Supporting People

Five-Year Strategy
2005-2010

Stockton-on-Tees

NATIONAL PROBATION SERVICE
for England and Wales

Enforcement, rehabilitation and public protection

supportingpeople

Stockton-on-Tees
BOROUGH COUNCIL

North Tees NHS
Primary Care Trust

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Executive Summary

Introduction and context

The development of a local Supporting People 5-year Strategy is a requirement of the Government. It enables each local authority to plan, commission and provide support services that help vulnerable people live independently. The Supporting People programme went live on 1st April 2003. The aim of the programme is to establish a strategic, integrated policy and funding framework, delivered locally in response to identified local needs, replacing the previous complex and uncoordinated arrangements for providing housing related support services for vulnerable people.

Stockton Borough Council received a Supporting People grant of £2.75 million in 2005/06. This is a 0.89% decrease on the previous year and follows the trend of the first two years of the programme. Stockton-on-Tees is one of a few local authorities acknowledged to be under funded and we expect to get an increase in funding in future years.

It is accepted that not all of the current provision will meet future needs for supported housing services within the Borough. The present low level of funding in comparison to the majority of other local authorities indicates there is a need for more services. The Strategy also takes on board the requirement of current provision to meet future needs. For some client groups existing provision is likely to meet this need, however where it does not, the Commissioning and Strategy Group and Supporting People Team will need to manage the process of change in an effective but sensitive way through negotiation with providers to remodel services or procure new services through a process of tendering.

This 5-year Strategy, finalised in May 2005, covers the years 2005 – 2010 and follows the earlier Shadow Strategy published in September 2002. The Strategy supports the Stockton-on-Tees Supporting People Vision, developed in consultation with stakeholders in 2002.

Stockton-on-Tees Supporting People Vision Statement

We will deliver a diverse range of high quality housing related support services to vulnerable people living in the Borough by ensuring:

- ***Best use of available resources,***
- ***Delivery of services to meet peoples needs,***
- ***New services are integrated with existing services and strategic plans,***
- ***Account is taken of the views of service users, partners and Stakeholders in developing services***

In order to achieve the aims and objectives of the Strategy the Supporting

People Team have:

- Carried out local research into the housing needs of vulnerable client groups including older people and young people at risk;
- Consulted with service users through the Service Review process;
- Linked in with strategic plans such as the Council's Community Strategy, Housing Strategy, Homelessness Strategy and the Local Delivery Plans;
- Linked in with strategic partners including the Drugs Action Team, the Learning Disabilities Partnership Board and the Asylum Seeker and Refugee Forum;
- Set up a work programme to ensure that all services are reviewed by December 2005;
- Held regular Provider Forums to enable Housing Providers to carry out a dialogue with the Supporting People Team;
- Consulted with the key stakeholders such as the Council's Children, Education, and Social Care service and the Housing Strategy service along with Registered Social Landlords and other housing providers;
- Held regular Commissioning and Strategy Group meetings to inform and make decisions at local level about the focus of the Supporting People programme activities and to develop priorities for the Strategy.

There is already a good range of quality supported housing services within the Borough provided by a range of organisations from the voluntary and charitable sector, registered social landlords and the local authority. A substantial amount of work has already been undertaken to review the services already operating in the Borough and this work will continue until all 74 services (1686 units of accommodation) have been reviewed and the 31 support providers accredited. The programme of reviews will continue after April 2006 for all services with a steady state contract.

A considerable amount of work has already been undertaken by provider organisations to ensure that the services are restructured to meet nationally agreed quality standards identified in the Quality Assessment Framework. Quarterly monitoring of these services now takes place and a baseline of service delivery is being developed which will allow the Supporting People team to measure progress in the coming years.

In spite of the progress made to date the Supporting People programme locally needs an additional £1,420,000 in grant funding to enable the Commissioning and Strategy Group to achieve the outcomes of the 5-year Strategy commissioning new services in order to meet the identified gaps existing within the Borough. This is a required growth of 34% in the grant over the following four years which is realistic if the expected change in the distribution of grant throughout the country takes place at the rate of a 10% increase year on year. Any savings achieved from the review process will be used to develop the services further.

The Supporting People programme covers a wide and diversified range of client groups. The Strategy identifies the key commissioning and work priorities within the Borough of Stockton-on-Tees. The methodology used to develop the identified priorities was based on discussions with stakeholders in Provider meetings, with representatives of the Housing and Neighbourhood Partnership and members of the Commissioning and Strategy Group. These priorities are based on the analysis of the research into each of the individual client group areas. This Strategy is in essence the building blocks for implementing the Supporting People vision of services for the five years 2005 to 2010. It is intended as a guide and business-planning tool for organisations providing supported housing services in the Borough. The priorities may change over the next five years as new information is gathered.

High Priority Scheme Investment Objectives

From the analysis of each client group the Commissioning and Strategy Group have developed a list of priority investment objectives. These are services that they wish to see developed and for which they are prepared to invest in once funding becomes available. Two schemes are already in development and are linked to capital funding allocations from the Housing Corporation. The third scheme is subject to a bid to the Housing Corporation for capital funding in 2006/08 and will be revenue funded by the Supporting People Commissioning and Strategy Group.

Priority	Scheme / Service	Client Group	Investment / annum (£) Estimated cost (approx.)
H1	Extra Care - Hardwick	Older People	Committed £60,000 (will need additional investment from Social Care) + capital costs of build (agreed)
H2	Substance misuse accommodation scheme – support service	Substance Misuse	Committed £175,000 + capital costs of build (agreed)
H3	Substance misuse – move on accommodation (2nd stage of above scheme)	Substance Misuse	£40,000
		Total Cost	**£275,000**

Medium Priority Scheme Investment Objectives

The following new schemes / services are accommodation based and are therefore reliant on capital funding and can only be considered for Supporting People funding in conjunction with the development programme.

Priority	Scheme / Service	Client Group	Investment / annum (£) Estimated cost (approx.)
M1	120 units of rented Extra Care in next 10 years with an additional 100 units for outright sale or shared ownership.	Older People	£150,000 (will need additional investment from Social Care) + capital costs of build
M2	Accommodation based supported housing scheme(s) for people with learning disabilities (4 – 12 units)	Learning Disabilities	£210,000 (likely to need additional investment from Social Care + capital costs of build)
M3	Accommodation based supported housing scheme(s) for people with mental health problems (4 – 12 units)	Mental Health	£150,000 + capital costs of build
		Total Cost	**£510,000**

High Priority Service Development Objectives

The following proposed housing related support services do not rely on the provision of specialist accommodation and are therefore not reliant on additional capital funding. They can be developed as stand alone schemes.

Priority	Scheme/Service	Client Group	Invesment/annum (£)Estimated cost (approx)
H4	200 units of low level F/S in next 3 years	Older People	£200,000
H5	Invest in pilot scheme to explore development of electronic assistive technology across all tenures	Older People & other disabled people	£20,000
H6	Supported lodging scheme (between 6 – 10 units)	Young people at risk	£70,000
H7	Further investment in a tenure blind F/S service for homeless people (families, single people, offenders, people with mental health problems & people who misuse substances)	Homelessness Generic (offenders, young people, refugees, etc)	£200,000

H8	Investment in the development of a resettlement service linked to the homeless hostel for single men	Homelessness	£25,000
H9	Invest in management costs for Rent Guarantee Bond scheme	Homelessness	£20,000
H10	Investment in Night Stop scheme	Homelessness	£20,000
H11	Floating support service for people with learning disabilities (8 -10 units to start with)	Learning Disabilities	£40,000
H12	Invest in management costs of small scale pilot Home Improvement Agency	Older People	£40,000
		TOTAL COST	**£635,000**
		OVERALL TOTAL	**£1,420,000**

It will be the Commissioning and Strategy Group's responsibility to agree a mechanism to help with the decision making process both in terms of getting the additional grant funding or if the future Grant allocation falls short of the identified amount.

Work Priorities

There are a number of priority pieces of work the Supporting People Team will be concentrating on to enable the further development of the programme. These are:

Client Group	Supporting People Work Priorities
Older people – including older people with mental health problems or dementia	• Work with the Council's Housing Strategy team to deliver the Older Person's Accommodation strategy within the Borough. • Undertake further needs mapping for older people within BME groups. • Address the needs of older homeless men by exploring the possibility of long-stay supported housing.
Homeless people – including single homeless people, homeless families and rough sleepers	• Remodel / re-classify the homeless hostel for single homeless to accurately reflect the fact that it accommodates single homeless men over the age of 25 whom have an alcohol problem. • Develop a resettlement service linked to the homeless hostel for single men. • Stimulate permanent housing options for single people and families currently in short term supported housing schemes.

Substance misusers – including people with drug problems and people with alcohol problems	• Establish a monitoring system with the Council's Homelessness Service to identify number of homeless people with drug and alcohol problems. • Develop systems for longer term monitoring of existing schemes to assess the success rate of differing housing provision. • Develop appropriate move on accommodation linked to the new drug scheme. • Maintain close links with key agencies i.e. DAT, Community Safety, to monitor future need. • Stimulate linkages between supported housing for drug users to BME Housing Strategy • Ensure all services have in place a fair access policy regarding Black and Minority Ethnic Groups. • Link into Alcohol Strategy to identify and research unmet needs.
People with learning disabilities	• Work with the Learning Disabilities Team to develop a housing strategy for people with learning disabilities. • Stimulate the development of protocols between the Care Management Team and Housing Services to ensure that information and data is shared, when people with learning disabilities are homeless or potentially homeless.
People with mental health problems	• Further explore the development of new services to cater for young people aged 16-25 years with mental health problems that are also able to support young people with dual diagnoses. • Stimulate the development a new intensive support services to cater for people leaving long-term rehabilitation units. The lack of bed spaces within the rehabilitation unit delays discharge from acute hospital beds. Independent living with intensive support would alleviate this bed blocking. • Ensure all services have in place a fair access policy regarding Black and Minority Ethnic Groups. • Further explore the development of new partnerships between private landlords and specialist support agencies (including landlords agreeing to provide and maintain accommodation in return for rent guarantees and management of support).

People with a physical or sensory disability	• Audit all supported housing schemes to determine their capacity to accommodate people with physical and sensory disabilities • Undertake detailed investigation into whether there is a need for additional specific supported accommodation / floating support and the level of provision that is required, around people with: o Newly acquired disabilities o Short term disabilities o Young people with disabilities living at home, that would like to live independently o Children with disabilities for indications of future provision o People inappropriately accommodated in care homes with disabilities • Explore the need for a tenure blind adaptation advice service able to access funding resources in order to carry out required works (linked to Home Improvement Agency).
Women at risk of domestic violence	• Work with the Homelessness Service to identify how many families applying for accommodation are fleeing domestic violence and therefore identify any shortfall in provision • Stimulate the development of a range of permanent housing options for women leaving a refuge • Link in with Domestic Violence Forum and identify current issues • Explore the need for a specialist BME domestic violence worker for ethnic minorities within the existing refuge provision.
Young People – including young people at risk, young people leaving care and teenage parents	• Stimulate the development of permanent housing options for young people at risk / leaving care currently in short term supported housing schemes • Stimulate the provision of supported housing for young people from BME groups.
Offenders – including ex-offenders and people at risk of offending	• Undertake research into the housing needs of offenders within the Borough • Stimulate the development of single person accommodation for offenders able to facilitate reintegration whilst supporting medium to low-level mental illness and/or substance misuse problems.
Refugees	• Stimulate the development of appropriate accommodation for refugees in conjunction with existing support provision • Consider the continued funding of the Council's Refugee Move On Officer under Supporting People.
Travellers	• Further explore the support needs of Travellers in conjunction with existing support provision.
HIV/Aids	• Further explore the support needs of people with HIV/Aids.

General priorities-which apply to all client groups are:	o Stimulate services which:
	• Support vulnerable people to achieve their potential and enable their participating in the social and economic life of the Borough
	  • Support vulnerable people to live in their own homes wherever this is their wish and is practical
	  • Involve users in planning services
	  • Work in partnership to promote social inclusion, reduce dependency on drugs, alcohol and misused substances
	  • Represent good value for money
	• Have secured capital funding
	• Support service opportunities for BME and other marginalised groups

Services that are commissioned will be expected to:

- Reduce the number of personal crises caused by housing related problems and, as a result, avoid increasing the pressure on homelessness, advice, health, social care, criminal justice and other services;
- Be well managed by suitable, professional and viable providers;
- Demonstrate good value for money, by providing quality services at a reasonable cost.

The Strategy cannot be developed in isolation – a joined up approach with the emphasis upon partnership working is the way forward to success. Therefore the Supporting People programme in Stockton-on-Tees will:

- Continue to link in with other relevant strategies such as the Housing Strategy, Homelessness Strategy, Probation and Health and our other key partner agencies;
- Provide clear routes for services providers, service users and stakeholders to make their contribution to commenting upon local needs, plans and services;
- Use the Supporting People budget to its full advantage. This will be done by placing an emphasis upon linking in with other funding streams where appropriate to target those people who have a range of support and other needs;
- Work with other Authorities where possible to develop services accessible to residents across Borough boundaries;
- Operate within sound financial principles. Services will only be commissioned where needs and resources are clearly identified and agreement has been reached by the local Commissioning and Strategy Group;
- Continue to judge the relevance of services by their strategic value, cost effectiveness and their quality by putting in place a rigorous monitoring and review system;
- Work within the ethos of Supporting People to drive forward continuous improvement as means of delivering high quality services to all residents within the Borough.

The Supporting People 5-year Strategy for Stockton-on-Tees clearly sets out the key objectives for both the Supporting People Team and the Providers of Supported Housing services.

Introduction

Background to the 5-Year Strategy

The development of a local Supporting People 5-year Strategy is a requirement of the Government. It enables each local authority to plan, commission and provide support services that help vulnerable people live independently. The aim of the programme is to establish a strategic, integrated policy and funding framework, delivered locally in response to identified local needs, replacing the previous complex and uncoordinated arrangements for providing housing related support services for vulnerable people.

The purpose of the 5-year Strategy is to examine critically the services inherited from the previous funding streams, and focus them on local need and strategic priorities. The Strategy sets out in detail the plans developed in partnership with the key Supporting People stakeholders. It provides a framework for how the Stockton-on-Tees Supporting People Commissioning and Strategy Group will meet the identified needs and priorities and considers both how to fill the identified gaps in service provision and how to fill the gaps in knowledge and understanding of needs.

The first section (pg 12-24) of the Strategy document commences with background information relating to the Borough of Stockton-on-Tees, introduces the role of the Supporting People programme within the Borough and goes onto make links with the Borough's Strategic Partnership and Council's corporate plans and strategies. Finally the section considers all the planning groups associated with the programme.

The second section (pg 25-49) details how the Strategy was developed, the learning taken from the earlier Shadow Strategy, the current supply for each of the 12 key client groups and an analysis of each client group to determine supply, needs and gaps in services. For each client group there is detailed information setting out current supply, their costs, information on research, strategic analysis and connections with other strategies. The analysis draws conclusions and identifies gaps in provision and the action to be taken to close that gap and any required service development.

The third section (pg 50-58) is titled Value for Money. It provides details of both the service review process and the Supporting People Team's progress with reviews for each of the 12 key client groups. The section goes onto describe the process for determining value for money locally. In addition there is information on how service performance is monitored, the approach being taken in commissioning new services and the process of procurement of those services. Finally it looks at the approach to capacity building and the efficiency gains already achieved by the programme locally.

The fourth section (pg 50-72) provides details on charging and finance. It gives details of the funding arrangements, the proposed distribution formula

for sharing out the national “pot”, the budget allocation and contracted expenditure over the first two years of the programme. This section provides details of the financial link to other statutory services and details the arrangements for contracting with providers, the payment arrangements for providers and the system of charging and subsidy payments for individual service users.

The fifth section (pg 73-79) provides the detail to the proposed Strategy. It develops the concept of the Commissioning Plan and sets out in some detail both the high and medium term investment objectives for developing the new housing related support services required within the Borough. In addition there are details of service development objectives. All the key objectives coming from the plan have been costed to give an indication of the investment needed and to assist in prioritising the development programme given the required funding.

The sixth and final section (pg 80-85) provides details of the Annual Plan and sets out the key actions to be undertaken to meet the commissioning and work priorities of the Supporting People programme in 2005/06. The Annual Plan is broken down into six key objectives. Each objective provides a list of actions that need to be taken by the Supporting People Team to meet the specific objective. The plan gives an indication of the timescale for carrying out each action and identifies the person responsible for ensuring the work is undertaken.

Section 1

1.0 Background to Stockton-on-Tees

1.1 The Borough Profile

The Borough of Stockton-on-Tees is located in the North East of England and is one of five local authorities within the Tees Valley region. The Borough is one of wide contrasts with a mixture of busy town centres, urban residential areas and rural villages. There are three main townships in the Borough; Stockton, Billingham, and Thornaby.

1.2 Population projections

The population of the Borough is 178,408[1]. This is a rise of 1.9% since 1991, bucking the regional picture (2.8% decline). Trends suggest that over the next decade Stockton's population is set to remain fairly stable. However the number of projected households is set to increase from 72,953 to 81,900 by 2011. This trend can be attributed to the increasing proportion of younger people setting up households, changes in the fabric of society (i.e. fewer marriages and more separation and divorce) and decreases in mortality rates leading to greater numbers of older people, an increasing number of whom live alone.

Just over half of the population are women (51%), with 26% of all residents being under the age of 20. In contrast to this, 15% are over the age of 65 and 40% of all residents are over the age of 45.

The economically active population (17 – 44 years) and the number of households with children are set to decline. In contrast, there will be an increase in the elderly population, resulting in an increasingly ageing population. *For example over a fifth of the population in Stockton is projected to be over retirement age by 2016.*

1.3 The local black and minority ethnic ((BME) population

The population of Stockton-on-Tees is largely white with less than 3% of the population (some 4,924 residents) from black and minority ethnic (BME) communities. The largest resident ethnic minority groups are Pakistani (1,980) and Indian (785)[1]. The BME community while only 4,924 of the total population have increased by 57% since the 1991 census. This increase to some extent can be attributed to the number of asylum seekers who once given a positive determination to remain in the country, choose to remain in the Borough. BME residents tend to live in the central Stockton Wards. For example, the Parkfield / Mill Lane area comprises a population of 7,338 of which 18% are BME residents mainly Pakistani Muslims.

[1] Data Source: 2001 census information.

[1] Data Source: 2001 census information.

In addition to the established BME community there are approximately 670 sole or principal applicants living in the borough who are asylum seekers and are awaiting a decision regarding their immigration status. This figure is increased when household members are included. Stockton's refugee communities comprise of in excess of 50 countries of origin. There are a number of significant issues relating to those people who are dispersed for example the number of people who are the sole representative from their country of origin, the predominance of single people (especially young males who represent 85% of refugees), the impact on support services and community cohesion.

1.4 Social and economic factors

The Borough has a unique social and economic mix, with areas of alarming disadvantage situated alongside areas of affluence. For example, measuring disadvantage against the Government's Index of Multiple Deprivation, 14 of the Boroughs thirty wards (where 45% of the population reside), fall within the worst 20% of deprived wards nationally, 11 of which are actually amongst the worst 10%. In stark contrast, 4 wards fall within the top 20% of most affluent wards nationally. Stockton-on-Tees is ranked as the 107th most deprived council area out of 354 in England.

In terms of health care the standardised mortality ratios (SMR) show mortality rates in Stockton to be above the national average in a number of areas including coronary heart disease, cancers and respiratory diseases.

Unemployment in the Borough is 4.1%, compared to a national average of 2.6% and the North East average of 3.4%.

1.5 Positive Developments

The Council and its partner agencies are working hard to attract additional investment into the Borough in order to further regenerate it. Neighbourhood Plans are being drawn up for the most deprived neighbourhoods in the Borough, which will bring the public, private, community and voluntary sectors together in delivering positive regeneration at a recognisable local level.

Map of Stockton-on-Tees (showing main townships and areas)

1.6 The Council Structure

Stockton Borough Council is one of 44 top performing local authorities ranked as "Excellent" by the Audit Commission under the Comprehensive Performance Assessment programme[2]. It is considered to be "forward thinking" and have a "confident grasp of its own agenda to meet the needs of the community". The council is currently (April 2005) under Labour control and in October 2000 adopted the new Executive Structure introducing the cabinet style of corporate governance. In 2004 the Council reorganised to adopt a new management structure with three corporate directorates; (Children, Education and Social Care); (Neighbourhoods and Partnerships) and (Resources). In 2003/04 the council employed over 8,000 staff and its budget was £200.77 million.

1.7 Supporting People in Stockton

The Supporting People programme introduced a new strategic planning framework for housing related support services. For the first time Stockton Borough Council is now in a position to identify the true cost of existing provision and plan future support services.

In developing the vision further the Supporting People partnership[3] identified the key outcomes to focus on.

[2] CPA 2004 – there are 150 Local Authorities in England
[3] Provider Forum - 2002

Stockton-on-Tees Supporting People Vision Statement

We will deliver a diverse range of high quality housing related support services to vulnerable people living in the Borough by ensuring:

- ***Best use of available resources,***
- ***Delivery of services to meet peoples needs,***
- ***New services are integrated with existing services and strategic plans,***
- ***Account is taken of the views of service users, partners and Stakeholders in developing services***

The Vision will be achieved by:

- Offering choice
- Ensuring affordability
- Promoting holistic services through a joined up approach
- Ensuring services are user friendly
- Measuring our services against the highest standards in each sector
- Having clear aims and objectives

Evidence is beginning to emerge of the tangible benefits of Supporting People in relation to independent living, improved health, reduced homelessness and reduced offending by some client groups.[4] It is however difficult to assess and value the cost benefits of the programme. Independent living and improved health status are core benefits of the programme and key Government objectives, however it is difficult to measure for example the potential value in relation to crime reduction (in terms of increased public reassurance, reduced victimisation, and reduced criminal activity of service users), independent living and improved outcomes for related health and social care services.

A Needs Based Strategy

The data on existing services was taken from the supply mapping exercise undertaken in 2002. Supported housing services had grown over the preceding years being developed as the need identified itself and provided by organisations in the statutory, voluntary and charitable sectors. The current supported housing market grew out of an identified need to support vulnerable people. However in recent years the Government has become more concerned about the lack of control and rising costs associated with these services.

In the period of the Transitional Housing Benefit Scheme[5] there was a move away from developing accommodation based support services, mainly as a result of pressure on the capital building programme, to a new way of ensuring vulnerable people got their support whilst

[4] Supporting People – Benefits Realisation of the Supporting People programme (Matrix Research, ODPM, Nov 2004).
[5] THBS 1st April 2000 – 31st March 2003

maintaining their own tenancy. This became known as floating support, being delivered to individuals in there own home.

It is intended that the Supporting People grant allocation will be used to support the implementation of a Borough-wide strategy enabling the provision of needs driven services i.e. funds will be directed to commission services to support clients in greatest need regardless of where they reside across the Borough.

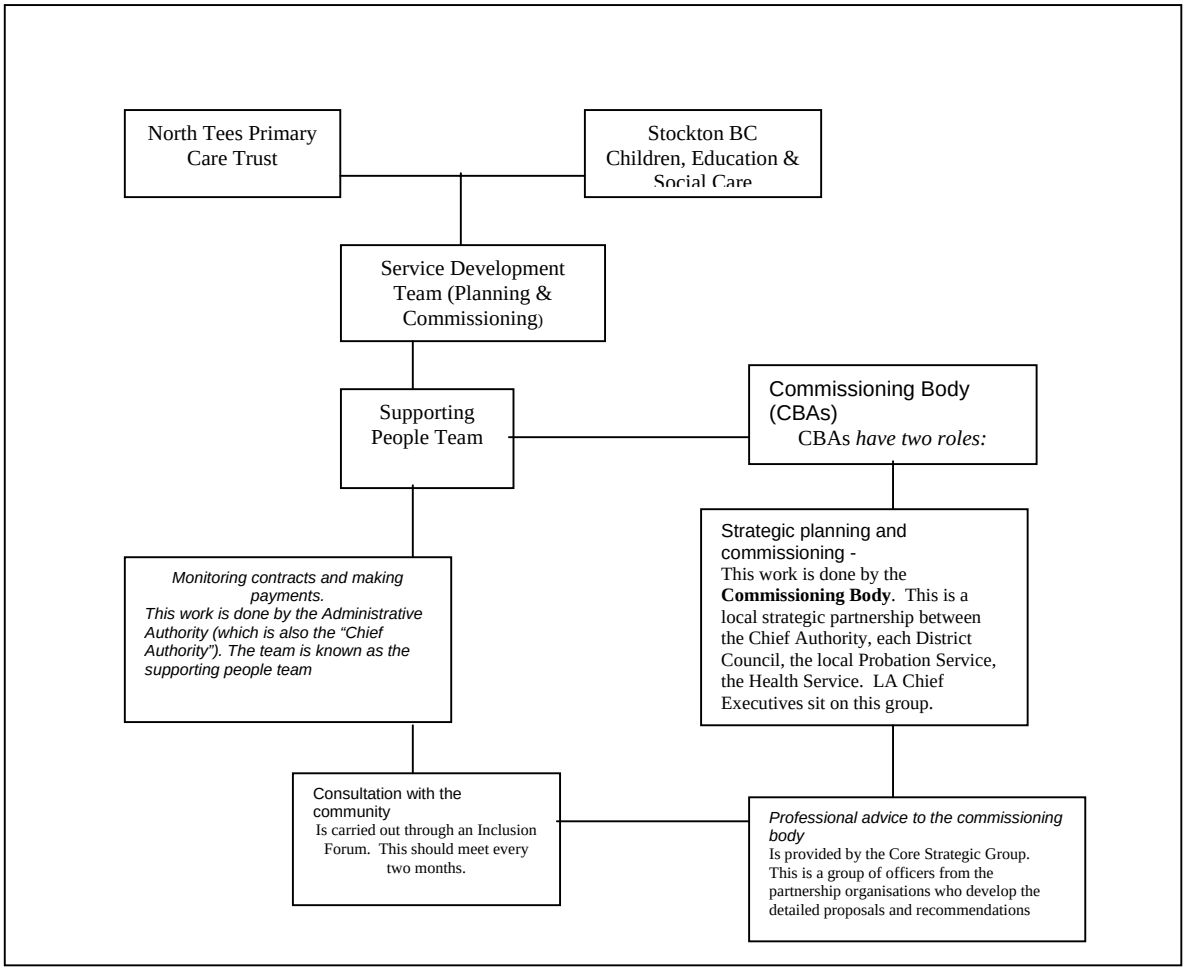
In developing the Strategy we work closely with a range of partners. This enables us to achieve:

- Improved client outcomes;
- Delivery across a range of Government targets and policy objectives;
- The identification of value for money benefits, such as cost savings in other public services, for example by reducing the use of acute services such as prisons and hospitals; and
- Contributing to the benefits of other related health and social care interventions e.g. drug treatment services.

The participating partners in the programme include Stockton Borough Council (the Administering Authority), North Tees Primary Care Trust and The National Probation Service (Teesside). Operating the programme in partnership opens up opportunities to develop strategically relevant services and gain from the synergy and cost effectiveness of preventative services.

Stockton Borough Council acts as the Administering Authority for the programme and plays a key role in its administration and financial control. Diagram 1 below shows the relationships between the key planning groups. The Supporting People team is located and managed within the Service Development Team (SDT) with ultimate responsibility to the Supporting People Commissioning and Strategy Group. The relationship between the Administering Authority, Commissioning and Strategy Group and other strategic and management aspects of the Supporting People programme are set out in the diagram below.

The Service Development Team works across North Tees Primary Care Trust and Stockton-on-Tees Borough Council Health and Social Care Directorate. The SDT undertakes the planning, commissioning and monitoring function of most NHS and Social Care services along with housing related support services.



1.8 Linking Service Development with the wider corporate agendas

The Supporting People Commissioning and Strategy Group have specific responsibilities which link into the Service Development Team **(Appendix 5).** These include:

- Ensuring contracts and service level agreements are in place with all support providers
- Contract compliance and provider assurance
- Contributing to performance management/improvement
- Contributing to modernisation activity through service and Best Value reviews.

The Service Development Team focuses its' work around seven portfolios:

- Adults (including Acute Hospital Services)
- Children and young people (Education, Health and Social Care)
- Drugs
- Learning Disabilities
- Mental Health/Social Inclusion
- Supporting People (Health, Housing and Social Care)
- Performance Monitoring (*not Supporting People*)

1.8 Links to other Plans and Strategies

Many of our Supporting People objectives are Council corporate objectives delivered in conjunction with partner agencies through the ***Community Strategy***, the overarching plan for the Borough. In addition there is the ***Council Plan*** that sets out the key priorities for the Local Authority to be achieved over the next three years.

Various internal plans are produced by the Council which support both the Community Strategy and Council Plan, all of which set out the key objectives, targets, and outcomes for the coming year. These are described in more detail in **Appendix 2 - Strategic Relevance**.

However they cover such plans and strategies as:

- Performance Improvement Plans (PIP)
- Service and Unit Delivery Plans
- Financial Plans
- Housing Strategy
- BME Housing Strategy
- North East Housing Strategy[6]
- Corporate Equality Plan
- Homelessness Strategy
- Community Safety Plan 2002 – 2005
- Children & Young People Strategy 2004 - 2008
- Teenage Pregnancy and Parenthood Strategy
- Drug Prevention Strategy

A practical example how Supporting People contributes and adds value to the achievement of the Community Strategy Objectives is detailed below: -

Plan	How the Supporting People service contributes
Community Strategy 2003 - 2006	Policy Platform: Promote the Safety and Well Being of the Community. Objective: Meet the housing needs of those that are vulnerable or have special housing requirements. Example Outcomes: - Review all service that support the housing of vulnerable people by March 2006
↑↓	↑↓
Performance Improvement Plans 2003/04 (PIP)	Objective: Meet the Housing needs of those who are vulnerable or have special housing requirements Key measure: - Review all contracted services that support the housing of vulnerable people
↑↓	↑↓
Service Delivery Plans 2003/04 (SDP)	Objective: Meet the Housing needs of those who are vulnerable or have special housing requirements

[6] North East Housing Board – Updating the North East Regional Housing Strategy – consultation Document; December 2004.

	Example of Key Actions: - Review all contracted services which support the housing of vulnerable people
↑↓	↑↓
Supporting People Strategy	The key action as detailed above have been referenced in the Supporting People Strategy and have been devolved into the Supporting People Action Plan and Unit Plan

1.9 Financing the Supporting People team

The administration grant provided by the Office of the Deputy Prime Minister (ODPM), which goes towards paying for the work of the Supporting People team has reduced year on year.

Year	Amount
2003/04	£188,908
2004/05	£161,296
2005/06	£129,038

At present budget expenditure outweighs income. Additional funding of £22k (15%) has been provided for 2005/06 by the SDT and Housing Department to meet the budget deficit. However in 2004/05 the Supporting People team bid for supplementary funding to help complete the service review programme by the April 2006 deadline and received an additional £31,000.

1.10 The purpose of the Supporting People team is to:

- Take the lead role in developing and reviewing the Supporting People strategy
- Maintain links with other strategies and new initiatives
- Administer the SP / administration budgets
- Carry out the Review Programme - Engage with service users
- Commission services - implement commissioning arrangements, tendering and awarding of contracts, monitoring performance, promoting innovation & good practice and remodeling services.

The Supporting People team consists of 3.8 full time equivalent (FTE) officers employed by Stockton Borough Council. There is a SP Manager, two Review Coordinators and a Project Officer (0.8 FTE).

The responsibility for payments to providers is contracted out to the Council's Client Financial Services Team based within the Children, Education and Social Care division. Here 1.5 FTE staff administering subsidy payment claims and Fairer Charging assessments.

The Supporting People team's success is monitored on a regular basis. The team measures their success by ensuring:

- Reviews are completed within the approved timetable
- Services are performance monitored on a quarterly basis
- The 5-year strategy is developed within the ODPM timescales

- Quarterly Milestones are completed for the ODPM
- Payments are made to providers on time
- Complaints are managed effectively and within the Council's guidelines
- Staff sickness is maintained within target

1.11 Planning Groups

In support of the Supporting People team, a number of planning groups have been established including:

- **The Commissioning and Strategy Group** – an amalgamation of both the Commissioning Body and Core Strategy Group, this is the group that formally agrees the Strategy document. The group is also responsible for identifying strategic priorities and commissioning opportunities. For example they received regular updates on the development of proposals for the commissioning of new schemes such as the Extra Care schemes in Thornaby and Hardwick for older people and the substance misuse accommodation scheme. Decisions relating to the commissioning of these schemes have been based on strategic relevance, identified unmet needs, risks, the costs of these schemes and the available grant allocation funding, taking into account efficiency savings achieved to date and other financial commitments.

  Membership of the group consists of senior managers from the Council's Housing Department, Primary Care Trust, Service Development Team and Probation Service. Provider representation on this group is now being actively pursued. Meetings are held on a bi-monthly basis and are supported by terms of reference and Memorandum of Agreement. To promote a level playing field approach, where representatives wear two hats as both purchaser and provider of services careful consideration has been given to minimising the potential for conflict of interest.

- **The Provider Forum** – a group that brings all local service providers together to discuss and inform the changing strategic requirements of the Supporting People agenda. This group meets at least three times per year as part of the planning, performance review and consultation process. In addition providers have been involved (through a questionnaire[7] and individual discussions) in providing information about current supply, identifying areas of unmet need and future priorities. We also provide opportunities to comment on service developments in general.

- **The Inclusive Forum** – a group designed to bring together all local service providers, service users, elected members and other key stakeholders to give the opportunity to discuss and inform strategic

[7] Batch 2 Questionnaires ODPM 2003/04

thinking about developing services. This forum is responsible for driving forward the development of the Supporting People strategy.

- **The Supporting People Focus Group** – this is a short term group developed to scrutinise and challenge the SP team in preparation for the Audit Commission's inspection of SP services within the Borough. The group meets on a quarterly basis and has the role of monitoring and developing the work programme and Action Plan.

  In addition to these established planning groups representatives from each of the provider organisations are invited to the bi-monthly **Housing and Neighbourhood Partnership Board** meetings. The Housing and Neighbourhood Partnership is one of a number of thematic partnerships within the Council's Local Strategic Partnership, Stockton Renaissance. The Partnership brings together different organisations from the public, private and voluntary and community sector that deliver housing related services in the Borough. The partnership is a forum where the strategic view of housing and neighbourhood related challenges, opportunities, best practice and local information can be shared in Stockton-on-Tees.

- **The Durham & Tees Valley Cross Authority Group** – a group of neighbouring authorities consisting of the County of Durham and the five unitary local authorities, Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees. These are authorities designated by the ODPM considered to have cross-boundary needs and issues. Cross Authority Groups are expected to work together to address common issues relating to the movement of service users across authority boundaries. In addition the ODPM have "designated" certain support services as cross authority services as they are deemed to be "of national importance or extremely specialist". In the main, this includes services for women fleeing domestic violence, high- risk offenders, mentally disordered offenders, people with drug or alcohol problems or rough sleepers.

  The aim of the group is to address strategic objectives and the planning and funding of future joint service provision that is needed across the sub-region that could not be achieved without working in collaboration. It will also take on board issues arising in the North East Region and nationally in accordance with identified demand for future services. **(Further information on the Cross Authority Statement in Appendix 3)**

1.12 Role of Elected Members

Elected Members play an important role in developing the Supporting People programme. There are two lead Members (Cabinet Members for Housing & Community Safety and Children, Education & Social Care) who have responsibility for Supporting People. Members are consulted and informed on the development of the strategy and annual plan and have been involved in listening and participating in discussions regarding

the development of the programme. Formal Cabinet reports are submitted on a regular basis as appropriate.

1.13 User Involvement

One of the key objectives of the Supporting People programme locally is to ensure the effective involvement of service users (see Action Plan). The Commissioning and Strategy Group expect the Supporting People team to focus on service user views as part of the broader service review and strategy development processes. The Supporting People team have consulted with a number of user groups including people with learning disabilities through the Partnership Board; older people through "Are you Being Served……Well" workshops; drug users through DAT focus groups; young homeless people during the development of their accommodation strategy; homeless families through the development of the homelessness strategy; teenage parents as part of the teenage pregnancy strategy; and all client groups through the review process. In some reviews the SP team have spoken with all tenants receiving support and in other, larger services, selections of tenants have been interviewed.

In all of the above consultation processes, significant effort has been made to engage both minority and marginalised groups. We intend to take this consultation forward with BME groups through the recently formed Viewpoint BME Focus Group.

All service users have the opportunity to express and have their views heard at key stages of the Supporting People process.

1.14 Consultation

The Supporting People team are committed to effective and meaningful consultation. The Supporting People Team are in the process of developing processes and procedures, which will form part of an overall consultation policy. This will allow service users to give their views on:

- Identifying gaps in existing service provision to directly influence strategy development
- Identifying their housing and support needs including what they would like services to look like in the future
- The quality and suitability of existing services

This will include ensuring that the view of traditionally 'hard to reach' groups such as BME, offenders, young people, women fleeing domestic violence and the homeless are given opportunity to contribute to the Supporting People Programme.

The Supporting People Team will do this by:

- Integrating directly with the consultation strategy currently being developed by Stockton Borough Council. This system provides a structured, co-ordinated route for all consultation including the

Supporting People programme. This co-ordinated approach facilitates partnership working in the consultation process and reduces duplication, which is often undertaken with the same people over similar issues.

Networking with local community agencies and groups to facilitate consultation with hard to reach groups where appropriate, or where specific consultation cannot be accomplished in traditional ways.

The Supporting People Team hold discussions with service users to:

- Find out about the quality and appropriateness of their housing and support services
- Consult on proposed changes to services.
- Evidence providers involvement with services users.

The Supporting People Team are recording and evaluating consultation by:

- A database of organisations involved in consultation
- A directory of consultation undertaken
- Asking for feedback about how consultation has worked

The Supporting People Team are developing a range of methods of providing information to service users including:

- Use of large print, pictures / symbols where appropriate
- Use of plain English and other languages where appropriate
- Internet
- Leaflets
- Presentations
- Forums
- Focus groups
- 1:1 discussions.

1.15 Translation and Interpretation Services

Consultation with residents via the 2002 BME survey, Parkfield Pathfinder Project and Community Cohesion and Diversity Group has indicated that there is little benefit in having documents translated into alternative languages, as few people from BME communities can read their spoken language well. They have advised that in the main they prefer information to be available in English, so wholescale translation of SP documents has not been considered as value for money. There are, of course, exceptions to this rule, and therefore the Supporting People team are developing their documents electronically so they are available in a range of different languages. Paper copies of these documents will be made available on request. On those occasions when specific advice and interpretation on housing related support issues is needed the Supporting People team will use Everyday Language Solutions, a local translation and interpretation service.

1.16 Complaints and Comments

Dealing with comments, commendations and complaints efficiently and

effectively is an important aspect of our service user involvement strategy. The Supporting People team welcomes complaints, comments and commendations as an important aspect of feedback from providers, service users and stakeholders and utilises it to improve our services and culture. We are committed to responding to comments, commendations and complaints within the Children, Education and Social Care division's Complaints procedure which has been communicated to providers and service users and ensuring Complaints result in improvements to service delivery.

Section 2

2.0 Strategy Development

2.1 Background

This 5-year strategy has been developed with the involvement of all local partners including local providers. In specific areas, including older people, young people at risk, people with learning disabilities and women fleeing domestic violence the views of service users have also been taken into account. This is the first formal strategy following the publication in September 2002 of the Shadow Strategy. The ODPM require 5-year strategies to be submitted for approval by the end of March 2005. As an "Excellent" Local Authority, Stockton Borough Council is not required to submit this strategy for approval, however it is our intention to do so as we see the document as key to our forward planning.

2.2 Learning from our Shadow Strategy

Since the Shadow Strategy was published in September 2002 we have made significant progress on the recommendations made following a review of the document by the ODPM. At the time the following issues were identified that needed to be considered further:

- Focus in more detail on Cross Authority issues;
- Set a robust service review programme methodology;
- Undertake more thorough contingency planning.

Each of these areas of work have now been considered in detail and evidence will be found within this strategy of the work undertaken.

The development of the strategy has been led by the Supporting People team who have reviewed the strategic planning process looking at needs and supply analysis, the identification of service gaps / development of priority areas and the intended consultation process.

The strategy has been developed to ensure it links into the Community Plan, Housing Strategy, Homelessness Strategy, and Local Delivery Plans. In addition Supporting People has been included in discussions about the young persons accommodation strategy, learning disabilities housing strategy, older people's accommodation strategy and the development of Extra Care services, accommodation services for drug users, and supported tenancies for young people.

The 5-year strategy is a long-term, ambitious but achievable plan of how supported housing will develop within the Borough.

This Strategy focuses on the following vulnerable clients groups in Stockton-on-Tees:

- Older people
- People with learning disabilities
- People with physical and sensory disability
- People with mental health problems
- Teenage parents
- Young offenders
- Families with support needs
- Young people leaving care
- Travellers
- Asylum seekers and refugees
- People at risk of homelessness
- People with drug and alcohol dependency
- Women fleeing domestic violence
- People previously imprisoned or at risk of offending
- HIV/Aids

Delivering support services to vulnerable people requires strategic thinking at all levels. A number of national, regional and local factors are driving forward change, influencing the way we deliver services.

2.3 Supply Analysis

Mapping the supply of support services funded through supporting people provides the essential data required to be matched against both the current and future demand, the findings of which underpin the five-year strategy. Supply mapping needs to be more than just a building count; it needs to audit current provision and any planned schemes currently in development.

The Charts below detail the position within the Borough of Stockton-on-Tees, by client group as at 31.03.2004 and focuses on the number of SP funded services provided, the number of households receiving SP funded support services, and the average gross unit costs.

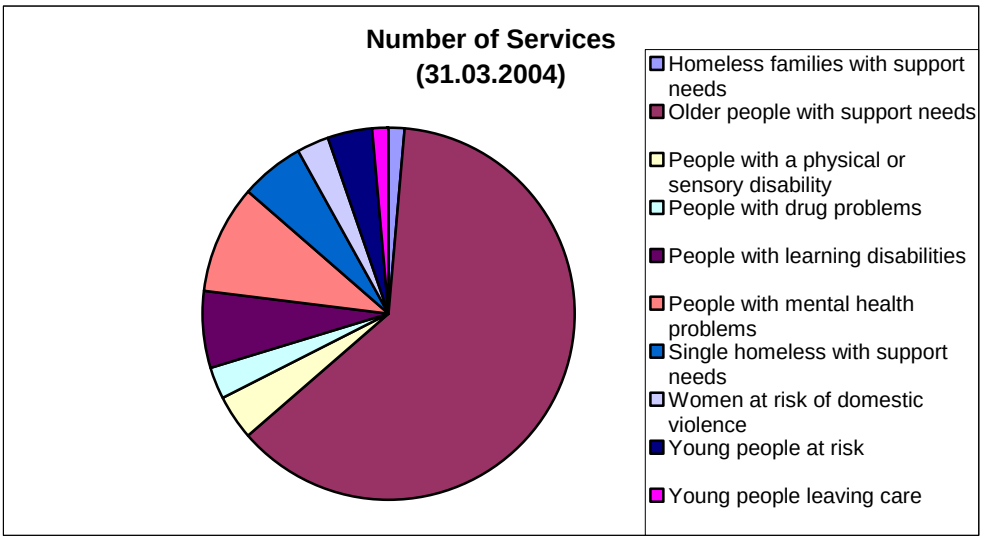
2.4 Client Group Summary as at 31.03.04

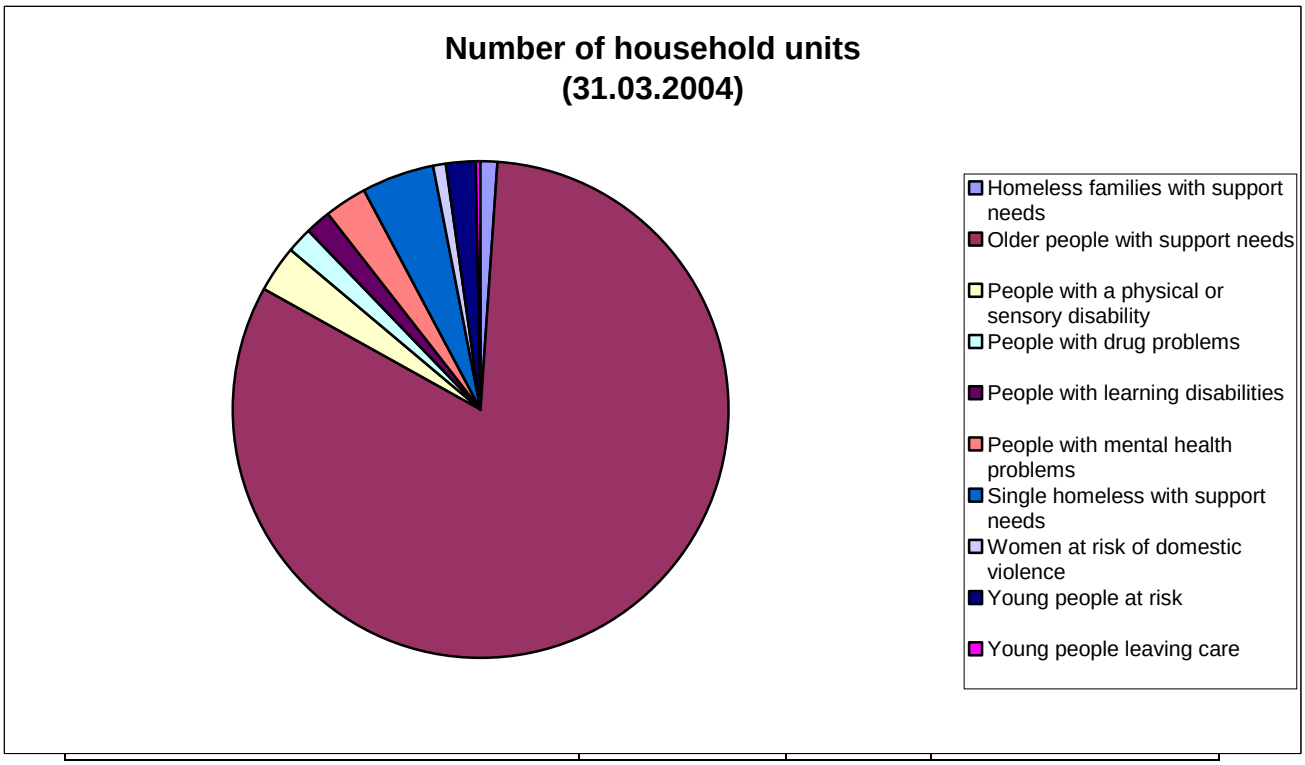
This first chart shows the relative proportion of services within each client group for both accommodation based and floating support services but excluding community alarm services. By far the largest number of services are for older people, followed by people with a mental health problem and people with learning disabilities.

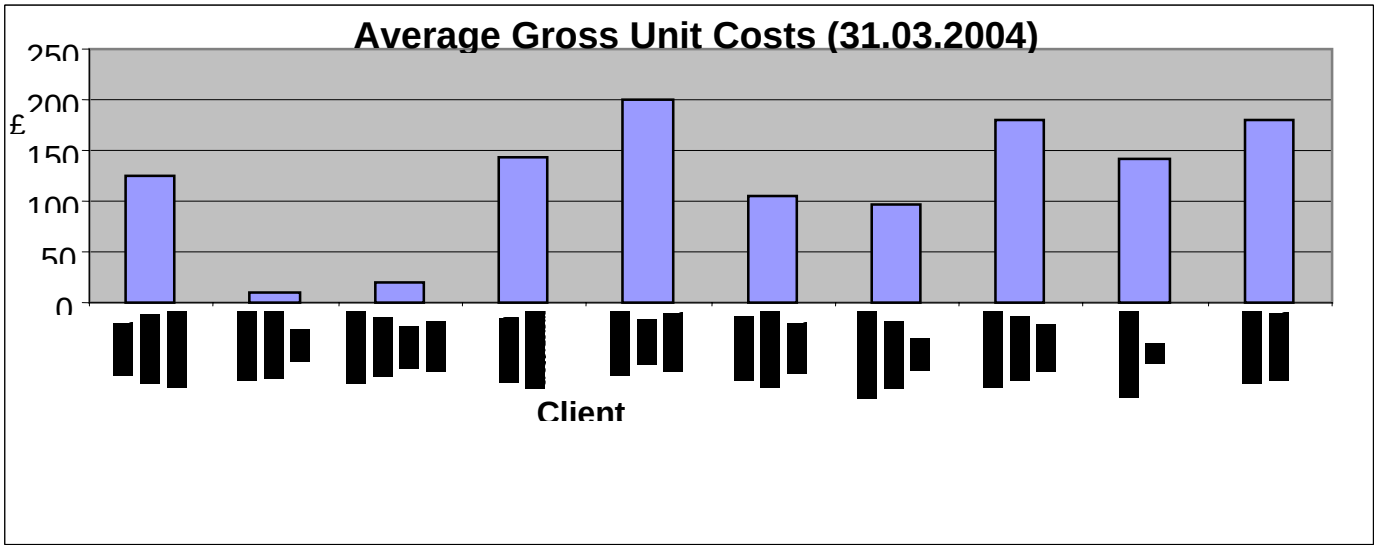
The second chart shows the relative proportion of household units, again showing that the largest group of clients is older people but this time followed by single homeless people.

The final chart shows the average unit costs for each of the client groups. Here we can see that older people cost the least amount per

unit, whilst people with a learning disability have the highest unit cost, followed by women fleeing domestic violence and young people leaving care.







2.5 Gap Analysis

A supply analysis has been undertaken in order to determine supply, needs and gaps in service. Research has been undertaken on the needs and demands of all client groups using census 2001 data, national information and local data identifying housing support needs from the Supporting People team, Service Development Team (a joint PCT & social services commissioning team), housing systems, Probation Service, criminal justice intervention programme, Community Safety Team and Drug Action Team. Where possible information has been analysed to develop a profile of current and potential service users, over five years. Existing research data[8] on housing support needs has been used to identify gaps.

The development of this needs analysis has involved discussion with commissioning managers, key stakeholders and desk based research. Further details of the outcomes are featured in **Appendix 1 - Client Group Analysis.**

Detailed mapping of existing housing support in Stockton-on-Tees has been carried out. This identified 31 support providers, providing 74 support services through 1,686 units of accommodation and 3,500 community alarms units.

The outcomes of this mapping are detailed below (Sections 2.6 – 2.17). We have taken each of the main client groups and looked specifically at current supply, costs, and the research available to us along with strategic analysis and connections with other strategies, gaps in current provision and the Closing the Gap/Required Service Development.

2.6 Older People With Support Needs

2.6.1 Current Supply

There are 1,348 units of supported accommodation for older people in 45 separate services within the Borough. This is broken down into 28 sheltered housing schemes for older people (Cat 2 – accommodation with a warden & alarm service) (1012 units) and 14 schemes of supported housing (shared or self contained, Cat 1 – alarm service only) (283 units) and three almshouses (53 units). There is also one floating support service for older people providing 34 units of support. In addition there are a small but significant number of older homeless men (50+) living in hostel accommodation classed as short stay.

2.6.2 Costs

Older People's services	Average weekly unit cost
Sheltered housing	£10.87
Supported housing (shared or	£3.32

[8] Needs Analysis Report, Centre for Social and Policy Research, University of Teesside 2003

self contained)	
Almshouses	£6.20
Floating support service	£63.55.

2.6.3 Research, strategic analysis and connections

Older people are the biggest group requiring support. ***The population projections of older people aged 75+ show a steady increase in numbers with the 60 - 75 age group also expecting to rise over the next 16 years. These projections mean that in 2021 the national population over 60 years of age could stand at 25.5%.*** The current total older population in Stockton-on-Tees stands at 69,449 (38.9%) showing a higher than average older population within the Borough. There is a very low BME older population in the Borough.

A key action for this client group is to re-focus independent sector provision away from residential and nursing care and towards care at home (including links to Supporting People)[9].

It is increasingly recognised that the quality of existing older persons' stock does not meet the demands / aspirations of today. The provision of practical support and financial resources to assist with maintaining properties needs to be expanded to meet the anticipated increase in demand. Practical support through Home Improvement Agencies will be needed to meet this agenda. Work in this area will need to be explored as part of the future work programme.

The Council has been undertaking a stock options appraisal of their sheltered housing within the Borough. In addition work has been commissioned by the Council to undertake an older persons accommodation needs analysis and this will be developed into a long-term housing strategy.

2.6.4 Gaps in Provision

The Older Persons research (Accommodation Strategy for older people)[10] has identified a shortage of suitable accommodation for older people with dementia; extra care and floating support. Commissioning of new Extra Care housing as an alternative to residential care is already a top priority with two services with a total of 98 units already in the process of being commissioned. We are also developing our thinking on assistive electronic technology and the development of an independent Home Improvement Agency to complement the statutory service provided by Stockton Borough Council, developing opportunities for owner-occupiers to access loans and equity release products.

2.6.5 Closing the Gap / Required Service Development

- Additional Extra Care services in existing sheltered housing schemes – up to 220 units of rented accommodation along with an additional 100 units for outright sale or shared ownership.
- The development of 200 units of floating support over a 3-year period.

[9] North Tees Primary Care Trust and Stockton Health and Social Care – Draft Joint Commissioning Strategy; 2004

[10] Older People's Accommodation Strategy, Peter Fletcher Associates, Feb 2005

- The potential development of a Home Improvement Agency.
- Explore advances in electronic assistive technology in partnership with the Community Safety agenda in order to enhance service provision across all tenures and types of stock.
- Undertake further needs mapping for older people within BME groups
- Address the needs of older homeless men by exploring the possibility of long-stay supported housing.

2.7 Homeless Families And Single Homeless With Support Needs

2.7.1 Current Supply

There are four hostels for homeless people within the Borough, providing a total of 97 units of accommodation. One Registered Housing Association (RSL) hostel provides accommodation for homeless families (18 units) and another hostel in the voluntary sector provides accommodation for single men (32 units). Stockton Borough Council has recently opened new hostel accommodation in partnership with the private sector and currently manages two hostels (47 units).

2.7.2 Costs

Homeless services	Average weekly unit cost
Homeless families with support needs	£125.50
Homeless single people with support needs	£51.11

2.7.3 Research, strategic analysis and connections

The Government set guidelines for local authorities dictating that no households with children (or pregnant women) are to be placed in bed and breakfast accommodation unless it is an emergency and even then, not for more than 6 weeks.

There are current housing shortages within the Borough due to:

- Stock rationalisation – decanting of major housing regeneration schemes at Mandale and Hardwick has led to shortage of suitable council properties for homeless people.
- Right to Buy take up 300% increase in 2003/04
- Modernisation works have increased tenant satisfaction and therefore reduced tenancy turnover.
- Private landlords are selling up to release equity – making families homeless.

The lack of opportunities for permanent housing can ‘block’ supported housing units with people who have nowhere to move onto, which may in turn result in others being denied access to the accommodation.

The lack of incentive for people to move onto alternative accommodation is an identified problem within the homeless service for single men.

The Homelessness Strategy 2003-2008 recognised the current facilities available to accommodate homeless people on a temporary basis are

inadequate and inappropriate in responding to the complex needs of the majority of the people accessing services.
Recent data from the Council's Homelessness section for 2003/2004 shows that 675 people were accepted as having a priority need by the Local Authority. Of these 97 were classified as fleeing domestic violence and 57 identified as having a mental health problem. The figures for 2004/05 show an increase to 132 (26.5%) and 65 (12.3%) respectively.
Homelessness amongst BME groups is over represented within the Borough. Six (6%) of single applicants for homelessness services and 8.5% of families were from a BME group.
Local research into cases of repeat homelessness indicated a cost of £135k covering 50 cases (£2,700 / case).

The Probation service have indicated that in 2004/05 there are up to 650 people within the Borough known to be offenders. Of this a small minority are in custody, however the majority are living in the community. Of this group 70% (455) have problems retaining their accommodation.

There is a need for different types of support services to be made available in response to the wide spectrum of support needed by many homeless people. Often the needs of those presenting as homeless are complicated by drug and alcohol problems, mental health problems or a combination of these factors. There is recognition of the need to address the issues surrounding temporary accommodation for priority need groups (women and families experiencing domestic violence, vulnerable young people, ex-offenders & pregnant teenagers), developing further preventative floating support services and also the need to develop specialist services for homeless people with problems such as drug and alcohol dependencies.

2.7.4 Gaps in Provision

- Lack of permanent housing options for single homeless people currently in short term supported housing schemes
- Lack of preventative floating support services for families at risk before they become homeless
- Lack of a resettlement service linked to the homeless hostel for single men
- No specific services for BME groups that are homeless
- Lack of specialist services for homeless people, (including offenders) with substance misuse and mental health problems

2.7.5 Closing the Gap / Required Service Development

- Remodel / re-classify the homeless hostel for single homeless to accurately reflect the fact that it accommodates single homeless men over the age of 25 whom have an alcohol problem.
- Develop a resettlement service linked to the homeless hostel for single men
- Develop permanent housing options for single people and families currently in short term supported housing schemes.

- Develop preventative floating support services for families and people with offender, substance misuse and mental health problems before they become homeless.

2.8 People With Substance Misuse Problems

2.8.1 Current Supply

In the Borough there is one 15-unit accommodation based service for people with a substance misuse problem. This provides 24-hour support cover with one waking member of staff at night. In addition there is a 16-place intensive floating support service with additional places (6) funded by Community Safety.

2.8.2 Costs

Substance misuse	Average weekly unit cost
Accommodation based service	£149.32
Intensive floating support service	£215.16

2.8.3 Research, strategic analysis and connections

There are a number of expected benefits for the Government in enabling housing related support to people who misuse drugs especially in the areas of homelessness and crime reduction. Other benefits that are more difficult to quantify or value are:

- Improved quality of life
- Decreased anti-social behaviour
- Improved prospects for employment
- Increased likelihood of completing treatment programme
- Decreased suicide levels.

It is acknowledged in the Drug Action Team that the process of seeking help reaches the most chaotic, the youngest and most excluded last. The current policy focuses on vulnerable “at risk” young people but this may need broadening slightly to take account of those at risk who are from more affluent backgrounds but are no longer able to remain independent or maintain their life style.

Alcohol abuse is an increasing problem especially among young people and women and is known to be a bigger problem than drug use among homeless people. This is especially so in the North East where alcohol consumption in both men and women is higher than the national average and male consumption exceeded the national average by 15%. It was also noted that nearly half the people being treated in drug services are also drinking at excessive levels; 50% of rough sleepers are alcohol reliant (as opposed to 20% who are drug users) and between 30% and 50% of rough sleepers have serious mental health problems. There is also a problem with older people (65+) with 15% of men and 5% of

women drinking alcohol over the recommended limits. This late onset drinking is often associated with retirement, bereavement and/or mental illness. There is also a relationship with mental illness as heavy drinking is closely linked with psychiatric morbidity including clinical depression.

2.8.4 Gaps in Provision

The findings of the University of Teesside needs analysis recommend that a minimum of 43 units of supported accommodation / floating support places are needed locally. There are already plans and capital funding to develop an additional 12 units of accommodation based specialised support for ex-drug users. When this facility is operational (2006) Stockton would achieve the recommended level of supported housing provision. However recent 2001 census data indicates that during the next five years Stockton-on-Tees will see an increase of 13.5% in the population aged between 16-24 years, this is almost three times the national average. This may have a follow on effect in terms of drug user numbers rising and homelessness amongst young people at risk.

2.8.5 Closing the Gap / Required Service Development

- Develop a monitoring system with the Council's Homelessness Department to identify number of homeless people with drug and alcohol problems.
- Develop systems for longer term monitoring of existing schemes to assess the success rate of differing housing provision.
- Develop appropriate move on accommodation linked to the new drug scheme.
- Develop close links with key agencies i.e. DAT, Community Safety, etc. to monitor future need.
- Ensure all services have in place a fair access policy regarding Black and Minority Ethnic Groups.
- Research need for services for people who misuse alcohol.

2.9 People With Learning Disabilities

2.9.1 Current Supply

There are currently five accommodation schemes providing 28 units of support for people with learning disabilities. One scheme is a registered residential care home (six units) but receives SP funding as it received SHMG funding from the Housing Corporation prior to the SP programme starting. The remaining four are supported housing schemes provided by three different providers. There are no floating support services for people with a learning disability.

2.9.2 Costs

Learning disability	Average weekly unit cost
Residential care scheme	£67.76
Supported housing	£343.29

2.9.3 Research, strategic analysis and connections

- The Valuing People White Paper estimated that there are:
- 210,000 people with severe and profound learning disabilities. (65,000 children and young people, 120,000 adults of working age and 25,000 older people.)
- 1.2 million people with mild/moderate learning disabilities. (25 per 1000 population.); although recognising that precise figures are not available.

Based on the prevalence rate there could be around 4,460 people living in Stockton-on-Tees with a mild to moderate learning disability.

Information from the Learning Disability service indicates that there 357 adults with learning disabilities known to the statutory services within the Borough. There are no figures available for those who have been assessed as having a learning disability but who do not currently require assistance. Within this figure are a number of people that Children, Education and Social Care services are involved with that originally come from Stockton-on-Tees, but are currently placed out of the Borough.

There are 66 people from Stockton-on-Tees with a learning disability in residential placements. All these placements have been considered regarding the potential for supported living. There are approximately 15 people who could move to a supported living environment from residential care. There are six people who will be moving into a supported living scheme from residential care placements during 2005. Further work is being undertaken in respect of people living at home, particularly those with older carers. To support this work a post of Supported Living Officer is about to be recruited to. The Officer's role is to focus on enabling supported living, maximizing support and benefit entitlement.

The closure of Aycliffe Hospital, Earls House in County Durham and Northgate and Prudhoe Hospital in Northumberland and the subsequent resettlement of most long stay residents back into Stockton-on-Tees will result in more people with a learning disability needing specialist accommodation and support.

In addition to people with learning disabilities in either residential care or hospital settings attention has to be given to:

- Young People with Learning Disabilities – for example, those leaving long-term education, living at home with parents, etc.
- People with learning disabilities in care homes/leaving long stay hospitals/sheltered housing that want to live independently
- People who are the responsibility of Stockton-on-Tees Health & Social Care service, who live outside the Borough requiring supported accommodation and wish to return to be near to family
- Older people with a learning disability who present with a dementia

related support need.

People with a learning disability often need mainstream accommodation but there is a limited supply of affordable homes that are suitably adapted to also meet the needs of people with a physical disability. There is also a need for more specialist accommodation to meet their needs.

The Learning Disabilities Housing Action Plan has identified that more information needs to be available to people to enable more choice and awareness of housing options in an accessible format. Closer working links have been made with the Council's Housing Department and RSL's in relation to information sharing and training. The Action Plan will be used to inform the development of a full housing strategy for people with learning disabilities. It is likely the housing strategy will identify the possible range of supported housing options along with identifying such priorities as "providing more self contained accommodation" and "developing short term floating support specifically to address the needs of people living within the community with a learning disability and/or complex needs".

2.9.4 Gaps in provision

- Accommodation in the private rent & owner-occupier sector (Owner occupation can encompass shared ownership, co-ownership, Trust ownership, using parental property or equity, out right ownership, joint ownership between parents and children, Do-it-yourself shared ownership for disabled people.) There is an Assertive Outreach service within the Borough to manage the support and care of people with complex needs which is helping to prevent hospital admissions and the breakdown of other services. However there is no low level support available.

2.9.5 Closing the Gap / Required Service Development

- Develop a housing strategy for people with learning disabilities
- Develop short term floating support for people with a learning disability and/or complex needs
- Develop appropriate accommodation based services for people with a learning disability
- Develop protocols between the Care Management Team and Housing Services to ensure that information and data is shared, when people with learning disabilities are homeless or potentially homeless.

2.10 People With Mental Health Problems

2.10.1 Current Supply

There are four services for people up to 65 years of age with mental health problems providing 31 units of support in accommodation-based services and one service providing 12 units of floating support.

2.10.2 Costs

Mental health problems	Average weekly unit cost
Accommodation-based	£98.29
Floating support	£82.14

2.10.3 Research, strategic analysis and connections

Mental health problems can be devastating, destroying an individual's effective functioning in life, as well as affecting their families and the people surrounding them. People with mental health problems can be of any age and any social background; although a high prevalence of mental health problems is also associated with the following groups:

- People who misuse alcohol or drugs.
- Asylum seekers and refugees.
- Carers.
- Offenders/ex-offenders.
- Military Personnel.
- War veterans.
- People who are or have been homeless.

Some of the major disorders common today include dementia, bipolar disorder, schizophrenia and eating disorders. The majority of people with mental health problems live independently in the community.

The Stockton-on-Tees Joint Investment Plan for 2000-2003 sets out in accordance with the National Service Framework for Mental Health, the key service requirements and strategic goals for improving mental health services in Stockton-on-Tees over the next three years. The Joint Planning system identifies the need for the right accommodation with the right support and flexibility being important in order to cater for service users' individual support requirements, within the community. The need for an "in between" resource between hospital and returning to the community was identified where people could be 'safe' and where they could prepare for moving on into their own home.

Supporting People research[11] identified that given the strong link between deprivation and mental health problems, and Stockton's position in the lower end of the third quartile of the ranking of unitary authorities on the index of multiple deprivation the required supported accommodation is likely to be:

- 218 units of supported accommodation, and
- 60 units of floating support.

However this level of need has since been challenged, based on the definitions of mental health i.e. the continuum from mental illness to a mental health problem, where problems tend to be managed effectively

[11] Needs Analysis Report, Centre for Social and Policy Research, University of Teesside 2003

within the home situation. It is often only necessary to provide support in situations of homelessness or where the individual is unable to receive support from elsewhere. Additionally it is not necessary to define everyone with a mental health problem as vulnerable. In discussion with the Service Development team it is now thought that the number of required units of supported accommodation is much less, probably around 50, with a need for 30 units of floating support.

Mainstream accommodation, with floating support, is thought to be the most appropriate form of intervention, including low-level support during the transition from specialist accommodation or following treatment. Higher level supported accommodation is however advocated in the case of more severe problems and dual diagnosis situations. Specialist accommodation for those in crisis situations, would prevent unnecessary hospitalisation and there are specific gaps in provision identified for people with personality disorders.

Homeless people with mental health problems (particularly those in 25-29 age range) are also very likely to have problems with alcohol misuse, followed by drug problems and offending as common secondary issues. However, 96% of homeless clients with mental health problems leaving homeless sector services go on to situations in which they receive no additional support.

2.10.4 Gaps in provision

Stockton's provision of supported accommodation and floating support falls short of current demand. It is likely that a number of people currently in homelessness/drug and alcohol provision have a secondary diagnosis of mental illness. The Supporting People Team will need to work collaboratively in order to facilitate a joint approach to further needs analysis and service commissioning in partnership with the Mental Health Local Implementation Team, and the Drug Action Team.

2.10.5 Closing the Gap / Required Service Development

- Develop new services to cater for young people aged 16-25 years with mental health problems that are also able to support young people with dual diagnoses.
- Develop a new intensive support service to cater for people leaving long-term rehabilitation units. (The lack of bed spaces within the rehabilitation unit delays discharge from acute hospital beds.) Independent living with intensive support would alleviate this bed blocking.
- Develop services to meet the need for culturally sensitive provision for people from BME communities.
- Develop new partnerships between private landlords and specialist support agencies (including landlords agreeing to provide and maintain accommodation in return for rent guarantees and management of support).

2.11 People With A Physical Or Sensory Disability

2.11.1 Current Supply

There are 50 units of supported accommodation specifically identified for people with a physical disability, provided within three services. Two of the schemes provide a warden service on site (44 units) whilst the physical disability scheme in Hardwick (6 units) developed in 2003 provides floating support. It is important to note however, the vast majority of sheltered housing schemes for older people have wheelchair accessible units within them and also provide support in the form of a warden or manager and alarm system.

2.11.2 Costs

People With A Physical Or Sensory Disability	Average weekly unit cost
Accommodation-based	£19.30

2.11.3 Research, strategic analysis and connections

35,250 people (19.9% of the population) have a 'limiting long term illness', although this may not be a disability, ranking Stockton on Tees 98th out of the total 354 Local Authorities, putting it in the worst 3rd quartile nationally [12]; 1,977 adults aged 18-65 (1.1% of the population) are known to receive services from the Council in relation to their disability or impairment.

The Best Value Review of Services for Physical Disability and Sensory Losses – Stockton-on-Tees Borough Council Improvement Plan 2003-06 identified the need to:

- Develop support to enable people to live at home, including respite care and leisure/education/employment opportunities as well as care at home
- Create more choice in residential care, by developing more supported tenancies
- Develop a planning forum for people with a physical disability, building on the consultation process to date.

In addition the Best Value Review Improvement Plan 2003-06 (2.2 – Needs Identified page 4) achieved its target to develop a supported housing scheme; with the development of the six supported tenancies developed to enable people to move out from, or prevent admission to, long-term residential care.

The growth in use of Disabled Facilities Grant and adaptations to Local Authority stock has increased the numbers of adapted properties in the Borough.

[12] Management Information Unit - SBC

Disabled people face high levels of discrimination - the impact of the built environment on people including housing and housing services is particularly highlighted.

There is a need for accessible housing for a growing population with restricted mobility and physical disability. The provision of "lifetime homes" and the design and accessibility of all new and replacement homes, should allow for easy adaptation for people with physical disabilities.

There is a need to develop services, which empower people with a disability to achieve maximum independence. This could be achieved through additional accommodation based or floating support services.

There is a need to strengthen work with existing service user groups to ensure greater involvement in service review and development.

Some individuals with physical and sensory disabilities need housing support to provide support which specifically relates to overcoming their disability (addressing difficulties presented by their disability). This can range from relatively low level support, probably on a long term basis, for example the provision of a community alarm through to Home Care services funded by the statutory services.

Further investigation is needed to find out more about the specific housing related support needs of people within this client group, which are wider than the need for physical adaptations to property.

Not every person with a physical or sensory disability requires housing related support, many people are able to sustain tenancies and own their homes. Therefore not everyone with a physical disability can be described as vulnerable.

The County Durham and Tees Valley Strategic Health Authority (SHA) have carried out a review of services for people with some form of acquired brain injury and has made recommendations as to how gaps can be filled. It is acknowledged that supported living can be cost effective in maintaining people in their community, but as there are few such services available and few long-term placements locally, individuals are normally placed outside their home area. To address this, PCTs are expected to explore supported living options for people with brain injury at a local level.

2.11.4 Gaps in provision

The actual extent of unmet needs is difficult to ascertain as the true figure for the number of adults who have a physical disability or sensory loss living in the Borough is unclear. Using the University of Teesside Needs Analysis data[13] there is currently an under provision of supported

[13] Needs Analysis Report, Centre for Social and Policy Research, University of Teesside 2003

housing of 70 places for people with a physical disability, however it could be met in a range of ways, not necessarily additional supported housing. New technology is available which will enable people to live independently in the community although more research is needed.

With a significant disabled population there is a need for well signposted services to meet the varying needs of people with a physical disability, and adequate provision planned for changing and growing needs in the future.

2.11.5 Closing the Gap / Required Service Development

- Develop assistive technology
- Develop a tenure blind adaptation advice service able to access funding resources in order to carry out required works (linked to Home Improvement Agency?).
- Undertake detailed investigation into whether there is a need for additional specific supported accommodation / floating support and the level of provision that is required, around people with:
  - Newly acquired disabilities
  - Short term disabilities
  - Young people with disabilities living at home, that would like to live independently
  - Children with disabilities for indications of future provision
  - People inappropriately accommodated in care homes with disabilities
- Audit all supported housing schemes to determine their capacity to accommodate people with physical and sensory disabilities

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2.12 Women At Risk Of Domestic Violence

2.12.1 Current Supply

There are two services for women fleeting domestic violence, one accommodation based refuge (8 units) and one floating resettlement support service (11 units). The overall units were increased in 2005 as an outcome to the review process.

2.12.2 Costs

Women At Risk Of Domestic Violence	Average weekly unit cost
Accommodation-based refuge	£297.82
floating support	£45.03

2.12.3 Research, strategic analysis and connections

The Home Office defines domestic violence as:

'Any violence between current and former partners in an intimate relationship, wherever and whenever the violence occurs. The violence

may include physical, sexual, emotional and financial abuse.'

One in 4 women will experience domestic violence at some point in their lives, and it accounts for 23 per cent of violent crime. Twenty three per cent of women are at risk of domestic violence during pregnancy.

Many women fleeing domestic violence or in violent relationships may have additional support needs, or require specialised support services these can include women who:

- Are from BME communities.
- Have a disability: physical, learning, mental health, sensory impairment or chronic ill health.
- Are either very young or old.
- Have worked in the sex industry.
- Have support needs associated with alcohol and drug misuse.
- Partners are in the armed forces.
- Belong to the travelling community.
- Are lesbian / trans-gender.

"Quality of domestic violence services" (BV176) states that, "One refuge bed space per ten thousand population represents the provision recommended by the Government Select Committee (1997) on domestic violence. All local authorities should be aiming to maximize the number of refuge spaces to meet local needs". This means Stockton-on-Tees should have 18 units.

Stockton's Homelessness Review 2003 identified that:

- Over the last 3 years relationship breakdown relating to violent incidents has been the main reason for applicant households being eligible for assistance, unintentionally homeless and in priority need.
- In 2002/03 this accounted for 21% of those eligible for assistance.

The SP Client Records data (April 2003 to March 2004) which collates information on new clients entering supporting people services has identified that, out of 125 service users entering the Women's Refuge, 12 users identified themselves from BME groups (9.7%). This is a higher proportion than the BME population in Stockton, which is 3.8%.

- Pakistani – 4 clients
- Chinese – 3 clients
- White Irish – 2 clients
- Indian – 1 client
- Other Ethnic Group – 2 clients

2.12.4 Gaps in Provision

The current overall provision of accommodation and floating support (19 units) meets the Government target for Stockton-on-Tees (18 units). However there is a shortage of suitable housing for women wanting to move out of the Refuge, if they are not returning home. This is caused

by factors such as decanting for major regeneration schemes of local authority provision, the lack of low cost ownership and the buoyant market encouraging private landlords to sell properties.

2.12.5 Closing the Gap / Required Service Development

- Develop a range of permanent housing options for women leaving a refuge.
- Link in with Domestic Violence Forum and identify current issues.

2.13 Young People At Risk Including Teenage Parents

2.13.1 Current Supply

There are 36 units of supported accommodation for young people at risk delivered by two services. In addition there are floating support services for 43 young people (including 10 units for teenage parents).

2.13.2 Costs

Young People At Risk Including Teenage Parents	Average weekly unit cost
Accommodation-based	£114.08
Floating support	£63.96

2.13.3 Research, strategic analysis and connections

Young people who have left care or are at risk often have a range of needs that can include drug problems, mental ill health and offending. They have often had traumatic childhoods, chaotic family backgrounds and may have experienced abuse or homelessness. Housing related support services for this client group are important because they enable young people to succeed in tenancies; settled housing often has a positive impact on the other aspects of a young person's life.

Young people are prone to the problem of homelessness, especially amongst those asked to leave home by their parents, often as a result of conflict. These problems are often exacerbated by mental health problems and drug and alcohol use. There needs to be a range of housing options. Floating support to promote independent living, so that young people can retain tenancies and make links with relevant agencies and identify employment opportunities. Higher level support needs require a range of options beyond this, including accommodation with 24 hour support.

Recent census data (2001) indicates that during the next five years Stockton-on-Tees will see an increase of 13.5% of the population aged between 16 – 24 years old, almost three times the national average. This may have a follow on effect in terms of homelessness.

In response to the requirements of the Children (Leaving Care) Act

2000 Stockton's Health & Social Care Leaving Care Team ensures that all young people leaving care have their needs identified and assessed and are given advice and support up to the age of 21. Financial support is provided to those classed as 'relevant children'. (These people are not normally eligible for Supporting People Funding until they are 18 years of age and from then are able to access supported accommodation.) The Supporting People Team is forging partnerships to identify need and access to suitable housing.

'Research tells us that the average age for a child to leave the family home for good is 25, and possibly as late as 29 for young males. And yet we still expect our most vulnerable and least prepared young people to make this huge transition to adult life at the age of 16, 17 or 18, in many cases without the safety net of a family to fall back on'
Bryn Melyn Group Foundation

The absence of support around issues such as substance abuse, relationship breakdown and moving home can mean young people are unable to remain in employment, training or education. Security is of paramount importance rather than location, with sheltered housing being a potential model for future service development for young people. The ability to exercise choice in where young people live (in order to be accommodated in familiar areas, near family and friends) is seen as essential.

Having a system that requires people to wait for accommodation is prohibitive to securing long-term accommodation for young people, as alternative accommodation is often not available. As an alternative direct access accommodation may be necessary. More information needs to be made available for young people as they prepare for independence. Support is needed to develop life skills such as budgeting and managing a home.

An existing floating support / resettlement service for young people in the Billingham area, operated by Community Campus, has recently closed due to the end of single regeneration funding.

On 31 March 2005 Stockton Borough Council had 187 young people in its care, with five of these children living outside the Borough. Of all Looked After children, there were 18 care leavers in 2004/05 (14 in 2003/04). In addition there are 29 looked after children aged 16 and 17 years old (14 males and 15 females).

Information from the Leaving Care team suggests the average number of care leavers will rise in future years to 25 each year, with currently 27 over the age of 15 for whom the authority will need to assist to secure suitable accommodation and support when they reach 18.

Lone Teenage Parents

The incidence of conceptions and pregnancies in teenagers in the borough is high compared to the national average. There are some wards where rates are significantly higher than for the Borough as a whole, these wards are linked to areas of deprivation (the worst being three times higher than the national rate). The majority of teenage births within the borough are in the 16-19 years age group. The birth rate to under 16 year olds is low, and usually in single figures. The conception rate was 52 per 1000 (1998 base rate), which reduced significantly to 38.3 per 1000 in 2001 but increased in 2003 to 51.3 per 1000 (42.1 per 1000 national average).

The majority of teenage parents remain within their family home situation however, during 2001 – 2003, 14 pregnant under 18-years old girls have presented themselves as homeless. There is no specialist supported accommodation specifically for this client group therefore lone teenage parents, who are unable to live at home with family are treated as a priority within the housing service. It was not considered appropriate by the Cross Authority Group to develop a sub-regional supported housing scheme due to the preference from lone teenage mothers to be near to family support links in their own borough. The Stockton-on-Tees Teenage Pregnancy and Parenthood Strategy[14] and Action Plan[15] has identified the need for floating support rather than supported accommodation as a gap in service provision at this time. Discussions with local providers are now taking place regarding the provision of specialist floating support.

Since April 2003 the Supporting People Team have reviewed all the floating support services for young people and have been able to identify additional floating support units specifically providing support to teenage parents. In April 2005 the Supporting People Team concluded negotiations with Tees Valley Housing Association to increase their floating support service with 10 units being specifically identified for teenage parents. The negotiations have created efficiency savings of £39.5k. This increases the number of primary floating support units for teenage parents from two in 2003 to 10 in 2005 (500% increase). In addition other support organisations provide accommodation and support for teenage parents within their services for vulnerable young people.

2.13.4 Gaps in provision

The Children and Young Peoples Strategy Team are currently mapping local provision of all services for children and young people. When this is completed there will be a clearer picture of gaps in service provision to Young People at Risk or Leaving Care.

The Supporting People Team are looking at the future needs of this client group, as part of the follow up work to the Young Persons

[14] The Teenage Pregnancy & Parenthood Strategy. Stockton Borough Council - 2004.
[15] The Teenage Pregnancy & Parenthood Action Plan, Stockton Borough Council - 2005-06

Accommodation Strategy. In particular it will be necessary to ensure that care leavers and those currently coming through the care system, as well as other young people at risk are being monitored. In addition information held within waiting lists for existing accommodation, floating support and supported lodgings will give an indication of need.

2.13.5 Closing the Gap / Required Service Development

- Re-modelling of services to accurately reflect the needs of teenage parents living in supported housing or receiving floating support.
- Develop permanent housing options for young people at risk / leaving care currently in short term supported housing schemes.
- Develop the existing supported lodgings scheme to incorporate young people at risk as well as care leavers.
- Develop provision of supported housing for young BME groups.

2.14 Offenders Or People At Risk Of Offending

Currently there are no Supporting People funded services primarily for this client group in Stockton-on-Tees, although there is a commitment from existing services to assist in meeting their support needs.

2.14.1 Research, strategic analysis and connections

Those at risk of offending or re-offending following a period in prison are defined as:

"All those aged between 16 and 60 whose primary reason for support is related to offending behaviour or a risk of re-offending".

This could include: people who are currently probation clients including those with multiple needs (mental health problems, drug/alcohol misuse) people who are homeless on release from prison or other offender institutions; people moving to supported housing or general needs housing with support/resettlement services; people currently in supported housing through probation; and offenders who are unable to leave NHS secure units or special hospitals due to a lack of suitable facilities.

Reducing Re-offending – The National Action Plan[16] identified that "appropriate and accessible accommodation is the foundation of successful rehabilitation and management of risk of harm to others. Research suggests that addressing severe accommodation problems can make a difference of up to 20% in terms of a reduction in re-offending".

Currently there is no specialist housing provision primarily for offenders in Stockton-on-Tees although one supported housing organisation who provide support to people with drug problems have included offenders as their secondary target client group. The homeless hostels also provide support to offenders within their remit of providing housing

[16] Rehabilitation of Offenders Policy Team, Home Office, 2005

support. The Homelessness Strategy 2003-08 identified in Strategic Objective 5 the need to:

- Improve and develop services for homeless people leaving prison and offender institutions and people leaving hospital who have mental health issues.

The Homelessness Strategy long-term goals were to support:

- Young Offenders, Ex-offenders and people with mental health problems
- Temporary accommodation facilities for substance/drug mis-users (often with a secondary need to support offending behaviour).

Working towards the goal of meeting the needs of offenders the Supporting Team have, since 2003, commissioned two new schemes; a 16 place intensive floating support service for drug users (3 of which are for people with alcohol problems as their primary problem) and a floating support service for 12 young people at risk. There are also plans in 2006 to open an accommodation based hostel for drug users with 12 places (the secondary client group will be offenders).

The National Probation Service, Teesside (Stockton Reintegration data) conducted a Housing Needs analysis of a seven-month period, June 2004 to December 2004 and on that basis projected figures for 2005/06 showing:

- 52 clients would be homeless.
- 84 clients would require support
- 72 clients would have a drug/alcohol problem.
- 92 clients would have a mental health problem.

A research based assessment tool, Offender Assessment System (OASys) developed by the prison and probation services has also compiled data which suggests that out of 98 offenders whom were assessed as having an accommodation need at the start of an Order, 28 were still assessed as having an accommodation need on termination of the Order.

2.14.2 Gaps in provision

Although there are no supported housing services specifically for offenders or people at risk of offending in the Borough it is clear that existing and proposed services provide support services to people who have offended or are at risk of offending.

2.14.3 Closing the Gap / Required Service Development

- Undertake further research into the housing needs of offenders within the borough
- Develop single person supported accommodation able to facilitate reintegration whilst supporting medium to low-level mental illness and/or substance misuse problems.
- Develop flexible tenure-blind floating support services able to support offenders in their own homes as part of a generic floating support

service.

2.15 Gypsies and Travellers

Currently there are no Supporting People funded services for this client group in Stockton-on-Tees, however there is a traveller site managed by Stockton Borough Council.

2.15.1 Research, strategic analysis and connections

Gypsies and other Travellers make up a small proportion of the population and have distinctive cultures, characteristics and accommodation needs. A legal definition is 'persons who wander or travel for the purpose of making or seeking their livelihood (not persons who move from place to place without any connection between their movements and their means of livelihood)[17]. The legal definition is concerned with habitual lifestyle rather than ethnicity but we also need to consider an ethnic definition of a gipsy or traveller. Ethnic gypsies include English Romany Gypsies and members of the Welsh Kale and Scottish Travellers groups. Romany Gypsies were accepted as an ethic group for race relations legislation in 1989. It is also accepted that Irish Travellers have a distinct indigenous origin. Irish Travellers were accepted as an ethnic group for British race relations legislation in August 2000.

Stockton Borough Council manage the Gypsy and Travellers site on Bowesfield Lane. A snap shot survey in 2005 identified 27 plots of which 26 were in use. Most of the residents stay on the site on a permanent basis. To assist with this a bid has recently been made to the ODPM for the stabling of 12 horses.

Residents on the site are not from one specific ethnic group. The older residents tend to refer to themselves as Romany Gypsies whereas the younger people tend to call themselves Travellers. Currently Sure Start staff have contact with some residents of the site in connection with the younger children and parents. There is a regular Gypsy and Traveller Network Meeting with the focus being on home education related issues.

2.15.2 Gaps in provision

There are no Supporting People funded floating or accommodation based supported housing services specifically for gypsies or travellers in the Borough.

2.15.3 Closing the Gap / Required Service Development

- Undertake further research into the housing needs of travellers within the borough.

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[17] Local Authority Gypsy / Traveller Sites in England, Pat Niner, Centre for Urban and Regional Studies, University of Manchester, ODPM, July 2003.

2.16 Asylum Seekers and Refugees

Currently there are no Supporting People funded services for this client group in Stockton-on-Tees.

2.16.1 Research, strategic analysis and connections

An asylum seeker is somebody waiting for their application for 'refugee status' to be assessed by the Government. A refugee[18] is defined as somebody who:

- Has a well-grounded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion;
- Is outside the country they belong to or normally live in;
- Is unable or unwilling to return home through fear of persecution

It is known[19] that these people are affected by:

- Isolation, insecurity and fear
- Reluctance to approach service providers
- Poor access to language support
- Lack of acknowledgement of physical and emotional scars

Approximately 293 people were seeking asylum and living in Stockton-on-Tees in March 2005. This figure is much reduced from the total of approximately 600 in 2004, however it is known that many asylum seekers remain in the Borough when they are given refugee status.

The Council fund an asylum seeker support service employing nine people. There are four support workers, two health visitors, a community nurse and a children's officer. In addition a "Move On" officer has been appointed on a one-year contract for 2005/06. This post has been used to assist 30 people achieve independent living by assisting with benefit claims and obtaining housing.

2.16.2 Gaps in provision

There are no Supporting People funded floating or accommodation based supported housing services specifically for asylum seekers or refugees in the Borough. There is a changing pattern of need.

2.16.3 Closing the Gap / Required Service Development

- Undertake further needs research in cooperation with the Asylum Seekers / Refugees Forum, to identify if there is a need for continued support provision.

2.17 HIV / Aids

Currently there are no Supporting People funded services for this client group in Stockton-on-Tees

[18] 1951 Convention on Refugees

[19] Reflecting the Needs and Concerns of Black and Minority Ethnic Communities in Supporting People, ODPM, 2002

2.17.1 Research, strategic analysis and connections

People with HIV/AIDS have suffered from stigma, prejudice and ignorance since the early 1980's. This has led to many misconceptions as to cause and effect as well as morbidity[20]. People with HIV/AIDS have been identified as one group for whom Supporting People funding to provide support should be made available, to ease the cost of providing services within health care settings. Direct treatment of the primary condition lies with health professionals. The provision of appropriate housing related support should, in most cases, sit alongside this to provide a stable platform for independent living and, through that, a supportive basis for health treatment.

Appropriate examples of housing-related support for people with HIV/AIDS might include:

- Help with developing life skills, such as cooking or budgeting, which are an integral part of living independently in accommodation
- Floating support services – especially relevant to those just coming out from a long and intensive hospital stay.
- General support, such as provided by a warden or community alarm service, to provide confidence that assistance can be called when required. This applies in particular to those in relapse or during periods of high anti-body count.

Nationally there was a 15% increase (total of 35,428) in the number of people receiving HIV related care in 2003 compared to a year earlier[21]. Regionally in the North East there were 542 diagnosed HIV infected patients in 2003. A high percentage of new infections are acquired abroad, especially in Sub-Saharan Africa[22]. Ensuring appropriate housing related support is particularly important in terms of asylum seekers and refugees who may be reluctant to access support services for fears of deportation and refusal of asylum.

2.17.2 Gaps in provision

There are no Supporting People funded floating or accommodation based supported housing services specifically for people with HIV / AIDS in the Borough. There is an unknown pattern of need.

2.17.3 Closing the Gap / Required Service Development

- Undertake further needs research in cooperation with the Service Development Team, to identify if there is a need for specific housing related support provision.

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[20] Supporting People Briefing Note: Housing Related Support for people with HIV/AIDS, ODPM
[21] Survey of Prevalent HIV Infections Diagnosed (SOPHID), 2003
[22] Effective Commissioning of Sexual Health and HIV Services: A Sexual Health and HIV Commissioning Toolkit for Primary Care Trusts and Local Authorities 2003:, DoH

Section 3

3.0 Value for Money

3.1 Service reviews

One of the aims of the Supporting People programme is to improve services for local vulnerable groups making them more responsive to the changing needs and requirements of service users whilst at the same time striving to achieve value for money and best use of limited resources.

In support of this requirement the Administering Authority (Stockton Borough Council), through the Supporting People team is required to undertake formal Service Reviews of all services at least once in the first three-year period (by March 2006). Stockton's Supporting People team has issued guidance[23] as to how these reviews will take place.

The reviews are intended to enable the Administering Authority to determine whether:

- A service is meeting the strategic objectives of the local "SP" programme
- There is continued demand for the service
- The service is performing efficiently and effectively in line with the contract
- The service is providing good quality services which meet the needs of service users and potential users
- It is cost effective.

In addition the organisation providing the service will need to be accredited[24] by the Administering Authority. This is a process that satisfies the authority that the company has a sound business base and operating in an acceptable fashion.

3.2 The Review process

Stockton-on-Tees Supporting People team has, in line with ODPM requirements, developed a programme of reviews between July 2003 and March 2006. The timetable of reviews was planned to take into account a number of factors identified by the ODPM to decide the order of the reviews. These are:

- Services which present a higher risk of not performing to the requirements of the contract or acceptable levels of quality;
- Lack strategic relevance;
- Unlikely to comply with grant conditions i.e. should more properly be paid for from another source;
- Have had recent changes or additions to service provision or cost; or

[23] Reviewing Supporting People Services in Stockton-on-Tees – The Policy; Stockton-on-Tees Supporting People Team, July 2003.
[24] Accreditation Guidance, Stockton-on-Tees Supporting People Team; 2003

- Appear to be high cost.

At the start of the programme the Supporting People team were not aware of any service performing below the requirements of the contract. All services reviewed to March 2005 have been considered to be strategically relevant. Some services have been found to perform to a quality standard below the baseline set within the Quality Assessment Framework[25]. However these services have developed action plans to bring the service up to a satisfactory standard within an acceptable period of time. There are only one or two services which seem to provide a service outside the grant conditions, but as explained in more detail in the next chapter on Charging & Finance there is an issue for "Excellent" authorities regarding eligible welfare services. The Grant Conditions for "Excellent" authorities[26] allow the funding of any "welfare services" as opposed to all other authorities where the Grant can only fund "eligible" welfare services. This led to the decision by the Commissioning and Strategy Group to allow the funding of supported housing services within registered residential care in Stockton-on-Tees.

In developing the review programme it was decided to undertake reviews for short-term services within the first 18 months (July 2003 – September 2004) focusing on those with a high value contract and leaving the reviews of long-term services, especially those for older people, until the second half of the timetable (October 2004 – March 2006). Due to a number of reasons, including resource issues and the need for a thorough understanding of each service, the review programme has fallen behind schedule. The Supporting People Team has recently determined its criteria for assessing Value for Money and will use this to commence negotiations with providers on the required outcomes.

More recent work on the review programme has helped bring the timetable back on track. Additional funding of £31k has been provided by the ODPM to allow the Supporting People Team to put in additional resources. This has allowed for the procurement of a consultant resource to assist with the specific review of community alarm services and for assistance with service user involvement for people with learning disabilities.

[25] QAF – a tool devised by the ODPM for assessing the quality of a supported housing service. It is divided into four (subsequently six) core objectives. There are four scoring criteria D (poor), C (satisfactory), B (good), A (excellent) that identify the standard achieved against each objective.
[26] Supporting People Programme Grant for Excellent Authorities – ODPM, 2.4.04; Supporting People Programme Grant (for Non-Excellent Authorities), ODPM 2.4.04

Programme of Reviews (2003 – 2006)

Client Group	No of Providers	No of Services	No of Reviews Started since April 2003	Outcome of Reviews
Older people – including older people with support needs and older people with mental health problems or dementia	15	36	20	9 reviews completed; 11 ongoing reviews; Year Three – 16 reviews to start
Homeless people – including single homeless people, homeless families and rough sleepers	3	4	4	4 reviews completed; new contracts agreed or amended; three services require remodeling
Substance misusers – including people with drug problems and people with alcohol problems	2	2	2	2 reviews completed; 1 short-term contract agreed + remodeling of service
People with Learning Disabilities	4	5	0	5 reviews planned for Year 3
People with Mental Health Problems	4	4	2	1 review completed – remodeled service; 1 ongoing review; 2 reviews to commence in Year 3
People with a physical or sensory disability	2	3	0	3 reviews to commence in Year 3
Women at risk of domestic violence	1	2	2	2 reviews completed; remodeled service increasing number of units (+3)

Young People – including young people at risk, young people leaving care and teenage parents	4	5	4	4 reviews completed; 1 review to commence in Year 3
Generic – community alarm service	1	1	0	1 review to commence in Year 3

The Supporting People Team have 62 reviews to carry out in a three-year period. Up to March 2005 22 service reviews had been completed and approved by the Commissioning Body.

3.3 Determining Value for Money

Assessing the value of a support service takes into account its contribution to meeting desirable outcomes such as:

- Contribution to relevant strategies
- Meeting identified demand
- Delivering good quality services
- Targeting people in need
- Meeting aims and objectives
- Satisfying service users and stakeholders
- Financial savings (e.g. preventing the escalation of need, reducing cost pressures for linked statutory provision)
- Meeting contractual obligations
- Intended Benefits (Outcomes) for Service Users

The relevant cost of a service is determined by the Value for Money (VFM) criteria. The process of assessing value for money in Stockton-on-Tees is set out in guidance published in December 2004, approved by the Commissioning and Strategy Group[27]. This explains that Government guidance requires a basic VFM assessment as part of the review process[28]. In Stockton, as part of the basic assessment process, it is intended to use the most recently published ODPM National and Regional data for the different user groups. This information has its limitations as it is based on data available on 31st March 2003. This data identifies upper and lower quartiles and allows comparison of weekly unit costs per service user for similar services.

[27] Assessing Value for Money in Supporting People Services, Stockton Supporting People Team, December 2004.
[28] Part II Review Process, ODPM

As well as using this data the Supporting People Team intend gathering relative cost and value benchmarks across local services and with other administering authorities. To this end Stockton-on-Tees is a member of a "similar family" cross authority Benchmarking group. The authorities that belong to the group have been identified as having similar populations/demographics and similar levels of Supporting People grant funding monies. Belonging to this group helps in the process of identifying benchmarks on a cross-regional basis.

When assessing VFM it is important that consideration is given to the holistic value of the service. VFM assessments should not be stand alone judgments, which only focus on price. Considering VFM requires looking at the quality of services as well as costs and how they contribute to the outcomes of the service. Specific budgets will be examined to determine eligibility criteria of the support service and to ensure non-support costs are appropriately allocated (covering building and tenancy management), staff costs, overheads and void levels are at an acceptable level.

In Stockton-on-Tees it has been agreed that the Supporting People programme will generally pay for no more than 16 hours of support per unit per week[29]. This is because the aim of Supporting People is to bring about independence through providing low to medium levels of support. Any client group or scheme requiring more support hours than this should be looking to other statutory and government agencies such as the Council's Children, Education and Social Care division and the Probation Service in order to gain extra funding for their particular client group. The Stockton-on-Tees Supporting People programme is however committed to work in partnership with providers and statutory agencies in order to maximise funding for the full benefit of any schemes that are identified as requiring additional support for service users.

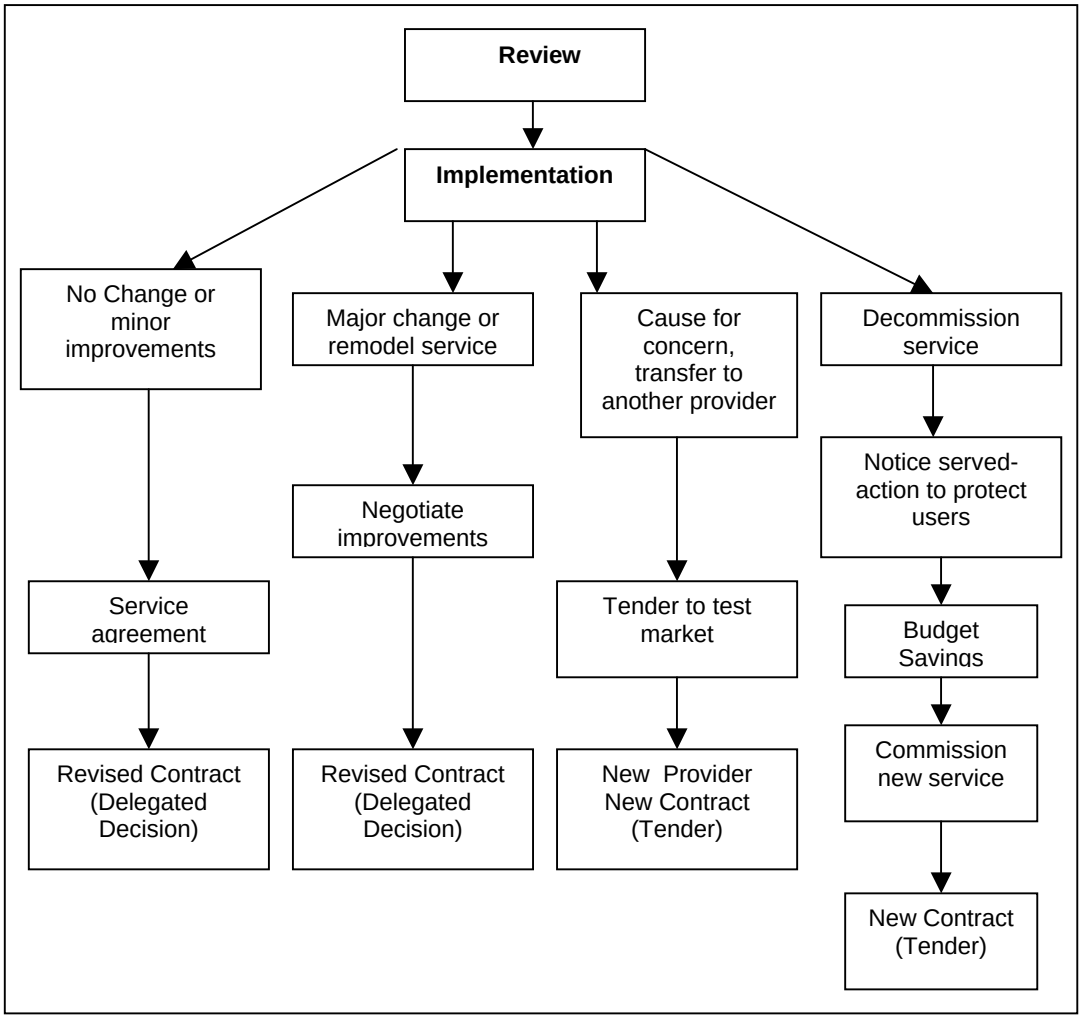
3.4 Outcomes of reviews

There are a number of possible outcomes to a review:

- Re-commission the service in its present form with no changes;
- Renew the contract with the same provider but make changes to the service;
- Renew the contract with the same provider and develop an action plan – possibly linked to a short term contract to achieve change;
- Major changes or remodelling of service with the same provider;
- Transfer the service to another provider;
- Decommission the service; or
- Commission a new service using resources released from a decommissioned service.

[29] Assessing Value for Money in Supporting People Services, Stockton Supporting People Team, December 2004.

Diagram 2 – The Review Outcomes



The outcome of the review programme is intended to create efficiency savings to meet tight budgetary targets set by the ODPM. Administering Authorities were required to make overall savings of 2.5% in both the first and second year of the programme and a further saving for Stockton-on-Tees of 0.9% has been announced for 2005/06. It seems unlikely that the reviews within Stockton-on-Tees will easily identify the savings to be achieved without expecting providers to reduce their aims and objectives (and therefore reduce the quality standards of the service). Another approach is to reduce the number of service users being provided with a service. This is more easily achieved with floating support services where the number of service users can be varied, as opposed to accommodation based services where cost effectiveness is linked to the number of available units.

3.5 Performance monitoring

Based on the process of collecting quarterly performance information[30] [Key Performance Indicators (KPI's) and Service Performance Indicators (SPI's)] from providers it is known that the majority of services in the first half of 2004/05 were meeting their targets. The main shortfall is within the staffing indicator where 11 out of 55 schemes (20%) fell short of the 90% target[31]. The majority were sheltered housing schemes for older people where the warden or scheme manager was not replaced when absent due to sickness. This is an area where further investigation is taking place. Availability of the service[32] was the other area where the 90% target was not achieved. Two sheltered housing schemes had accommodation out of commission for part of the six month period, one of which later closed.

3.6 Commissioning services

The approach being taken over the next five years (2005-2010) is to develop strategically commissioned services, taking into account that the Supporting People programme is making the transition from legacy funded services towards long term contractual arrangements. However, in recognition of the pace of change within Supporting People the commissioning framework will be reviewed on an annual basis through the Annual Plan.

This Supporting People Strategy and its Commissioning Plan (within the Annual Plan) set out <u>what</u> services will need to be commissioned, remodelled or decommissioned. The Commissioning Guidance[33] sets out <u>how</u> this commissioning and procurement will take place.

Commissioning needs to be an evidence-based, auditable and transparent process. The process of commissioning, how commissioning decisions are made and service contracts awarded needs to be fully understood by all Supporting People stakeholders. In order to achieve this the commissioning process needs to:

- be open, transparent and fair
- be fully auditable, accountable and legal
- have the confidence of the Local Authority, Commissioning Body, service users, providers and the wider partnership.
- be well planned and managed, with a clear direction of travel
- enable participation by small as well as larger suppliers of SP services

All key stakeholders will need to be involved in the commissioning process, with the understanding that commissioning decisions rest with Stockton-on-Tees Supporting People Commissioning Body, in

[30] Performance Indicators – availability, utilisation, throughputs, staff team input and departures (short & long term).
[31] PI Staffing target –staff available at the scheme for at least 90% of time (taking into account sickness, holidays, etc.)
[32] PI Availability target – service available for at least 90% of time (measuring number of units not available to be used)
[33] Commissioning Guidance, Stockton Borough Council, December 2004

partnership with the local authority, which is responsible for budgetary management and financial decisions.

3.7 Procurement

Procurement is the operational activity, set within the context of commissioning, of buying services from a third party supplier under a legally binding contract. All Supporting People services are procured from providers in this manner. Supporting People funding is not used to provide grants or grant aid to organisations.

The Council's in-house Supporting People services are undergoing the same rigorous process both in terms of service review and procurement options appraisal as all other services. The presumption is that all Council services must be periodically exposed to 'genuine competitive pressures' unless there are compelling reasons to recommend a different course of action. The same principle is therefore to be applied to all services, irrespective of which organisation provides them. The only exception to the approach set out in this framework is sole traders.

The procurement process has five main stages:

1. Pre-procurement
2. Invitation of tenders/quotations
3. Evaluation of tenders/quotations
4. Acceptance and award
5. Monitoring of performance

Stockton-on-Tees Commissioning Guidance[34] covers the first two stages outlined above and will also cover the last stage on monitoring contract performance. Stages 3 and 4 are covered within the Council's contract procedure rules and guidance.[35]

3.8 Capacity building

Capacity building is an integral component of the modern approach to public service delivery. Central Government has challenged local government to achieve greater efficiency in the delivery of local services. The ODPM have introduced a capacity building initiative to assist Administering Authorities shape their thinking about delivering improvements to Supporting People services required by the Government[36]. This will be achieved both nationally by raising the profile and raising awareness of the cost benefits of working alongside broader (social care, primary care and probation) initiatives, and locally through examples of how Supporting People contributes to the corporate objectives. Only in time will examples of good practice become available to assist stakeholders understand the cost benefits of providing services in partnership and challenge some of the paradigms currently in place. The nine Value Improvements Projects (VIPs) devised specifically for the Supporting People programme are operating across each of the English

[34] Commissioning and Procurement Guidance, Stockton Borough Council, December 2004
[35] Contract Standing Orders, Stockton Borough Council, 2004
[36] Capacity Building – What Does It Mean For Me? ODPM, December 2004.

regions over the next 18 months (to March 2006). These projects will explore opportunities to deliver improvements in the operation of the programme develop good practice and deliver value for money based savings.

3.9 Efficiency Gains

In the past two years the Government have introduced a new efficiency agenda[37] detailing expectations of local authorities in relation to delivering efficiency gains. This efficiency agenda is about improving productivity – getting more from the same resource, or achieving the same results for less resource. The Spending Review 2004 identified the need for local government to achieve considerable efficiency gains. Over the next three years (2005 – 08), each local authority is expected to achieve 2.5% per annum efficiency gains.

Since the Supporting People programme started two years ago we have had a number of opportunities to improve efficiency by applying good practice in the procurement and management of existing services. We have been able to negotiate the renewal of contracts with providers and in so doing have been able to demonstrate significant efficiency gains which are being used to assist Stockton Borough Council achieve its target.

In total £258,905 has been identified as efficiency gains in 2004/05 within the Supporting People programme. This has been achieved through the process of renegotiating contracts based on re-tendering for services (£10k saving), increasing the capacity of services by increasing the number of units of support by 50 units (£237,785 savings) and from the closure of existing services where there was low demand (66 units) to enable savings to be re-invested elsewhere (£21,120 savings).

[37] The National Procurement Strategy for Local Government, 2003

Section 4

4.0 Charging and Finance

Introduction

The following section sets out the background to the Supporting People programme and details the funding arrangements both before and after the programme was implemented. It explains how the Government intends reallocating the funding through the introduction of a distribution formula in 2005 and what this means for Stockton-on-Tees. The section goes onto explore the contracting arrangements between providers and the Administering Authority. It details the issues relating to Stockton Borough Council being designated an "Excellent" local authority and how this is reflected in the grant conditions affecting the options available for spending the grant. There is information on the contracting arrangements with providers, arrangements for charging through the block subsidy contract and the impact of expenditure and savings over the initial two years of the programme.

4.1 Background

Prior to Supporting People, housing-related support was funded from a range of sources including housing benefit. By the end of the 1990's a series of court cases determined that mainstream housing benefit should not be used to cover the cost of housing-related support. The action taken by the Government to ensure that such support was legitimately funded and to maintain stability within the sector created the Transitional Housing Benefit scheme (THBS), which operated from the year 2000. This subsequently led, three years later, to the Supporting People programme, which commenced in April 2003.

The Government's reasons for developing the Supporting People programme was influenced by three factors:

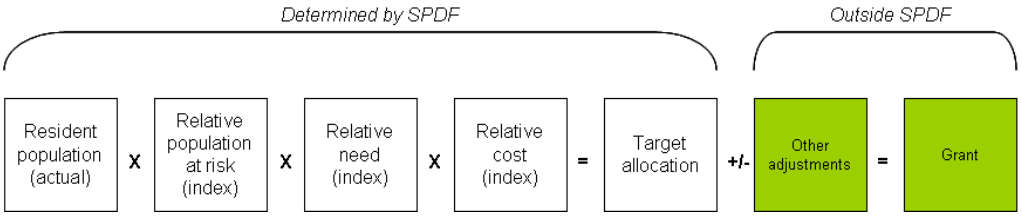
- Belief that there was considerable unmet need in the sector,
- In the long term, funding should move to a cash-limited basis in order to manage unmet need,
- Belief that the quality of service delivery and management should be improved.

4.2 Revised Distribution of SP Grant

The ODPM are currently debating[38] the option to fundamentally shift the means of funding housing-related support from 2006. They are developing a formula model that will determine how the overall grant allocation will be distributed amongst the 150 local authorities in England over the next few years. The proposed formula and criteria are shown below[39]:

[38] Distribution Formula – November 2004 - July 2005.

[39] Briefing Paper: Proposals for developing the Distribution Formula, Matrix / ODPM – September 2004
SPDF = Supporting People Development Formula



It is thought likely that Stockton-on-Tees will receive an increase in grant allocation based on the current low level baseline, the higher than average relative population at risk and the level of need.

The actual amount of grant given will determine the options available for growth in future support services within the Borough.

4.3 Stockton's Supporting People budget allocations 2003 - 2005

The Supporting People grant allocation is paid to Stockton Borough Council in its role of Administering Authority. The Borough Council is therefore responsible for ensuring all grant conditions are complied with and statutory requirements associated with local implementation of the programme are met. Key statutory requirements include agreeing the local Supporting People 5-year strategy, partnership working and the formation of a local multi-agency Commissioning Body and Strategy Group to determine how the grant is used.

Year	Grant Allocation	% Saving built in
2003/04	£2,731,096	- 2.5%
2004/05	£2,778,127(amount includes pipeline funding)	- 2.5%
2005/06	£2,753,375	- 0.89%

4.4 Actual Contracted Expenditure in Stockton-on-Tees

Year	Actual Expenditure	Additional saving achieved
2003/04	£2,676,417	£54,679 – 2.04%
2004/05	£2,426,395	£351,732 – 12.6%* (* estimated)

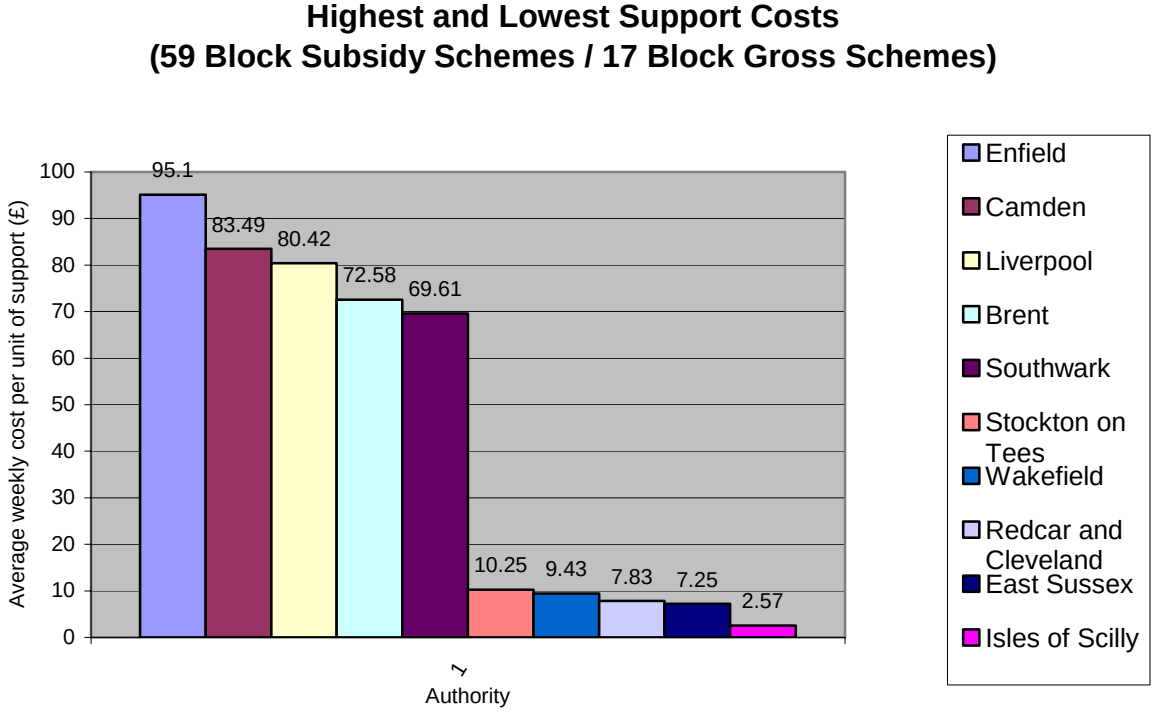
These savings have been achieved outside the three-year programme of reviews currently being conducted. No savings have been identified from the service review process carried out so far, as all services have complied with the VFM guidelines. However it could be argued that the policy of renewing contracts at a value no greater than the cost of the service in April 2003 is a positive outcome especially with a re-negotiated contract period up to March 2008.

Details of the grant allocations in 2004/05 for each of the Supporting People provider organisations are shown in **Appendix 4**.

4.5 Comparisons with other Local Authority areas

The total grant allocation for Stockton-on-Tees is relatively low compared to other local authority areas. In fact Stockton-on-Tees has the 5th lowest average weekly support costs per unit of support (£10.25) for the 150 local authority areas in England. Only Redcar and Cleveland had a lower figure (£7.83) in NE England. In comparison the five highest local authority areas ranged from £95.10 (Enfield) to £69.61 (Southwark).

Graph 1 – Highest & Lowest support costs by LA area



Stockton-on-Tees has a low allocation of Supporting People grant for a number of reasons. Firstly as a result of the current formula which is expected to change. The new formula will hopefully bring with it added resources. Secondly it is known that the North East of England has the lowest level of grant allocation than any other part of the country (5.2%). This is thought in part to be due to the housing benefit factor. Housing Benefit teams in the region, often working together to compare and determine support costs kept Transitional Housing Benefit Scheme (THBS) payments at a lower level than in other parts of the country. In addition staffing costs tend to be lower in the North East than in other parts of the country. With staffing costing between 60 – 70% of the overall scheme costs this allows services to operate at a lower cost than elsewhere in the country.

More locally, support services in Stockton did not totally rely on THBS funding, often receiving funding from alternative sources. The push by

some local authorities to transfer the funding of statutory services into the Supporting People programme did not happen in Stockton-on-Tees. This process, widely known as "cost-shunting" is the reason why the ODPM are scrutinising a number of local authorities and is considered one of the main causes for the rapid increase in SP costs nationally.

4.6 What determines how Supporting People funding should be spent?

The Supporting People grant is paid to local authorities (Administering Authorities) under Section 93 of the Local Government Act 2000. This section of the Act allows grants to be made towards expenditure by:

"…..providing, or contributing to the provision of, such (eligible) welfare services as are determined by the Secretary of State."

The type of service and the amount paid to each authority is outlined in the "Supporting People Grant Directions and Conditions"[40]. The conditions expect the grant to provide housing related support services for vulnerable people, for the purpose of developing that person's capacity to live independently or sustaining their capacity to do so.

Housing related support is about promoting independence by sustaining people in the community. This can be by helping people to avoid homelessness or an undesirable move to an institution. It can be also be about providing immediate refuge to homeless people or those at risk of violence. It entails enabling, reminding or assisting service users to live independently and maintain their accommodation.[41]

There are two variations on the grant conditions dependent on whether the local authority is defined as being an "Excellent" authority[42]. Stockton-on-Tees has been assessed as one of only 27 "Excellent" local authorities and therefore has slightly different grant conditions under which the money is received from the ODPM compared to the majority of local authorities. The grant for "Excellent" local authorities can be used to fund welfare services whilst the fund for "non-excellent" authorities is to be used to fund *eligible* welfare services. This slight variation in the wording creates a major issue; and, dependent on the interpretation, may allow the funding of some non-eligible statutory welfare services. This would reduce the long-term Supporting People fund savings by approx £50,000 / annum.

Action: To determine the interpretation of eligible welfare services to be used in Stockton-on-Tees

[40] Supporting People Programme Grant for Excellent Authorities – ODPM, 2.4.04; Supporting People Programme Grant (for Non-Excellent Authorities), ODPM 2.4.04

[41] Reference to eligible welfare services in Supporting People Programme Grant (for Non-Excellent Authorities), ODPM 2.4.04

[42] Based on the local authority Comprehensive Performance Assessment (CPA) score.

Services not deemed to be eligible for Supporting People funding include:

- Care services which require registration under the Care Standards Act 2000
- Nursing or personal care services
- Services which fulfill a statutory duty by the Administering Authority
- Psychological therapy or programmes of therapeutic counselling
- General Housing Management services
- Services to enforce specific requirements imposed by a Court of Law.

There have been attempts, both locally and regionally to develop shared definitions for different levels of support for benchmarking purposes. In Stockton-on-Tees it is still necessary to create some clarity for providers on eligibility with the current framework (grant conditions and the overall aims of the programme as outlined above) giving a good basis for assessing eligibility of services. It is accepted that there will occasionally be overlaps in the definitions of support and housing management. The overall aims and outcomes of the service should provide the primary criteria for assessing Supporting People eligibility. However a list of what is generally accepted as housing related support tasks is included as a guide for providers and stakeholders - **Appendix 6**.

4.7 Statutory Services

Often people require both personal care and support services to help them live independently within the community. The local authority through the Council's Children, Education and Social Care division has statutory duties under community care legislation to provide personal care. The legal framework does not specify services that must be provided but most local authorities have a "hierarchy of needs" which they use to decide the extent to which there is a responsibility to provide services. There are four levels of need – critical, substantial, moderate and low – and the local authority has to make their policy on what level of need they will provide. Stockton-on-Tees provides services only for those people with "critical" or "substantial need", due to resource limitations. It is accepted that Health and Social Care have fulfilled their statutory duty when it has assessed all people requesting an assessment and have provided services that meet any identified critical or substantial need, in line with the local interpretation of the bands.

Providers could find themselves in a position where they are supporting people whose needs are not "critical" or "substantial" so get no service funding from the Children, Education and Social Care division, but whose needs are great enough to put the tenancy at risk.

The national independent review of Supporting People[43] recommended that it should be commissioners rather than providers who determined appropriate funding for services to meet strategic objectives. Such an approach will enable the Supporting People Commissioning and Strategy Group and the Council's Children, Education and Social Care division to agree options for joint funding that would allow some flexibility for the provider to provide a range of services, the balance of which will shift from time to time. There are examples of this working in practice within Stockton-on-Tees with young people's services, where joint agreements allow the provider to take both care leavers and other homeless young people; and for people with learning disabilities where the provider can support people with both support and personal care needs without having to constantly juggle funding or turn down people in need of a service.

4.8 Contracting and Payments

The Council's Client Financial Services Team within the Children, Education and Social Care division make payments to provider organisations for each of the contracted services. Payments are made on a four weekly basis. The Council contracts with providers for SP funded services and this contract takes into account the Grant Conditions stipulated by the ODPM.

Stockton-on-Tees chose to use the model template contract developed by the ODPM with some local variation on the wording. The contract has two basic alternative sets of financial clauses. Under mainstream **block gross** arrangements, which apply to short-term schemes [44] the provider is paid a certain amount whether or not the scheme is being used to full capacity. In effect, these are a form of fixed price contract. The payment is to the provider and the end user has no contractual obligation to pay for support.

4.9 Charging

Service users in Stockton-on-Tees are charged for services within a **block subsidy** contract. The system operates so that service providers are responsible for the collection of the support charges. Providers are paid a subsidy through the Supporting People programme in respect of those people receiving a Housing Benefit payment or who have been assessed under the "Fairer Charging" regime. These arrangements are enshrined in the Grant Conditions.

There have been 13 Supporting People Fairer Charging assessments carried out in Stockton-on-Tees up to April 2005 of which seven (7) were approved for subsidy payment.

[43] Independent Review into the Supporting People programme; Eugene Sullivan, Robson Rhodes, February 2004.

[44] Short-term schemes are those that provide a support service to an individual for a period of up to two years. This usually includes homeless hostels, women's refuges, and floating support services.

The charging arrangements for Stockton-on-Tees are detailed in the Charging Subsidy Policy and Guidance first issued in April 2003[45]. The overall principles of the charging policy are that it is:

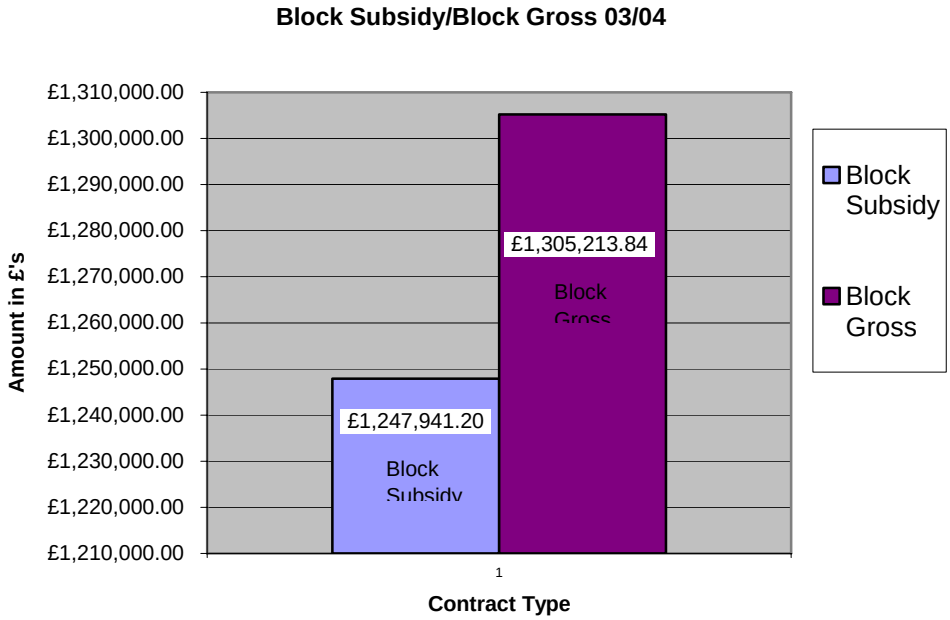
- Fair and understandable for users of services
- Administratively simple for all parties
- Balancing the risk between providers and commissioners
- Consistent with other charging and income assessment policies locally

The charging policy was developed in line with guidance from the ODPM. In the two years of working within this policy there have been very few, if any, queries from providers or concerns from service users. The policy is similar to that used in other local authority areas within the Tees Valley area and is the most popular arrangement nationally.

Under **block subsidy** arrangements, which apply in most long-term schemes[46] the provider is paid the unit cost multiplied by the full capacity of the scheme, depending on how many of the users qualify for Supporting People subsidy. In principle, therefore, anything from no users (if the scheme was either empty or full of self-payers' who didn't qualify for subsidy) to all users in a fully occupied scheme. The block subsidy contracts oblige providers to regularly inform the Council of the current service recipients' subsidy eligibility, and for the Council to regularly adjust the payment to providers accordingly. In effect, block subsidy contracts are a form of variable volume contract. It is the providers' responsibility to specifically credit each payment to the accounts of individuals who qualify for subsidy. For the subsidy to be payable to the end user there is usually a clause within the tenancy agreement obliging the user to pay the support charge to the support provider. Under this arrangement the provider, not the Council, takes responsibility for bad debts and voids losses.

[45] Supporting People Charging and Subsidy Policy and Guidance, Stockton Borough Council, April 2003.
[46] Long-term schemes are those that provide support services to people living in their permanent home e.g. sheltered housing for older people

Graph 2 – showing Number & Value of Block Gross & Subsidy schemes, 2003-04



4.10 Unit Costs

The unit cost of providing the support service is currently determined by the provider organisation. This is based on individual assessments carried out under the THBS, with the money being transferred into Supporting People grant and payable under the existing contract to the provider. As each year passes there is no "in principle"[47] reason why the user can't be charged more than the available subsidy. This is of concern especially for self-funders who may find they are asked to pay a higher charge for support than those users being subsidised. It is also possible that even subsidised users may be asked by the provider to pay an additional charge out of their own pocket to meet the full unit cost. Further information on subsidy payments can be found in **Appendix 4**.

4.11 The Effectiveness of contracting arrangements

Providers have indicated they are happy with the arrangements for both block gross and block subsidy contracts. The majority of providers signed up to their contract prior to the commencement of the Supporting People programme. By April 2005 all but one contract (73 / 74) was signed. The outstanding contract[48] is not in dispute and is considered effective as regular payments are made and received.

Although the contract arrangements work well the process of identifying subsidy claimants and subsequent checking with Housing Benefits to

[47] The block subsidy contract requires a clause specifying that the provider can only charge the user a sum equivalent to the unit cost specified in the SP contract. However basic Landlord Tenant law might apply, which outside "secure" tenancies, expects service charges to be set according to the Landlord's actual or expected costs, not the actual amount of available subsidy. If this line of argument is accepted not even the inclusion of such a clause would be sufficient to prevent providers raising their support charges above the agreed available subsidy levels.

[48] Low risk Almshouse service with 14 users

ensure a current HB payment is being made is administratively complex, time consuming and expensive. The process relies on getting acknowledged receipt of HB and written permission to allow a check with HB from every subsidy applicant. Movement in and out of properties also requires monitoring. The resource of one full time officer within the CFST is used to track changes within schemes and each provider will use additional resources to ensure these changes are recorded and communicated back.

Action: Plan to undertake review and cost benefit analysis of current contracting arrangements during 2005 and consider alternative options

Section 5

5.0 The Proposed 5 Year Strategy

5.1 Introduction to Commissioning Plan

The following Section articulates the key identified commissioning and work priorities for Supporting People within the Borough of Stockton-on-Tees. These priorities are based on the analysis of the research into each of the individual client group areas as outlined in Section 2, Strategy Development.

The methodology used to develop the identified priorities was based on discussions with stakeholders in Provider meetings, with representatives of the Housing and Neighbourhood Partnership and members of the Commissioning and Strategy Group. These priorities are based on the analysis of the research into each of the individual client group areas. Delivery of the priorities over the five years of the Strategy is dependent on receiving all the identified required funding to meet the investment objectives. Until the ODPM announces the outcome of deliberations on the revised allocations formula and until an announcement on the future Grant allocation is made in Autumn 2005 it is impossible to know if all the objectives can be achieved.

Delivering each objective is in essence the process for building the service blocks for implementing the Supporting People vision of services for the five years 2005 to 2010. It is intended as a guide and business-planning tool for organisations providing supported housing services in the Borough. The priorities may change over the next five years as the funding allocation becomes clearer and new information is gathered. It will be the Commissioning and Strategy Group's responsibility to agree a mechanism to help with the decision making process if the future Grant allocation falls short of the identified amount.

There are four key sections, each section is key to achieving the vision for Supporting People in Stockton-on-Tees, however they are dependant on receiving additional funding. The first section (5.2) outlines the ranked investment priorities for services linked to agreed or bidding capital funded schemes. The second section (5.3) outlines the schemes dependent on obtaining additional capital funding, identified as medium priorities. The third section (5.4) identifies all other housing related support services which need to be provided within the Borough but which could be developed without reliance on capital funding. The final section (5.5) identifies the work priorities to be led by the Supporting People Team relating to each client group. There is no identified funding required for this work.

5.2 High Priority Scheme Investment Objectives

From the analysis the Commissioning and Strategy Group have

developed a list of priority investment objectives. These are services that they wish to see developed and for which they are prepared to invest in once the funding becomes available. The first two schemes are already in development and are linked to capital funding allocations from the Housing Corporation. The third scheme is subject to a bid to the Housing Corporation for capital funding in 2006/08 and will be supported by the Supporting People Commissioning and Strategy Group.

Priority	Scheme / Service	Client Group	Investment / annum (£) Estimated cost (approx.)
H1	Extra Care - Hardwick	Older People	Committed £60,000 (will need additional investment from Social Care) + capital costs of build (agreed)
H2	Substance misuse accommodation scheme – support service	Substance Misuse	Committed £175,000 + capital costs of build (agreed)
H3	Substance misuse – move on accommodation (2nd stage of above scheme)	Substance Misuse	£40,000
		Total Cost	**£275,000**

5.3 Medium Priority Scheme Investment Objectives

The following new schemes / services are accommodation based and are therefore reliant on capital funding and can only be considered for Supporting People funding in conjunction with the development programme.

M1	120 units of rented Extra Care in next 10 years with an additional 100 units for outright sale or shared ownership.	Older People	£150,000 (will need additional investment from Social Care) + capital costs of build
M2	Accommodation based supported housing scheme(s) for people with learning disabilities (4 – 12 units)	Learning Disabilities	£210,000 (likely to need additional investment from Social Care + capital costs of build)
M3	Accommodation based supported housing scheme(s) for people with mental health problems (4 – 12 units)	Mental Health	£150,000 + capital costs of build
		Total Cost	**£510,000**

5.4 High Priority Service Development Objectives

The following proposed housing related support services do not rely on the provision of specialist accommodation and are therefore not reliant on additional capital funding.

H4	200 units of low level F/S in next 3 years	Older People	£200,000
H5	Invest in pilot scheme to explore development of electronic assistive technology across all tenures	Older People & other disabled people	£20,000
H6	Supported lodging scheme (between 6 – 10 units)	Young people at risk	£70,000
H7	Further investment in a tenure blind F/S service for homeless people (families, single people, offenders, people with mental health problems & people who misuse substances)	Homelessness Generic (offenders, young people, refugees, etc)	£200,000
H8	Investment in the development of a resettlement service linked to the homeless hostel for single men	Homelessness	£25,000
H9	Invest in management costs for Rent Guarantee Bond scheme	Homelessness	£20,000
H10	Investment in Night Stop scheme	Homelessness	£20,000
H11	Floating support service for people with learning disabilities (8 -10 units to start with)	Learning Disabilities	£40,000
H12	Invest in management costs of small scale pilot Home Improvement Agency	Older People	£40,000
		TOTAL COST	**£635,000**
		OVERALL TOTAL	**£1,420,000**

5.5 Work Priorities

There are a number of priority pieces of work the Supporting People Team will be concentrating on to enable the further development of the programme. These are:

Client Group	Supporting People Work Priorities
Older people – including older people with mental health problems or dementia	• Work with the Council's Housing Strategy team to deliver the Older Person's Accommodation strategy within the Borough. • Undertake further needs mapping for older people within BME groups. • Address the needs of older homeless men by exploring the possibility of long-stay supported housing.
Homeless people – including single homeless people, homeless families and rough sleepers	• Remodel / re-classify the homeless hostel for single homeless to accurately reflect the fact that it accommodates single homeless men over the age of 25 whom have an alcohol problem. • Develop a resettlement service linked to the homeless hostel for single men. • Stimulate permanent housing options for single people and families currently in short term supported housing schemes.
Substance misusers – including people with drug problems and people with alcohol problems	• Establish a monitoring system with the Council's Homelessness Service to identify number of homeless people with drug and alcohol problems. • Develop systems for longer term monitoring of existing schemes to assess the success rate of differing housing provision. • Develop appropriate move on accommodation linked to the new drug scheme. • Maintain close links with key agencies i.e. DAT, Community Safety, etc. to monitor future need. • Stimulate linkages between supported housing for drug users to BME Housing Strategy • Ensure all services have in place a fair access policy regarding Black and Minority Ethnic Groups. • Link into Alcohol Strategy to identify and research unmet needs.

People with learning disabilities	• Work with the Learning Disabilities Team to develop a housing strategy for people with learning disabilities. • Stimulate the development of protocols between the Care Management Team and Housing Services to ensure that information and data is shared, when people with learning disabilities are homeless or potentially homeless.
People with mental health problems	• Further explore the development of new services to cater for young people aged 16-25 years with mental health problems that are also able to support young people with dual diagnoses. • Stimulate the development a new intensive support services to cater for people leaving long-term rehabilitation units. The lack of bed spaces within the rehabilitation unit delays discharge from acute hospital beds. Independent living with intensive support would alleviate this bed blocking. • Ensure all services have in place a fair access policy regarding Black and Minority Ethnic Groups. • Further explore the development of new partnerships between private landlords and specialist support agencies (including landlords agreeing to provide and maintain accommodation in return for rent guarantees and management of support).
People with a physical or sensory disability	• Audit all supported housing schemes to determine their capacity to accommodate people with physical and sensory disabilities • Undertake detailed investigation into whether there is a need for additional specific supported accommodation / floating support and the level of provision that is required, around people with: o Newly acquired disabilities o Short term disabilities o Young people with disabilities living at home, that would like to live independently o Children with disabilities for indications of future provision o People inappropriately accommodated in care homes with disabilities • Explore the need for a tenure blind adaptation advice service able to access funding resources in order to carry out required works (linked to Home Improvement Agency?).
Women at risk of domestic violence	• Work with the Homelessness Service to identify how many families applying for accommodation are fleeing domestic violence and therefore identify any shortfall in provision. • Stimulate the development of a range of permanent housing options for women leaving a refuge • Link in with Domestic Violence Forum and identify current issues • Explore the need for a specialist BME domestic violence worker for ethnic minorities within the existing refuge provision.

Young People – including young people at risk, young people leaving care and teenage parents	• Stimulate the development of permanent housing options for young people at risk / leaving care currently in short term supported housing schemes. • Stimulate the provision of supported housing for young people from BME groups.
Offenders – including ex-offenders and people at risk of offending	• Undertake research into the housing needs of offenders within the Borough • Stimulate the development of single person accommodation for offenders able to facilitate reintegration whilst supporting medium to low-level mental illness and/or substance misuse problems.
Refugees	• Stimulate the development of appropriate accommodation for refugees in conjunction with existing support provision. • Consider the continued funding of the Council's Refugee Move On Officer under Supporting People.
Travellers	• Further explore the support needs of Travellers in conjunction with existing support provision.
HIV/Aids	• Further explore the support needs of people with HIV/Aids.

General priorities-which apply to all client groups are:	• Stimulate services which:
	  • Support vulnerable people to achieve their potential and enable their participating in the social and economic life of the Borough
	  • Support vulnerable people to live in their own homes wherever this is their wish and is practical
	  • Involve users in planning services
	  • Work in partnership to promote social inclusion, reduce dependency on drugs, alcohol and misused substances
	  • Represent good value for money
	  • Have secured capital funding
	  • Support service opportunities for BME and other marginalised groups

In addition the following are key values that will be taken into account over the next five years:

- Consider the priorities of SP funding to ensure the provision of services that provide efficiency in other public services.
- Assess the impact of Supporting People on other services.
- Consider the needs of strategic partners and maintain links with other strategies and new initiatives that support vulnerable people.
- Promote innovation and the use of good practice.
- Raise the profile and awareness of the cost benefits of working alongside broader (social care, primary care and probation) initiatives.
- Consider the impact of the Value Improvement Projects

- Support the move away from residential care where there are adequate resources especially with older people and learning disabilities.
- Work closely with the Durham and Tees Valley Cross Authority group of local authorities in planning services for people who are transient.
- Build our understanding of needs in comparison to similar sized local authority areas through the Benchmarking Club.

Section 6

6.0 Annual Plan 2005-06

This section sets out the immediate priorities for review and change, including a summary of intended spend & unit provision by client group and service type in 2005-06. This section contains the detail of **how** key priorities of the strategy will actually be delivered.

The Annual Plan sets out the key actions to be undertaken to meet the commissioning and work priorities of the Supporting People programme in 2005/06. The Annual Plan is broken down into two main areas

- Scheme Development Objectives
- Work Objectives

Each objective provides a list of actions that need to be taken by the Supporting People Team to meet the specific objectives. The plan gives an indication of the timescale for carrying out each action and identifies the person responsible for ensuring the work is undertaken.

The Annual Plan informs the service plans for both the Council's Housing Department and the Service Development Team.

The four key headings within the Scheme Development Objectives are:

1. Extra Care
2. Substance Misuse – supported housing
3. Substance Misuse – move on accommodation
4. Planned additional supported housing services

The six key headings within the Work Objectives are:

1. Ensure appropriate planning & management of the Supporting People Team
2. Manage the contracts & provider involvement within the Supporting People programme
3. Manage the Supporting People 5-year strategy and development of new services
4. Review all Supporting People services and monitor performance
5. Ensure the effective functioning of the Commissioning & Strategy Group
6. Ensure the effective involvement of service users

The previous section – the proposed Five Year Strategy (Section 5) ranked the investment priorities and identified work priorities of the Supporting People Team relating to each client group. The Annual Plan takes a more holistic view and identifies the range of actions to be carried out by the Supporting People Team to achieve the objectives.

These actions have been identified by considering current progress with the Supporting People work programme locally, the risks associated with the programme (See Risk Identification, Appendix 6), and the identified investment priorities.

The Action Plan also identifies the key performance targets of the Supporting People programme by which the ODPM will measure the performance of the Supporting People Team in 2005/06. It also identifies specific targets identified

by the Supporting People Team to meet Stockton Borough Council performance targets.

Number of people supported

On 1st April 2005, **3,580** in Stockton-on-Tees were receiving support funded by the Supporting People programme. If those people receiving community or social alarm services are deducted a total of **1,694** people were receiving direct support through the programme. Of these, **1,578** people were living in specialist accommodation, such as sheltered housing, group homes, or hostels, and receiving support from staff based there. The remaining **116** were receiving floating support from staff visiting them in their own homes. The breakdown between different client groups is set out in the table below.

Primary Client Group	**Accommodation -based**	**Floating**	**Total**	**% Of Total**
Frail elderly	---	---	---	---
Generic	---	1,886	1,886	52.7%
Homeless families with support needs	18	---	18	0.5%
Mentally disordered offenders	---	---	---	---
Ex offenders	---	---	---	---
Older people with mental health problems/dementia	---	---	---	---
Older people with support needs	1,348	34	1,382	38.6%
People with a physical or sensory disability	50	---	50	1.4%
People with alcohol problems	---	---	---	---
People with drug problems	15	16	31	0.9%
People with HIV / AIDS	---	---	---	---
People with learning disabilities	28	---	28	0.8%
People with mental health problems	26	19	45	1.2%
Refugees	---	---	---	---
Rough sleepers	---	---	---	---
Single homeless with support needs	49	---	49	1.4%
Teenage parents	---	---	---	---
Travellers	---	---	---	---
Women at risk of domestic violence	8	11	19	0.5%
Young people at risk	30	36	66	1.8%
Young people leaving care	6	---	6	0.2%
TOTAL	**1,578**	**2,002**	**3,580**	**100%**

Spending

Spending on 1st April 2003 was £2,577,791. This was divided between the client groups as follows (£000s):

Primary Client Group	£000 Accom-based	Floating	Total	% Of total
Frail elderly	---	---	---	---
Generic	---	£329,404	£329,404	12.8 %
Homeless families with support needs	£117,908	---	£117,908	4.6%
Mentally disordered offenders	---	---	---	---
Offenders or people at risk of Offending	---	---	---	---
Older people with mental health problems/dementia	---	---	---	---
Older people with support needs	£278,722	£107,095	£385,817	14.9 %
People with a physical or sensory disability	£50,187	---	£50,187	1.9%
People with alcohol problems	---	---	---	---
People with drug problems	£116,916	£179,617	£296,533	11.5 %
People with HIV / AIDS	---	---	---	---
People with learning disabilities	£501,760	---	£501,760	19.5 %
People with mental health problems	£164,292	£19,198	£183,490	7.1%
Refugees	---	---	---	---
Rough sleepers	---	---	---	---
Single homeless with support needs	£210,768		£210,768	8.2%
Teenage parents	---	---	---	---
Travellers	---	---	---	---
Women at risk of domestic violence	£124,369	£25,855	£150,224	5.8%
Young people at risk	£279,444	£16,109	£295,553	11.5 %
Young people leaving care	£56,147	---	£56,147	2.2%
TOTAL	**£1,900,513**	**£677,278**	**£2,577,791**	**100%**

It appears from the above that there are a number of significant gaps in services, particularly for Teenage Parents and Offenders. Although there are gaps these are not as acute as the table above suggests. These client groups are covered by other client groups i.e. young people at risk and people with drug problems. The Strategy has already identified the need for further work in identifying the needs for some specific client groups. In the long term it will be necessary to achieve a better balance between accommodation based and floating support services, ensuring the best service type to achieve the desired outcomes.

Current pattern of provision in Stockton-on-Tees

There were 74 services and 1,686 household units (excluding Community Alarms) provided by 29 providers that transferred into the Supporting People Programme in 2003. This has now changed to 71 services with 1,694 household units (excluding Community Alarms). The changes have been brought about by the closure of three sheltered housing schemes, the closure and re-modelling of a service for people with mental health problems and the negotiated changes through the review process in service provision around

specific short-term services. Most of the budget is invested in accommodation-based services, with 73.8% of household units provided in this way and 26.2% provided through floating support. Sixty-three (63) of the services are provided as accommodation based whilst eight (8) are provided as floating support. This means that the majority of people have to physically move into buildings to receive a housing related support service. Access and pathways to these services usually follows a crisis point such as homelessness, hospital admission, loss of a carer or contact with the criminal justice system.

The Commissioning and Strategy Group and the SP Strategy is clear that this current configuration of provision needs to change to create a better balance of provision by commissioning more flexible services which can support people in their own homes and help prevent crisis. There will always be a need for accommodation-based services, but the balance of accommodation and floating support provision needs to change.

At the end of the 2004/05 financial period there was a uncommitted savings of £148,957 within the Supporting People budget. This is 5.4% of the total budget.

Changes to the way services are commissioned
Whilst there are some services that have been strategically planned, few of these have been formally commissioned or subject to competition.

However, the introduction of the Supporting People programme represents a turning point, not just in terms of the introduction of strategic planning for housing support services, but also in how these services are commissioned. Now there is potential exposure to wider market forces through Local Authority contracting and procurement processes.

The commissioning approach needs to be sensitive to these historical patterns of service delivery and configuration. It will need to move at a pace of change that will not cause major disruption to service users or the sector and will manage the wider impact on service delivery. It is recognised that some major service redesign and reconfiguration work needs to take place over the next five years. These changes need to be managed through this commissioning framework as the Supporting People Strategy and its commissioning plans are implemented.

However, Government concerns about the size and value of the Supporting People budget means there is nationally a need to bring about more significant change and realise savings, more rapidly than originally anticipated at the introduction of the Supporting People programme. The affect of the implementation of the ODPM's Distribution formula, whilst still uncertain, is likely to bring about a slight increase in the Supporting People budget for Stockton-on-Tees. This will mean the commissioning and procurement agenda will focus on the development of new services and the continued reconfiguration of both individual and groups of services.

Managing change
Where significant change is brought about through the remodelling of a service or through the development of new services, an impact assessment will be carried out as part of the commissioning process. This will assess the wider impact of the change before implementation, including the impact on the

Supporting People market. The intention is to effectively manage change through the commissioning process, particularly its impact on service users, levels of service delivery, providers and other budgets.

Capacity and management

On a very practical level, Stockton Borough Council does not have the resources or capacity to put 71 services and contracts out to competition and manage this process before April 2006. All current Supporting People services are being reviewed to a tight timetable, which must be completed by March 2006. Market testing and tendering would be costly and time consuming to the both the Council and Supporting People providers who will need to bid for each service or combinations of services. Neither party would have the capacity for this over the next few months.

Our Immediate Plans & Priorities

The Five Year strategy has identified a number of **High and Medium Priority Scheme Investment Objectives** and **High Priority Service Objectives** along with a number of **Work Priorities**. The estimated overall cost of achieving these changes is £1.42 million. This is achievable within the five-year timeframe of 2005 – 2010 subject to the Distribution Formula changes being proposed falling in line with expectations. At the present time the Commissioning Body has still to consider how these priorities will be achieved. However the link with capital funded schemes already being developed suggests the majority of available revenue funding will need to be identified to meet the High Priority Scheme Investment Objectives. This is identified to cost £275,000. The following tables show details of the identified services requiring funding and the likely timescales for achieving this.

ANNUAL PLAN 2005 – 2007:

SCHEME DEVELOPMENT OBJECTIVES – KEY ACTIONS 2005/07

Objective 1: Extra Care (Contract £60,000 + additional investment from Social Care for personal care provision.)

Action	Timescale	Responsibility	Achieved
Work with Landlord (Endeavour) & key stakeholders to plan service model (Project group)	Current (from January 2005)	Peter Smith / Janet Baker	
Develop Service Specification	Summer 2005	Peter Smith	
Develop Contract arrangements	Spring 2006	Peter Smith	
Identify Support Provider – tender procurement process	Autumn 2005	Peter Smith / Janet Baker	
Scheme building completion	Autumn 2006	SP Team	

Objective 2: Substance Misuse – Supported housing (Contract £175,000 approx.)

Action	Timescale	Responsibility	Achieved
Work with Landlord (Endeavour) & key stakeholders to plan service model (Project group)	Current (from January 2005)	Peter Smith + Project Group	
Develop Service Specification	September 2005	Peter Smith + Project Group	
Develop Contract arrangements	January 2006	Peter Smith + Project Group	
Identify Support Provider – tender procurement process	Autumn 2005	Peter Smith + Project Group	

Scheme building completion	March 2006	SP Team	

Objective 3: Substance Misuse – move on accommodation (Cost of support service expected to be in region of £40,000)

Action	Timescale	Responsibility	Achieved
Work with Landlord (Endeavour) & key stakeholders to put together bid for capital funding to Housing Corporation	September 2005	Endeavour + SBC	
Decide how service will be modeled in partnership with existing scheme	Autumn 2005	Peter Smith & Project Group	

Objective 4: Planned Additional Supported Housing Services which could be funded using Supporting People grant (to be agreed by Commissioning Body)

Scheme	Cost	Timescale	Responsibility	Achieved
Older People F/S scheme	Up to £200,000	By March 2008	SP Commissioning Body	
Electronic Assistive Technology (Telecare)	£20,000	By March 2007	SP Commissioning Body	
Supported Lodging scheme for Vulnerable people	Up to £70,000	By March 2008	SP Commissioning Body	
Homelessness F/S scheme	Up to £200,000	By March 2010	SP Commissioning Body	
Resettlement Service (Homeless Alcoholics)	£25,000	By March 2008	SP Commissioning Body	
Rent Guarantee Bond Scheme	£20,000	By March 2010	SP Commissioning Body	
Night Stop scheme	£20,000	By March 2007	SP Commissioning Body	
Learning Disabilities F/S	£40,000	By March 2008	SP Commissioning Body	

	Home Improvement Agency	£40,000	By March 2010	SP Commissioning Body	

ANNUAL PLAN:

PURPOSE

Supporting People Vision

We will deliver a diverse range of high quality housing related support services to vulnerable people living in the Borough by ensuring:

- **Best use of available resources,**
- **Delivery of services to meet peoples needs,**
- **New services are integrated with existing services and strategic plans, and**
- **Account is taken of the views of service users, partners and stakeholders.**

The key functions and purpose of the Supporting People Team are: -
Undertake work on behalf of the Commissioning and Strategy Group to plan

WORK OBJECTIVES – KEY ACTIONS 2005/07

Objective 1: Ensure appropriate planning & management of SP Team

Action	Timescale	Responsibility	Achieved	PIs
Continue work of the SP Focus Group in preparation for the Audit commission visit to Stockton-on-Tees	Ongoing	PRS		
Undertake cost/benefit analysis of various SP Team staffing structures considering additional review staff resource.	April 05	PRS		
All risks identified on risk register are appropriately risk assessed and have risk action plans. New risks are identified and assessed	June 05	SP Team		
Plan "Adverse Publicity" strategy	June 05	SP Team		
Set up SLA with CFST, Finance and Housing Benefits Teams	June 05	PRS		
Develop H&S plan / procedures for team linked to risk of violence / harm whilst undertaking validation visits	June 05	JB		
Identify all key policies & procedures and ensure action plan in place to deliver within agreed timetable	Sept 05	SP Team		
Ensure that frontline customer service staff are aware of the SP programme and the services it can offer.	Sept 05	SP Team		
Update SPKweb & SBC websites to provide relevant information on Supporting People with accessible sign posting.	June 05	JB		
Develop Service Provider Directory / database / List of support services, providers, access and contact information, etc.	June 05	DC		
Identify cashable and non-cashable efficiency savings using the Gershon principles as part of the corporate commitment to overall efficiency. Keep a record detailing the savings achieved.	June 05 and ongoing	PRS		
Ensure CareSupport IT system – operates in "live" environment	***Sept 05***	***PRS / JB***		

Strategy Group to plan, develop and commission Supporting People housing related services for vulnerable people.

To support and contribute to the development of services to meet the supported housing needs of vulnerable people, ensuring effective multi-agency collaboration to achieve agreed priorities.

OBJECTIVES

Key unit objectives are:

1. Ensure appropriate planning & management of SP Team
2. Manage the SP contracts & provider involvement in the SP programme
3. Manage the "Supporting People" 5-year strategy and development of new services
4. Review services and monitor performance of

Objective 2: Manage the SP contracts & provider involvement in the SP programme

Action	Timescale	Responsibility	Achieved	PIs
Review Charging & Subsidy Policy	June 05	PRS		
Undertake a review and cost benefit analysis of current contracting arrangements during 2005 and consider alternative options	Sept 05	PRS		
Ensure accurate payments to providers made on 4-weekly basis	Ongoing	SP Team		
Draft out Standard Specification to use with Full Contract – outlining key requirements of support service (use SPINTLS version & others	Sept 05	JT		
Undertake provider satisfaction survey (2nd) in line with 1st survey in 2003/04	June 05	SP Team		
Develop a local consultation, training and development strategy for providers	Sept 05	SP Team		
Revise "Full" Contract to include compliance with the following additional issues: • Risk Assessments	June 05	SP Team		
Set up provider representation group linking into C&SG	Sept 05	PRS		
Determine the interpretation of "eligible" welfare services	Sept 05	PRS		

all SP services
5. Ensure the effective functioning of the Commissioning & Strategy Group
6. Ensure the effective involvement of service users

SUMMARY OF RESOURCES

Staff:
SP Manager x 1
SP Coordinator x 2
SP Administrator / Project Officer x 0.8
CFST SP Payment Officer x 1
CFST SP Senior Payment Manager x 0.5
SP Review resource (ODPM - £32k for 12 months)

Budget:
SP Grant £2.75 million

SP Admin Grant £160K

Assets:

Determine the interpretation of "eligible" welfare services	Sept 05	PRS		

Objective 3: Manage the "Supporting People" 5-year strategy and development of new services

Action	Timescale	Responsibility	Achieved	PIs
Publish 5-year strategy in appropriate formats	June 05	PRS		
Implement, develop and review the 5-year strategy, maintaining links with other strategies supporting vulnerable people.	***March 06***	***PRS***		
Commission research to cover needs data sources that are not available – ensure unmet need is identified & well researched with gaps in services identified.	Dec 05	SP Team		
Commission a support provider for the Extra Care scheme in Hardwick	***Sept 05***	***PRS***		
Commission a support provider for the Drugs scheme	***Dec 05***	***PRS***		
Investigate need for supported lodgings scheme for young people	***Sept 05***	***PRS***		
Assist with development of accommodation strategy for people with learning disabilities and support the move, where there are adequate resources away from residential care	***Dec 05***	***JB / JT***		
Develop actions following publication of Older Persons Accommodation Strategy and support the move, where there are adequate resources away from residential care	***June 05***	***PRS***		
Quantify the cost benefits and impact of providing housing related support alongside broader (social care, primary care & probation) initiatives. Understand what is needed locally in contributing to the corporate objectives and to realise and maximise the benefits of the programme.	Dec 05	PRS		
Consider the provision of supported housing services that ensure efficiency in other public services	Dec 05	PRS		

- 4 PC's
- 4 printers (colour)
- 1 ODPM PC (SPINTLS)
- 1 (ODPM) printer (B&W)

Key
PRS = Peter Smith
JB = Janet Baker
JT = Jan Timofte
DC = Denise Cutler

Work with the commissioners of statutory services to agree eligibility and funding criteria for people with mixed care and support needs	Ongoing	PRS		
Work with other local authorities in the immediate area and through the Benchmarking initiative for similar sized local authority areas to build an understanding of markets in NE England and the scope of provision required.	Ongoing	PRS		
Manage the SP budget and predict the level of savings / resources available for investment in new services	Ongoing	PRS		

Objective 4: Review services and monitor performance of all SP services

Action	Timescale	Responsibility	Achieved	PIs
Provide Milestone Returns to ODPM on quarterly basis	Quarterly	PRS		
Provide all key PI information to ODPM on quarterly basis	Quarterly	JB		
Complete reviews of all SP services by end March 06	***March 06***	***SP Team***		
Undertake accreditation of all housing provider organisations as part of the Supporting People programme.	***March 06***	***SP Team***		

Objective 5: Ensure the effective functioning of the SP partnership (Commissioning & Strategy Group)

Action	Timescale	Responsibility	Achieved	PIs
Develop a formal protocol for dealing with provider disputes & rules on appeals with the C&SG	June 05	PRS		
Ensure the Commissioning Body meet on a regular (at least bi-monthly basis)	March 06	PRS		

Improve joint working between Stockton Borough Council, North Tees Primary Care Trust and the National Offender Management Service (Teesside)	March 06	Commissioning Body		
Develop the role of the elected Member	Sept 05	Commissioning Body		

Objective 6: Ensure the effective involvement of service users

Action	Timescale	Responsibility	Achieved	PIs
Publish guidance for Service Users on how to access services	Sept 05	SP Team		
Reconvene / re-launch the Inclusive Forum ensuring SU's, carers & advocates are involved.	Sept 05	SP Team		
Carry out service user surveys as part of scheme reviews and by providers and determine whether their needs are being met by current provision	***March 06***	***SP Team***		
Develop a framework for action to ensure we identify the appropriate housing related support needs of BME households	Sept 05	PRS		
Develop a consultation plan identifying the steps to achieving effective consultation with all key stakeholders in line with best practice.	Sept 05	SP Team		
Develop a system to record issues associated with the SP programme raised by the general public and stakeholders so that we identify the key issues and the action taken to deal with the issues. (You said, we did)	Sept 05	SP Team		

Where are we aiming to be?

Key service delivery and organisational performance targets for the year, set out in the table below. Inclusion of sickness and appraisal targets is a core requirement.

PERFORMANCE TARGETS 2005/6

PERFORMANCE INDICATOR	TARGET 05/06	ACTUAL PERFORMANCE			
Service Delivery		Q1	Q2	Q3	Q4
SP – KPI	Increase number of service users who are supported to establish and maintain independent living (for long term services). (ODPM key performance indicator – base line to be set by ODPM)				
SP – KPI	Increase number of service users who have moved on in a planned way from temporary living arrangements (for short term services) (ODPM key performance indicator – base line to be set by ODPM)				
SP – KPI	Ensure fair access to people who are eligible for SP services. This relates primarily to BME groups but we will look to examine this against other client groups. (ODPM key performance indicator – base line to be set by ODPM)				
Organisational Delivery					

Staff Sickness	No more than 2% (17 working days) sickness within team; currently 3% (26 working days)				
Appraisals	100% of staff by end 2005/06				
Telephone calls answered within target time (20 seconds)	100%				
Complaints acknowledged within 5 working days	100%				
Complaints replied to within 10 working days	100%				