individual Projects	Description of Project						
3	Developer Funded Community Schemes	A variety of community schemes to be funded by developer contributions	3,872	1,221	1,607			1,044
	Kent Strategy for Services for Learning Disability (LD):							
4	Learning Disability Good Day Programme - Community Hubs	Community Hubs - provide dedicated space, accessible equipment and facilities for people with a learning disability within inclusive community settings across the county	1,616	1,048	568			
5	Short Breaks Units	To provide short break units	504		504			
	Kent Strategy for Services for Older People (OP):							
6	OP Strategy - Specialist Care Facilities	Older Persons Care Provision - Accommodation Strategy	2,281	1,281	1,000			
	System Development:							
7	Adult Social Care Case Management	Replacement of the Adult Social Care Case Management & finance system	7,760		2,587	5,173		
8	Swift Replacement Phase1 (Lifespan)	Implementation of technology to support the new Lifespan structure & business functions	466	77	389			

Row Ref	SOCIAL CARE, HEALTH & WELLBEING							
	SECTION 3 - CAPITAL INVESTMENT PLANS 2017-18 TO 2019-20 BY YEAR							
			Total Cost of Scheme £'000	Prior Years Spend £'000	Cash Limits			
					2017-18 £'000	2018-19 £'000	2019-20 £'000	Later Years £'000
	Individual Projects	Description of Project						
	Community Sexual Health Services:							
1	Community Sexual Health Services	Development of premises for delivery of community sexual health services	360	125	235			
2	Total Individual Projects		16,859	3,752	6,890	5,173	0	1,044
3	Directorate Total		18,359	3,752	7,390	5,673	500	1,044
<i>Italic font: these are projects that are relying on significant elements of unsecured funding and will only go ahead if the funding is achieved.</i>								
			Total Cost of Scheme £'000	Prior Years Spend £'000	Cash Limits			
			2017-18 £'000	2018-19 £'000	2019-20 £'000	Later Years £'000		
Funded by:			£'000	£'000	£'000	£'000	£'000	£'000
Borrowing			6,975	62	1,740	5,173		
PEF2			369	369				
Grants			3,185	877	2,308			
Developer Contributions			3,903	1,252	1,607			1,044
Other External Funding			0	0	0			
Revenue and Renewals			1,860	125	735	500	500	
Capital Receipts			2,067	1,067	1,000			
Total:			18,359	3,752	7,390	5,673	500	1,044

Row Ref	SOCIAL CARE, HEALTH & WELLBEING											
SECTION 3 - CAPITAL INVESTMENT PLANS 2017-18 TO 2019-20 BY FUNDING												
			2017-20 Funded By:									
		Three Year Budget	Borrowing	Grants	Dev Contrs	Other External Funding	Revenue & Renewals	Capital Receipts	Recycling of Loan Repayments	Total 2017-20		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	
ROLLING PROGRAMMES												
1	Home Support Fund & Equipment	1,500					1,500			1,500		
2	Total Rolling Programmes	1,500	0	0	0	0	1,500	0	0	1,500		
		Total Cost of Scheme	Prior Years Spend	Borrowing	Grants	Dev Contrs	Other External Funding	Revenue & Renewals	Capital Receipts	Recycling of Loan Repayments	Total 2017-20	Later Years
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
INDIVIDUAL PROJECTS												
3	Developer Funded Community Schemes	3,872	1,221			1,607					1,607	1,044
Kent Strategy for Services for Learning Disability (LD):												
4	Learning Disability Good Day Programme - Community Hubs	1,616	1,048		568						568	
5	Short Breaks Units	504			504						504	
Kent Strategy for Services for Older People												
6	OP Strategy - Specialist Care Facilities	2,281	1,281					1,000			1,000	
System Development:												
7	Adult Social Care Case Management	7,760		6,913	847						7,760	
8	Swift Replacement Phase1 (Lifespan)	466	77		389						389	
			2017-20 Funded By:									
		Total Cost of Scheme	Prior Years Spend	Borrowing	Grants	Dev Contrs	Other External Funding	Revenue & Renewals	Capital Receipts	Recycling of Loan Repayments	Total 2017-20	Later Years
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
INDIVIDUAL PROJECTS												
Community Sexual Health Services:												
9	Community Sexual Health Services	360	125					235			235	
10	Total Individual Projects	16,859	3,752	6,913	2,308	1,607	0	235	1,000	0	12,063	1,044
11	TOTAL CASH LIMIT	18,359	3,752	6,913	2,308	1,607	0	1,735	1,000	0	13,563	1,044

Italic font: these are projects that are relying on significant elements of unsecured funding and will only go ahead if the funding is achieved.

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