

CABINET AGENDA



Tuesday 29th August 2006

at 9:00 a.m.

in Committee Room B

MEMBERS: CABINET:

The Mayor, Stuart Drummond

Councillors Hargreaves, Hill, Jackson, Payne, Tumilty and R Waller

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

- 3.1 To receive the Record of Decision in respect of the meeting held on 14th August 2006 (previously circulated)

4. BUDGET AND POLICY FRAMEWORK

- 4.1 Food Law Enforcement Service Plan 2006-2007 – *Director of Neighbourhood Services*

5. KEY DECISIONS

- 5.1 Members ICT - Flexible and Remote Access – *Assistant Chief Executive and Chief Financial Officer*
- 5.2 To Consider and Approve the Supporting People Five Year Strategy 2006-11 – *Head of Public Protection and Housing*

6. OTHER ITEMS REQUIRING DECISION

- 6.1 Scrutiny Partnerships Enquiry Action Plan – *Head of Community Strategy*

7. ITEMS FOR DISCUSSION / INFORMATION

No items

8 REPORTS FROM OVERVIEW OF SCRUTINY FORUMS

No items

CABINET REPORT

29 August 2006



Report of: Director of Neighbourhood Services

Subject: Food Law Enforcement Service Plan 2006 - 2007

SUMMARY

1. PURPOSE OF REPORT

To consider the Food Law Enforcement Plan 2006/07

2. SUMMARY OF CONTENTS

The report set out details of Hartlepool's Food Law Enforcement Service Plan 2006/07. The plan is a requirement of the Food Standards Agency and forms the basis on which the authority may be monitored and audited to verify whether the service provided is effective in protecting the public. The plan sets out the Council's aims in respect of its food law service. Whilst focussing on 2006/07, it also identified longer-term objectives as well as a review of performance for 2005/06.

3. RELEVANCE TO CABINET

Executive to consider issues prior to presentation to Council.

4. TYPE OF DECISION

The Food Law Enforcement Plan is part of the Budget and Policy Framework of the Council.

5. DECISION MAKING ROUTE

As part of the Budget and Policy Framework, the Annual Food Law Enforcement Plan requires the involvement of scrutiny (scheduled for 20 September 2006) and approval by full Council.

6. DECISION(S) REQUIRED

Comments on the Food Law Enforcement Plan are invited.

Report of: Director of Neighbourhood Services

Subject: Food Law Enforcement Service Plan 2006/07

1. PURPOSE OF REPORT

- 1.1 To consider the Food Law Enforcement Service Plan for 2006/07, which is a requirement under the Budget and Policy Framework.

2. BACKGROUND

- 2.1 The Food Standards Agency has a key role in overseeing local authority enforcement activities. They have duties to set and monitor standards of local authorities as well as carry out audits of enforcement activities to ensure that authorities are providing an effective service to protect public health and safety.
- 2.2 On 4 October 2000, the Food Standards Agency issued the document "Framework Agreement on Local Authority Food Law Enforcement". The guidance provides information on how local authority enforcement service plans should be structured and what they should contain. Service Plans developed under this guidance will provide the basis on which local authorities will be monitored and audited by the Food Standards Agency.
- 2.3 The service planning guidance ensures that key areas of enforcement are covered in local service plans, whilst allowing for the inclusion of locally defined objectives.
- 2.4 A Food Law Enforcement Plan for 2006/07 is attached as **Appendix 1** and takes into account the guidance requirement.
- 2.5 The Plan is to be considered by the Neighbourhood Services Scrutiny Forum on 20 September, prior to being considered by Council.

3 THE FOOD LAW ENFORCEMENT SERVICE PLAN

- 3.1 The Service Plan for 2005/06 has been updated to reflect last year's performance.
- 3.2 The Plan covers the following:

- (i) Service Aims and Objectives:
That the Authority's food law service ensures public safety by ensuring food, drink and packaging meets adequate standards.
- (ii) Links with Community Strategy, Corporate Plan, Departmental and Divisional Plans:

How the Plan contributes towards the Council's main priorities (Jobs and the Economy, Lifelong Learning and Skills, Health and Care, Community Safety, Environment and Housing, Culture and Leisure and Strengthening Communities).
- (iii) Legislative Powers and Other Actions Available:

Powers to achieve public safety include programmed inspections of premises, appropriate licensing/registration, food inspections, provision of advice, investigation of food complaints and food poisoning outbreaks, as well as the microbiological and chemical sampling of food.
- (iv) Resources, including financial, staffing and staff development.
- (v) A review of performance for 2005/06.

4. ISSUES

The main issues raised in the Plan are summarised below:

- 4.1 Staff absence as a result of a long-term part time vacancy, which was filled by a student Environmental Health Officer (EHO) in June 2005 on a temporary contract. Two EHO's on maternity leave from November 2004 to November 2005 with one officer resigning before her return and the other reducing her hours has resulted in a shortfall of both food hygiene and food standards (composition and labelling) premises inspections.

The shortfall has been minimised by the engagement of consultants to undertake inspections and by existing staff being encouraged to utilise the overtime scheme. This has resulted in 99% (85%) of food hygiene and 93% (94%) of food standards inspections being achieved (figures in brackets are for 2004/05).

- 4.2 There was one major food poisoning outbreak investigated in 2005/06 involving 92 persons. Seven suspect outbreaks were subsequently confirmed as viral in origin. 322 notifications of suspected food poisonings were received.
- 4.3 A total of 606 premises inspections were undertaken in 2005/06, together with 182 microbiological samples and 205

compositional/labelling samples, 23 of the samples were regarded as unsatisfactory, mainly as a result of high bacteriological counts and 27 were unsatisfactory as the labelling/composition was incorrect.

- 4.4 In February 2006 the Food Standards Agency introduced Safer Food Better Business (SFBB) aimed at assisting smaller catering businesses comply with relevant legislation. The Tees Valley authorities in partnership with training provides successfully received grant funding from the FSA to assist local business by providing free training and advisory visits to assist in implementing SFBB.
- 4.5 Animal feeding stuffs, which are to be included in this Plan, remains a low priority, as there are no manufacturers/producers of animal feedstuffs within the Borough. We will, however, undertake a small number of feeding stuff samples, targeting farms on which farmers mix/blend animal feed.
- 4.6 The Food Standards Agency is encouraging authorities to employ an alternative enforcement strategy for low risk food premises by the employment of self-assessment questionnaires (as opposed to inspection). Given that low risk food premises often involve other legislation such as the Health and Safety at Work Act, it is intended to continue to inspect such premises.

5. RECOMMENDATIONS

- 5.1 Members comments on the Food Law Enforcement Service Plan for 2006/07 are invited.



Hartlepool Borough Council

Food Law Enforcement Service Plan

2006/07

FOOD SERVICE PLAN 2006/07

This Service Plan accords with the requirements of the Framework Agreement on Local Authority Food Law Enforcement, and sets out the Council's aims in respect of its food law service and the means by which those aims are to be fulfilled. Whilst focussing primarily on the year 2006-07, where relevant, longer-term objectives are identified. Additionally, there is a review of performance for 2005-06 and this aims to inform decisions about how best to build on past successes and address performance gaps.

1. **Background Information**

Hartlepool is situated on the North East coast of England. The Borough consists of the town of Hartlepool and a number of small outlying villages. The total area of the Borough is 9,390 hectares.

Hartlepool is a unitary authority, providing a full range of services. It adjoins Easington District Council to the north, Sedgfield District Council to the west and Stockton on Tees Borough Council to the south. The residential population is 90,161 of which ethnic minorities comprise 1.2% (2001 census).

2. **Service Aims and Objectives**

Hartlepool Borough Council aims to ensure:

- That food and drink intended for human consumption which is produced, stored, distributed, handled or consumed in the borough is without risk to the health or safety of the consumer.
- Food and food packaging meets standards of quality, composition and labelling and reputable food businesses are not prejudiced by unfair competition.
- The effective delivery of its food law service so as to secure appropriate levels of public safety in relation to food hygiene, food standards and feeding stuffs enforcement.

In its delivery of the service the Council will have regard to directions from the Food Standards Agency (FSA), Approved Codes of Practice, the Enforcement Concordat, and guidance from Local Authorities Co-ordinators of Regulatory Services (LACORS).

Service delivery broadly comprises:

- Programmed inspection of premises for food hygiene and food standards
- Registration, licensing and approval of premises
- Microbiological and chemical analysis of food
- Food Inspection
- Provision of advice, educational materials and courses to food businesses
- Investigation of food and food-related complaints

4.1 Appendix 1

- Investigation of cases of food and water borne infectious disease, and outbreak control
- Dealing with food safety incidents
- Promotional and advisory work

Effective performance of the food law service necessitates a range of joint-working arrangements with other local authorities and agencies such as the Health Protection Agency (HPA), Meat Hygiene Service (MHS), and the Food Standards Agency (FSA). The Council aims to ensure that effective joint-working arrangements are in place and that officers of the service contribute to the on-going development of those arrangements.

3. **Policy Content**

This service plan fits into the hierarchy of the Council's planning process as follows:

- Hartlepool's Community Strategy - the Local Strategic Partnership's (the Hartlepool Partnership) goal is "to regenerate Hartlepool by promoting economic, social and environmental wellbeing in a sustainable manner."
- Corporate (Best Value Performance) Plan
- Neighbourhood Services Departmental Plan
- Public Protection & Housing Divisional Plan
- Consumer Services Service Plan
- Food Law Enforcement Service Plan - sets out how the Council aims to deliver this statutory service and the Consumer Services section's contribution to corporate objectives

The Council's Community Strategy sets out its vision for 'a prosperous, caring, confident and outward looking community realising its potential in an attractive environment'. This Food Law Service Plan contributes towards the vision and the Council's seven main priorities in the following ways:

Jobs and the Economy

By providing advice and information to new and existing businesses to assist them in meeting their legal requirements with regard to food law requirements, and avoid potential costly action at a later stage.

Lifelong Learning and Skills

By providing and facilitating training for food handlers on food safety as part of lifelong learning, and promoting an improved awareness of food safety and food quality issues more generally within the community.

Health and Care

By ensuring that food businesses where people eat and drink, or from which they purchase their food and drink, are hygienic and that the food and drink sold is safe, of good quality and correctly described and labelled to inform choice.

Community Safety

By encouraging awareness amongst food businesses of the role they can play in reducing problems in their community by keeping premises in a clean and tidy condition.

Environment and Housing

By encouraging businesses to be aware of environmental issues which they can control, such as proper disposal of food waste.

Culture and Leisure

By exploring ways to promote high standards of food law compliance in hotels, other tourist accommodation, public houses and other catering and retail premises.

Strengthening Communities

By developing ways of communicating well with all customers, including proprietors of food businesses whose first language is not English, and ensuring that we deliver our service equitably to all.

This Food Law Enforcement Service Plan similarly contributes to the vision set out in the Neighbourhood Services Department Plan “to work hand in hand with communities and to provide and develop excellent services that will improve the quality of life for people living in Hartlepool neighbourhoods”. Within this, the Consumer Services Section has a commitment to ensure the safe production, manufacture, storage, handling and preparation of food and its proper composition and labelling.

The Council has in place a Food Law Enforcement Policy, which has been revised and subsequently approved by the Adult & Public Health Services Portfolio Holder on 21 March 2005.

The Council is committed to the principles of equality and diversity. The Food Law Enforcement Service Plan consequently aims to ensure that the same high standards of service is offered to all, and that recognition is given to the varying needs and backgrounds of its customers.

4. Legislative Powers and other actions available

From 1 January 2006, new EU food hygiene legislation has applied throughout the UK. The introduction of the new legislation was to:

- modernise, consolidate and simplify the previous EU food hygiene legislation
- apply effective and proportionate controls throughout the food chain, from primary production to sale or supply to the final consumer
- focus controls on what is necessary for public health protection
clarify that it is the primary responsibility of food business operators to produce food safely

The Council has a wide range of duties and powers conferred on it in relation to food safety functions.

The Council must appoint and authorise inspectors, having suitable qualifications and competencies for the purpose of carrying out duties under the Food Safety Act 1990 and Regulations made under it and also specific food regulations made under the European Communities Act 1972, which include the Food Hygiene (England) Regulations 2006 and the Official Feed and Food Controls (England) Regulations 2006.

Authorised officers can inspect food at any stage of the production, manufacturing, distribution and retail chain. The Council must draw up and implement an annual programme of risk-based inspections so as to ensure that food and feedingstuffs are inspected in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance.

The sampling of food for the purposes of microbiological and chemical examination and analysis forms an integral part of the inspection process. It is a critical means of ensuring the microbiological and chemical safety of food, checking composition and labelling. The Food Safety (Sampling and Qualifications) Regulations 1990 provide the framework for sampling.

The inspection of food commodities again forms an integral part of the inspection process and is provided for by virtue of Sections 32 and 9 of the Food Safety Act 1990. The purpose of food inspection is to check that food complies with food safety requirements and is fit for human consumption. Section 9 also sets out provisions relating to the detention, seizure and condemnation of food.

It is recognised that whilst the inspection process is the primary means of securing compliance with food safety legislation, this can be enhanced by the provision of advice, educational materials and training courses.

The service is obliged to investigate complaints relating to the sale of food not complying with food safety requirements, or not of the nature, substance or quality demanded, or injurious to health, or unfit for human consumption, or

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labelled or presented so as to mislead consumers. Similarly, the service responds to complaints alleging breaches of hygiene requirements.

The investigation of cases of food poisoning and outbreak control is a shared responsibility between the food law service and the County Durham and Tees Valley Health Protection Unit of the Health Protection Agency. Responsibility for the enforcement of measures to control food-borne disease rests with the local authority, with the Health Protection Agency having a statutory duty to designate medical officers to assist the local authority in carrying out their duties in this respect.

A national food incident warning system is in operation throughout the United Kingdom, which acts as a rapid alert system in respect of food related hazards. The food law service must ensure that any action specified by the Food Standards Agency in a food alert is undertaken promptly and in accordance with any risk assessment carried out by the Agency. If the Authority propose to take alternative action this must first be agreed with the Agency.

In addition to legislative requirements as above, local authority food law services are required to have regard to the Food Law Code of Practice and Practice Guidance which gives detailed direction to authorities on enforcement of food legislation.

There is currently a requirement to report to the Food Standards Agency annually on performance in relation to food law enforcement activities. Annual performance statistics for all authorities are now made publicly available by the Food Standards Agency and the best and worst performing councils are highlighted.

5. **Service Delivery Mechanisms**

Inspection Programme

Inspections carried out for food hygiene, food standards and for feeding-stuffs are carried out in accordance with the Council's policy and procedures on food premises inspections and relevant national guidance.

Information on premises liable to food law inspections is held on the ITECS computerised system. An inspection schedule is produced from this system at the commencement of each reporting year, in accordance with guidance issues by the Food Standards Agency.

The food hygiene and food standards inspection programmes are risk-based systems that accord with current guidance. The current premises profiles are shown in the tables below:

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Food Hygiene:

Risk Category	Frequency of Inspection	No of Premises
A	6 months	10
B	12 months	144
C	18 months	387
D	24 months	1118
E	36 months or other enforcement	71
Unclassified	Requiring inspection/risk rating	129
Total		859

Food Standards:

Risk Category	Frequency of Inspection	No of Premises
A	12 months	0
B	24 months	151
C	36 months or other enforcement	579
Unclassified		65
Total		795

The inspection programme for 2006/07 comprises the following number of scheduled food hygiene and food standards inspections:

Food Hygiene:

Risk Category	Frequency of Inspection	No of Inspections
A	6 months	20
B	12 months	144
C	18 months	210
D	24 months	42
E	36 months of alternative enforcement strategy	40
Unclassified		79
Total		614

Additional to this inspection programme there are 3 manufacturing businesses (2 fishery products establishments and a kebab manufacturer) that are subject to approval under Regulation 853/2004. These are not included in the inspection programme but instead are subject to a minimum inspection frequency in 12 months as set out in the following tables, in accordance with current guidance.

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Product Specific Inspections :

	Primary Inspection	Secondary Inspections	No in Hartlepool
Meat Products	1	2	0
Minced Meat and Meat Preparation	1	2	1
Dairy Products	1	1	0
Fishery Products	1	1	2
Egg Products	1	1	0
Shellfish Purification or despatch	1	1	0

Food Standards:

Risk Category	Frequency of Inspection	No of Inspections
A	12 months	0
B	24 months	115
C	36 months or alternative enforcement	106
Not classified		65
Total		286

An estimated 10% of programmed inspections are of premises where it is more appropriate to conduct inspections outside the standard working time hours. Arrangements are in place to inspect these premises out of hours by making use of the Council's flexible working arrangements, lieu time facilities and, if necessary, paid overtime provisions. In addition, these arrangements will permit the occasional inspection of premises which open outside of, as well as during standard work time hours. The Food Law Code of Practice requires inspections of these premises at varying times of operation.

As a follow-up to primary inspections, the service undertakes revisits in accordance with current policy. It is estimated that such revisits are required in 10% of instances (some premises requiring more than one revisit to check compliance). For the year 2006/07, the inspection programme would generate an estimated 55 revisits. A number of these premises revisits will be undertaken outside standard working hours and arrangements are in place as described above to facilitate this.

It is anticipated that consistent, high quality programmed inspections by the service will, over time, result in a general improvement in standards, reducing the frequency for recourse to formal action.

The performance against inspection targets for all food hygiene and food standards inspections is reported monthly as part of the Neighbourhood Services Department internal performance monitoring. In addition, performance against inspection targets is reported quarterly to the Adult &

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Public Health Services Portfolio Holder as part of the Neighbourhood Services Department plan update.

Port Health

Although Hartlepool is a Port Health Authority it is not a border inspection post.

Fish Quay

There is a Fish Quay within the Authority's area, which provides a new market hall and associated fish processing units.

Alternative Enforcement Strategy for Low Risk Food Premises

From April 2005 an alternate enforcement strategy via "self assessment" may be employed for low risk food premises, i.e. those rated as food hygiene risk Categories E and food standards risk Category C, in accordance with guidance. Self-assessment usually consists of questionnaires for these businesses and a subsequent evaluation of the results of this self-assessment by officers. A percentage of those businesses returning questionnaires are visited to validate the information received, as well as businesses not responding. Inspection visits may also be made where a low risk business is the subject of complaint and where notification of change of business use or proprietorship is received. The Head of Public Protection & Housing believes that the best use of resources at this time is to continue to carry out inspections at these low risk premises. These inspections often cover other legislation such as Health & Safety at Work.

Registration and Approval of Premises

Food business operators must register their establishments with the relevant local authority in accordance with the requirement of Regulation (EC) No 852/2004. This provision allows for the service to maintain an up-to-date premises database and facilitates the timely inspection of new premises and, when considered necessary, premises that have changed food business operator or type of food use.

The receipt of a food premises registration form initiates an inspection of all new food premises. In the case of an existing premises, where a change of food business operator is notified, other than at the time of a programmed inspection, an assessment is made of the need for inspection based on the date of the next programmed inspection, premises history, and whether any significant change in the type of business is being notified. It is anticipated that approximately 109 additional premises inspections will be generated for new food businesses during 2006-07.

A competent authority must with some exceptions, approve food business establishments that handle food of animal origin. If an establishment needs approval, it does not need to be registered as well.

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Premises which require approval include those that are producing any, or any combination of the following; minced meat, meat preparations, mechanically separated meat, meat products, live bivalve molluscs, fishery products, raw milk (other than raw cows' milk), dairy products, eggs (not primary production) and egg Products, frogs legs and snails, rendered animal fats and greaves, treated stomachs, bladders and intestines, gelatine and collagen and certain cold stores and wholesale markets.

The approval regime necessitates full compliance with the relevant requirements of Regulation (EC) No 852/2004 and Regulation (EC) 853/2004.

There are 3 premises in the Borough, which are subject to approval.

Microbiological and Chemical Analysis of Food

An annual food sampling programme is undertaken with samples being procured for the purposes of microbiological and chemical analyses. This programme is undertaken in accordance with the service's Food Law Sampling Policy.

All officers taking formal samples must follow the guidance contained in and be qualified in accordance with relevant legislative requirements and centrally issued guidance, including that contained in the Food Law Code of Practice and Practice Guidance. Follow-up action is carried out in accordance with the food law service's sampling policy.

Microbiological analysis of food and water samples is undertaken by the Newcastle Laboratory of the Health Protection Agency based at the General Hospital in Newcastle, and chemical analysis of samples by Tees Valley Measurement for informal samples and by the Council's appointed food examiner at the Public Analyst Durham County Council for formal samples.

From April 2005 sampling allocations from the Health Protection Agency, which is responsible for the appropriate laboratory facilities, has been based on a credits system dependant on the type of sample being submitted and examination required.

The allocation for Hartlepool is 8,300 credits for the year 2006-07, which includes sampling of water supply in food premises and pool waters.

Points are allocated as follows:

Sample type	No of credits
Food Basic	25
Water Basic	15
Dairy Products	15
Environmental	10
Formal samples	50

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A sampling programme is produced each year for the start of April. The sampling programme for 2006-07 includes national and regional surveys organised by LACORS and HPA/Local Authority liaison group.

Sampling programmes have been agreed with the Food Examiners and Tees Valley Measurement (a joint funded laboratory based at Canon Park, Middlesbrough). These have regard to the nature of food businesses in Hartlepool and will focus on locally manufactured/processed foods and foods targeted as a result of previous sampling and complaints.

A proportion of the planned sampling programme is of imported foods in accordance with guidance from the Food Standards Agency.

Microbiological Food Sampling Plan 2006-07

April Local Shopping Basket Survey	May Fish Dish Survey LACORS Shopping Basket Survey Local Shopping Basket Survey FSA Raw Egg Survey	June Fish Dish Survey LACORS Shopping Basket Survey Local Shopping Basket Survey French Market
July Fish Dish Survey LACORS Shopping Basket Survey Local Shopping Basket Survey LACORS Mobile Food Vendors Survey	August Fish Dish Survey LACORS Shopping Basket Survey Local Shopping Basket Survey Mayonnaise Based Salads Survey	September Fish Dish Survey LACORS Shopping Basket Survey Local Shopping Basket Survey Mayonnaise Based Salads Survey FSA Raw Egg Survey
October LACORS Shopping Basket Survey Local Shopping Basket Survey Approved Premises / Locally Manufactured Products Imported Foods	November LACORS Shopping Basket Survey Local Shopping Basket Survey Home Made Soups, Sauces Meat Dishes Survey Imported Foods	December LACORS Shopping Basket Survey Local Shopping Basket Survey Home Made Soups, Sauces Meat Dishes Survey
January LACORS Shopping Basket Survey Local Shopping Basket Survey Home Made Soups, Sauces Meat Dishes Survey	February LACORS Shopping Basket Survey Local Shopping Basket Survey Internet Sales Survey	March LACORS Shopping Basket Survey Local Shopping Basket Survey Internet Sales Survey

In addition to carrying out food sampling, arrangements are in place to enable inspections linked environmental sampling to be carried out,

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The products sampled as part of the shopping basket survey include:

- Pease pudding
- Black pudding
- Cooked pasta
- Cooked lamb
- Curried food
- Cooked ham
- Ready-to-eat dips
- Fruit used in preparation of meals / sweets e.g. apple, banana, strawberry, citrus etc.
- Profiteroles
- Raw shell eggs

Composition and Labelling Sampling plan 2006-07

MONTH	TEST	SAMPLES
April	No Sampling (processing feeding stuffs samples)	
May	Vitamin C in soft drinks	18
June	Meat Species in takeaw ay meals (joint initiative w ith Stockton)	7
July	Species of fish (fresh fish, fish fingers & similar)	12
Aug	Meat Content locally manufactured pies	2
Sept	Distinguishing between mayonnaise and salad cream in sandw iches & sandwich fillings	30
Oct	Calcium claims in cereal bars	7
Nov	Presence of animal fats in vegetarian meals	5
Dec	Fat content of snacks e.g. crisps	18
Jan	Added sugar or folic acid in breakfast cereals	5
Feb	Sodium, Calcium & Nitrates in mineral w aters	30
Mar	Peanut proteins in takeaw ay meals	7

Total samples = **141**

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Feeding Stuffs

It is planned that four informal animal feeding stuffs samples will be taken this year.

At present feeding stuffs sampling has been given a low priority due to the lack of local manufacturers and packers. Informal samples are, however, taken of packaged goods.

An annual feeding stuffs sampling plan has been drawn up to carry out informal sampling at the most appropriate time of the year in respect of farms, pet shops and other retail establishments.

Feedingstuffs Sampling Plan 2006/07

April - June	0
July - September	1 from retail outlet (statutory statement)
October - December	2 from grain stores for mycotoxins
January - March	1 silage from farm for mycotoxins

Private Water Supplies

There are two premises using private water supplies in their food production, one is a brewery and the other a soft drinks manufacturer. Regular sampling is carried out of these supplies in accordance with relevant legislative regulations.

Food inspection

The purpose of food inspection is to check that food complies with food safety requirements and is fit for human consumption, and is properly described and labelled. As such, the activity of inspecting food commodities, including imported food where relevant, forms an integral part of the food premises inspection programme. Food inspection activities are undertaken in accordance with national guidelines.

Provision of advice, educational materials and courses to food businesses

Following changes in relation to certified courses we are reviewing the training courses offered by the section. Where we are unable to deliver courses we will advise businesses of alternative local providers.

It is recognised that for most local food businesses contact with an officer of the service provides the best opportunity to obtain information and advice on legislative requirements and good practice. Officers are mindful of this and aim to ensure that when undertaking premises inspections sufficient

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opportunity exists for business proprietors to seek advice. In addition, advisory leaflets produced by the Food Standards Agency are made available to business proprietors.

In February 2006 the Food Standards Agency (FSA) introduced Safer Food Better Business (SFBB) aimed at assisting smaller catering businesses to introduce a documented food safety management system. The Tees Valley authorities in partnership with training providers successfully received grant funding from the FSA to deliver free training and advisory visits. Resources during the year will be directed towards this initiative

Guidance is also prepared and distributed to food businesses relating to changes in legislative requirements. The service also encourages new food business proprietors and existing businesses to seek guidance and advice on their business. It is estimated that 70 such visits will be carried out during the year.

Feeding stuffs advice is available via the Council's web site.

A limited level of promotional work is also undertaken by the service on food safety, with minimal impact on programmed enforcement work.

Investigation of Food and Food-related Complaints

The service receives approximately 16 complaints, each year concerning food products, all of which are subject to investigation. An initial response is made to these complaints within two working days. Whilst many complaints are investigated with minimal resource requirements, some more complex cases may be resource-intensive and potentially affect programmed inspection workloads.

All investigations are conducted having regard to the guidance on the 'Home Authority Principle'.

The procedures for receipt and investigation of food complaints are set out in detailed guidance and internal policy documents.

Investigation of cases of Food Poisoning and outbreak control

Incidents of food related infectious disease are investigated in liaison with the Durham and Tees Valley Health Protection Unit and in the case of outbreaks in accordance with the Health Protection Unit's Outbreak Control Policy.

Where it appears that an outbreak exists the Principal EHO (Commercial) or an EHO, will liaise with the local Consultant in Communicable Disease Control and, where necessary, the Director of Durham and Tees Valley Health Protection Unit, to determine the need to convene an Outbreak Control Team. Further liaison may be necessary with agencies such as the Food Standards Agency, the Health Protection Agency and Northumbrian Water.

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Statistical returns are made weekly by the service to the Communicable Disease Surveillance Centre.

It is estimated that approximately 322 food poisoning notifications are received each year. Most cases are sporadic in nature and can be investigated as part of the normal day-to-day workload. It is recognised, however, that in the event of a major outbreak a significant burden is likely to be placed on the service and this would inevitably impact on the performance of the inspection programme.

Dealing with Food Safety Incidents

A national alert system exists for the rapid dissemination of information about food hazards and product recalls, this is known as the food alert warning system.

All food alerts received by the service are dealt with in accordance with national guidance and internal quality procedures.

Food alert warnings are received by the service from The Food Standards Agency via the electronic mail system, and EHCNet during working hours. The Principal EHO (Commercial Services) or, if absent, the Consumer Services Manager ensures that a timely and appropriate response is made to each food alert.

Out of hours contact is arranged through Richard Court, telephone number 01429 869424.

In the event of a serious local incident, or a wider food safety problem emanating from production in Hartlepool, the Food Standards Agency will be alerted in accordance with guidance.

Whilst it is difficult to predict with any certainty the number of food safety incidents that will arise during any 12 month period, it is estimated that the service is likely to be notified of between 80 to 100 food alerts during 2006/07, a small proportion of which will require action to be taken by the Authority. This level of work can ordinarily be accommodated within the day-to-day workload of the service, but more serious incidents may require additional resources and may have an effect on the programmed inspection workload and other service demands.

Investigation of Complaints relating to Food Safety and Food Standards in Premises

The service investigates all complaints that it receives about food safety and food standards conditions and practices in food businesses. Initial response to any complaint is made within two working days. In such cases the confidentiality of the complainant is paramount. All anonymous complaints are also currently investigated.

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The purpose of investigation is to determine the validity of the complaint and, where appropriate, to seek to ensure that any deficiency is properly addressed. The general approach is to assist the food business operator in ensuring good standards of compliance, although enforcement action may be necessary where there is failing in the management of food safety, or regulatory non-compliance.

Based on the number of complaints in 2005/06 it is estimated that approximately 16 such complaints will be received in 2006/07.

Feed Law Enforcement

From 1 January 2006 feed businesses must be approved or registered with their local authority under the terms of the EC Feed Hygiene Regulation (183/2005).

This replaces the previous arrangements (under EC Directive 95/69), as implemented by the Feeding Stuffs (Establishments and Intermediaries) Regulations 1999, which required feed businesses to be approved or registered if they were involved in the manufacture, use or marketing of certain feed additives.

Whereas previously the Authority had only 16 premises registered and no premises approved, EC Regulation 183/2005 extends the above requirement to nearly all feed businesses. This means, for example, that importers and sellers of feed, hauliers and storage businesses will now require approval or registration. Livestock and arable farms growing and selling crops for feed are also within the scope of the provisions of the regulation.

Liaison arrangements

The service actively participates in local and regional activities and is represented on the following:

- Tees Valley Food Liaison group
- The local HPA/Local Authority Sampling group
- Tees Valley Public Health group
- North East Trading Standards liaison group

Home Authority arrangements

The Authority has no formal arrangements with food businesses to act as Home Authority. Informal arrangements are in place with one manufacturer in the Borough. Consideration is to be given during the year as to the possibility of developing formal arrangements in future with this manufacturer.

The Authority is originating authority for two premises, a brewery and a soft drinks manufacturer. Regular visits are made to these premises to maintain dialogue with management and an up to date knowledge of operations.

General

The delivery point for the food law enforcement service is at:

Civic Centre
Victoria Road
Hartlepool
TS24 8AY

Members of the public and businesses may access the service at this point from 08.30 - 17.00 Monday to Thursday and 08.30 - 16.30 on Friday.

A 24-hour emergency call-out also operates to deal with Environmental Health emergencies, which occur out of hours.

6. Resources

Staffing Allocation

The Director of Neighbourhood Services has overall responsibility for the delivery of the food law service. The Head of Public Protection and Housing has responsibility for ensuring the delivery of the Council's Environmental Health service, including delivery of the food law service, in accordance with the service plan. The Consumer Services Manager, with the requisite qualifications and experience, is designated as lead officer in relation to food safety and food standards functions and has responsibility for the day to day management of the service.

The resources determined necessary to deliver the service in 2006/07 are as follows:

1 x 0.25 FTE Consumer Services Manager (with responsibility also for Health & Safety, Licensing and Trading Standards)

1 x 0.35 FTE Principal EHO Commercial (with responsibility also for Health & Safety and Animal Health)

3 x FTE EHO (with requisite qualifications and experience)

1 x 0.56 FTE Part-time EHO

1 x FTE Technical Officer Food

The Consumer Services Manager has responsibility for planning service delivery and day to day management of the Food Law service, Health & Safety at Work, Licensing, Public Health, Water Quality, Trading Standards, Animal Health & Welfare and I.T. as well as general management responsibilities as a member of the Public Protection and Housing Management Team.

4.1 Appendix 1

The Principal EHO (Commercial Services) has responsibility for the day to day supervision of the Food Law Service, Health & Safety at Work, Public Health, Water Quality and Animal Health & Welfare.

The EHO's have responsibility for the performance of the food premises inspection programme as well as the delivery of all other aspects of the food law service, particularly more complex investigations. In addition these officers undertake Health & Safety at Work enforcement.

The food technical officer is also responsible for inspections, as well as revisits, investigation of less complex complaints and investigation of incidents of food-borne disease.

Administrative support is provided by Support Services within Neighbourhood Services department.

All staff engaged in food safety law enforcement activity will be suitably trained and qualified and appropriately authorised in accordance with guidance and internal policy.

Staff undertaking educational and other support duties will be suitably qualified and experienced to carry out this work.

Financial Resources

The annual budget for the Consumer Services section in the year 2006/07 is:

	£000
Employees	721.2
Other	161.9
Support Recharges	117.8
Income	(146.6)
Net Budget	943.2

This budget is for all services provided by this section i.e. Health & Safety, Licensing, Trading Standards and resources are allocated in accordance with service demands.

Equipment and Facilities

A range of equipment and facilities are required for the effective operation of the food law service. The service has a documented procedure that ensures the proper maintenance and calibration of equipment and its removal from use if found to be defective.

The service has a computerised performance management system, ITECS. This is capable of maintaining up to date accurate data relating to the activities of the food law service. A documented database management procedure has been produced to ensure that the system is properly maintained, up to date and secure. The system is used for the generation of

4.1 Appendix 1

the inspection programmes, the recording and tracking of all food activities, the production of statutory returns and the effective management of performance.

During 2006/07 we will be migrating to the Authority Public Protection computer system

Training Plans

The qualifications and training of staff engaged in food law enforcement are prescribed and this will be reflected in the Council's policy in respect of appointment and authorisation of officers.

It is a mandatory requirement for officers of the food law service to maintain their professional competency by undertaking a minimum of 10 hours core training each year through attendance at accredited short courses, seminars or conferences. This is also consistent with the requirements of the relevant professional bodies.

The Council is committed to the personal development of staff and has in place Personal Development Plans for all members of staff.

The staff Personal Development Plan scheme allows for the formal identification of the training needs of staff members in terms of personal development linked with the development needs of the service on an annual basis. The outcome of the process is the formulation of a Personal Development Plan that clearly prioritises training requirements of individual staff members. The Personal Development Plans are reviewed six monthly.

The details of individual Personal Development plans are not included in this document but in general terms the priorities for the service are concerned with ensuring up to date knowledge and awareness of legislation, building capacity within the team with particular regard to vertical directive premises, the provision of food hygiene training courses, developing the role of the Food Safety Officer, and training and development of new staff joining the team.

Detailed records are maintained by the service relating to all training received by officers.

7. Service Review and Quality Assessment

Quality Assessment

The Council is committed to quality service provision. To support this commitment the food law service seeks to ensure consistent, effective, efficient and ethical service delivery that constitutes value for money.

A range of performance monitoring information will be used to assess the extent to which the food service achieves this objective and will include on-going monitoring against pre-set targets, both internal and external audits and stakeholder feedback.

4.1 Appendix 1

Specifically the Principal EHO (Commercial Services) will carry out accompanied visits with officers undertaking inspections, investigations and other duties for the purpose of monitoring consistency and quality of the inspection and other visits carried out as well as maintaining and giving feedback with regard to associated documentation and reports.

The Best Value Performance Indicator BV166, applicable to Environmental Health, is subject to scrutiny. The target for attainment by the service against BV166 standard, which includes the provision of written enforcement policies, planned enforcement activity and measurement of customer satisfaction levels, is 100%.

It is possible that the Food Standards Agency may at any time notify the Council of their intention to carry out an audit of the service.

Review

It is recognised that a key element of the service planning process is the rational review of past performance. In the formulation of this service plan a review has been conducted of performance against those targets established for the year 2005/06.

This service plan will be reviewed at the conclusion of the year 2006/07 and at any point during the year where significant legislative changes or other relevant factors occur during the year. It is the responsibility of the Consumer Services Manager to carry out that review with the Head of Public Protection & Housing.

The service plan review will identify any shortfalls in service delivery and will inform decisions about future staffing and resource allocation, service standards, targets and priorities.

Any relevant amendments to the Council's Best Value programme will be incorporated into the service plan together with any matters identified through quality assessment audits.

Following any review leading to proposed revision of the service plan Council approval will be sought.

Performance Review 2005-06

This section describes performance of the service in key areas during 2005/06.

The Consumer Services Section experienced significant staffing difficulties throughout 2005-06. There has been one long-standing temporary part-time EHO vacancy and in June 2005 this was filled on a temp 1 year contract by student EHO working as Technical Officer, from November 2004 two EHOs started their maternity leave, leaving only the Principal Officer, one EHO and the Technical Officer to provide the service. One of the officers on maternity

4.1 Appendix 1

resigned before returning in September 2005 and the other officer returned in November 2005. The loss of staff had significant effect on the performance of the service affecting the timetable for programmed inspections, the response and resolution of complaints, service improvements.

The services of a Food Safety Consultant have been engaged throughout the year to assist in undertaking the shortfall of category B to E food hygiene and medium to low food standards inspections. However, the use of Consultants has generated follow-up work such as revisits, which are carried out by the permanent staff. In addition existing staff have been encouraged to utilise the overtime scheme.

Inspection Programme

The food premises inspection programme for 2005/06 did not reach the target of 100%. Due to staffing difficulties during the year only 99% of Food Hygiene and 93% of Food Standards inspections were achieved. The outstanding inspections will be added to the programme for 2006/07.

Registration and approval of premises

Premises subject to approval were inspected and given comprehensive guidance with regard to approval requirements. .

Food Sampling Programme

The food sampling programme for 2005/06 has been completed. The microbiological results are:

Microbiological Sampling (1/4/05 - 31/3/06)

	Total number of samples	Number of Samples	
		Satisfactory	Unsatisfactory
<u>Bacteriological</u>			
Surveys			
Shopping Basket	152	131	21
Sandwich	5	4	1
Cooked Turkey	9	8	1
Eggs	2	2	-

4.1 Appendix 1

The composition and labelling results are:

Food Standards Sampling (01.04.05 – 31.03.06):

Nature of Sample	Reason for Sampling	Satisfactory	Unsatisfactory
Locally Produced Foods	Fat Content	23	-
Breakfast Cereal	Salt Content	7	-
Locally Produced Foods	Pictorial Representation	12	-
Soft Drinks	No Added Sugar	6	-
Meat Products	Labelling Regulations	15	7
Fruit Juices	Water Content	24	-
Alcoholic Drinks	Alcohol Content	25	1
Ham / Turkey Sandwiches	Reformed Meats	38	10
Meat Products	Meat Species	13	1
Sandwiches	Labelling Regulations	14	8

Where unsatisfactory samples are identified, officers carry out follow-up work to identify the cause and take appropriate action.

The programme of feeding stuffs sampling was undertaken. Feeding stuffs has been given a low priority due to the lack of local manufacturers and packers.

Food Inspections

The service undertook no formal seizure of unfit food in the year.

Promotional Work

The service was unable to provide food hygiene training during the year due to resources.

To promote Safer Food Better Business (SFBB), in February 2006 resources were directed to delivery of the safer food tees valley initiative. Resources did not allow for any further pro-active activities, although the team has continued to offer advice and information on request with 70 advisory visits to businesses being carried out during the year.

Complaints

During the year the service dealt with 15 complaints relating to the condition of food premises and food handling practice. In addition, 16 complaints of unfit or out of condition food, extraneous matter, mould and unsatisfactory labelling of food items were also received. These investigations have been undertaken all within our target of 2 working days; however, they have had some effect on performance of the inspection programme.

4.1 Appendix 1

Food Poisoning

The service received 322 notifications of food poisoning during the year and investigated 7 outbreaks of infectious disease, most of which occurred in residential care homes and were found to be viral in nature. In addition there was a major food poisoning outbreak within the borough involving 92 persons. This placed a significant burden on the service and inevitably had an impact on performance and the inspection programme.

Food Safety Incidents

The Service received 99 food alerts from the Food Standards Agency during the year. All requiring action were dealt with expeditiously and in all but one instance without significant impact on programmed workloads. No food incidents were identified by the Authority that required notification to the Food Standards Agency.

Enforcement

During 2005/06, no emergency prohibition notices were served on businesses where formal cessation of a good activity was necessary however one voluntary closure of a premises took place. Six improvement notices were served on businesses to ensure compliance with food safety issues. No prosecutions or formal cautions were undertaken.

Improvement Proposals 2005/06

The following areas for improvement are identified in the 2005/06 Food Service Plan.

1. Feeding stuffs

We have implemented a sampling programme and are developing and implementing a documented procedure for feeding stuffs. This work however has not yet been completed due to staffing problems

2. Audit recommendations

We have work towards implementing the recommendations of the inter-authority audit and will incorporate good practice identified in other audits carried out within the Tees Valley Liaison Group. This work however has not yet been completed due to staffing problems

8. Key Areas for Improvement 2006/07

In addition to committing the service to specific operational activities such as performance of the inspection programme, the service planning process assists in highlighting areas where improvement is desirable. Detailed below are specifically identified key areas for improvement that are to be progressed during 2006/07.

4.1 Appendix 1

1. To complete the process of approving / re approving relevant premises
2. To ensure that all relevant premises are registered under feed hygiene legislation
3. Review / internal audit of food quality system

CABINET REPORT

29th August 2006



Report of: Assistant Chief Executive and Chief Financial Officer

Subject: MEMBERS ICT - FLEXIBLE AND REMOTE ACCESS

SUMMARY

1. PURPOSE OF REPORT

The purpose of this report is to outline the approach that it is intended to take to enable members and officers to access the Council's ICT systems from places other than their usual office environment and to improve the facilities available to members attending meetings in the Civic Suite.

2. SUMMARY OF CONTENTS

A key theme of the ICT Strategy is to introduce more flexible working practices. This report outlines a proposal to implement the technology to allow members and officers to work more flexibly by accessing HBC ICT systems from home and other locations. It also proposes installing equipment to allow wireless connectivity from within the civic suite to enable electronic access to papers during meetings thus reducing the reliance on paper copies.

The report explains the rationale behind the proposal, the ICT solutions recommended and the funding details.

3. RELEVANCE TO CABINET

ICT is one of the Workstreams in the Way Forward programme and the ICT Strategy is a key Council document that underpins and supports new ways of working across the authority.

4. TYPE OF DECISION

Key Decision – test (i) applies.

5. DECISION MAKING ROUTE

The decision will be made by Cabinet on 29th August 2006.

6. DECISION(S) REQUIRED

Cabinet is requested to:

- a) agree to the proposal outlined in this report to enable the infrastructure to be established which will allow flexible and remote access to ICT systems
- b) agree that a demonstration of alternative equipment be held to allow members to decide on the most appropriate solution(s) for them.

Report of: Assistant Chief Executive and Chief Financial Officer

Subject: MEMBERS ICT - FLEXIBLE AND REMOTE ACCESS

1. PURPOSE OF REPORT

1.1 The purpose of this report is to outline the approach that it is intended to take to enable members and officers to access the Council's ICT systems from places other than their usual office environment and to improve the facilities available to members attending meetings in the Civic Suite.

2. BACKGROUND

2.1 The introduction of flexible and remote working has been identified as one of the key themes within the Council's ICT Strategy.

2.2 Delivery of the solution recommended in this report will enable members and staff to operate and access council ICT systems from other locations, as if they were based within the office environment.

2.3 In addition, the aim is to improve the ICT facilities available to members during attendance at meetings in the Civic Suite.

3. OBJECTIVES

3.1 There are 4 distinct objectives that need to be delivered in order to fully enable flexible and remote access for members and officers. These are:

- a) access to the back office systems remotely from a Northgate owned PC under a desktop managed service arrangement (DMS PC)
- b) access to the back office systems remotely from a privately owned home PC (Home PC)
- c) wireless network access within the Civic Suite
- d) provision of the necessary equipment to members to enable them to gain access within the Civic Suite.

3.2 This report covers the first three of these objectives. There are a number of alternative devices that could be used to access the data and the provision of equipment to members needs to be agreed in conjunction with the members who will be using them. The plan is to demonstrate the alternative devices, explaining the pros and cons of each so that members are in a position to make an informed choice.

4. SOLUTIONS

- 4.1 The four objectives are to be delivered by a mixture of solutions. This proposal puts in the infrastructure and the solution is scalable to enable additional users to be added in the future should the Councils requirements for flexible working increase.
- a) Access for 50 users via a Northgate owned DMS device (PC or laptop) using a broadband to connect to HBC. Costs agreed to scale up with an additional 150 users. Users authenticate using a personal keyfob and password. Once connected using DMS machine at home will be identical to being located within the Office
 - b) Access for 100 users (50 concurrent) using any broadband enabled PC. Access provided by using a secure internet connection, similar to Webnotes. Users Authenticate using personal keyfob and password
 - c) Secure wireless access to the HBC network from the Council Chamber, Committee Rooms and Members Library.
 - d) Various options are available. Could be a mixture of devices (PCs, laptops, tablets, PDA, etc.) The actual devices to be used will be agreed once members have been provided with a demonstration of the various options.

5. FINANCIAL IMPLICATIONS

- 5.1 The upfront funding required for the proposal including the first year's revenue costs are:

Objective	Detail	Capital £	Revenue £	Total up front costs £
a) DMS PC	Initial 50 user pilot	33,385	4,340	37,725
	Additional 150 users	56,365	12,485	68,850
b) Home PC	100 named (50 concurrent users)	76,315	13,395	89,710
c) Civic Suite	Wireless Infrastructure	34,755	4,620	39,375
d) Members Kit	Estimate – dependant upon kit required	0	50,000	50,000
TOTAL		200,820	84,840	285,660

5.2 Funding – Capital Costs

It is requested that the capital costs and the first year's revenue costs be funded from The Way Forward Fund. The justification for this is that ICT is one of the workstreams in the Way Forward and this proposal is concerned with providing members and officers with the capability to work in a different way in order to provide our customers with a more effective and efficient service.

5.3 Funding - Ongoing Revenue Costs

The ongoing revenue costs in relation to objectives a) and b) will, after the first year, be funded by departments based on the usage taken up across the authority.

There is currently no provision within existing budgets for the revenue costs in relation to objectives c) and d). Therefore, Cabinet will need to consider these items alongside other budget priorities identified for 2007/08 and determine which budget priorities they wish to provide ongoing funding for.

5.4 Business Case

5.4.1 The financial business case for flexible working and remote access becomes very compelling when the number of people actually working full time from home allows the Council to reduce office space, and consequently reduce our building portfolio. The model used to prove this looked at the cost of locating 200 workers in the home, enabling us to empty and then sell or lease Bryan Hanson House, as this is arguably our most saleable building. Assuming that the lease of the building covers its running/maintenance costs, the savings to HBC equate to £250,000 over 5 years.

5.4.2 There are also likely to be savings in printing and distribution costs associated with committee papers as members begin to access them electronically.

6. RISK ASSESSMENT

6.1 The potential for risk lies mainly around the Council's inexperience of utilising home working and the associated issues that this brings. HBC have attempted to mitigate against as many of these as possible through both the technical solution and the policy for home working. In order to manage the risk as effectively as possible, the idea is to select one user for home working and enable this user to trial the processes and policies and use this experience to feed back for future home workers. It is likely that this process will be iterative as more feedback and experience of home working is gained.

- 6.2 The costs quoted for the wireless infrastructure in the Civic Suite are based on the assumption that cabling is completed as part of the Contact Centre Refurbishment and are still subject to a site survey. There is therefore, a risk of increased costs if the site survey shows up anything unexpected or the cabling is not carried out as part of the refurbishment.
- 6.3 A further element of risk lies around the level of take-up by members and officers and the possible reluctance to embrace the technology and the new ways of working. This can be mitigated against by ensuring that the technology is user friendly and reliable and that any necessary training, coaching etc. is provided.

7. TIMESCALES AND MILESTONES

Action	When
Proposal agreed by Partnership Board	July/Aug 2006
Submission to Cabinet	Aug 2006
Demonstration of alternative equipment to Members	Sept/Oct 2006
Project commencement	Sept 2006
Project completion	Nov 2006

8. RECOMMENDATIONS

- 8.1 Cabinet is requested to:
- a) agree to the proposal outlined in this report to enable the infrastructure to be established which will allow flexible and remote access to ICT systems
 - b) agree that a demonstration of alternative equipment be held to allow members to decide on the most appropriate solution(s) for them.

CABINET REPORT

29th August 2006



Report of: Head of Public Protection & Housing

Subject: To Consider and Approve the Supporting People Five Year Strategy 2006-11

SUMMARY

1. PURPOSE OF REPORT

A draft Supporting People Five Year Strategy for 2006-2011 is attached as Appendix A. The Strategy sets the long-term direction for housing related support services by providing a framework based on the Local Strategic Partnership's vision for the future of Hartlepool.

2. SUMMARY OF CONTENTS

The report outlines the key aims and strategic priorities of the Supporting People Five Year Strategy. An Action Plan of how the strategy is to be implemented is attached to the Strategy as Appendix 8.

3. RELEVANCE TO CABINET

This strategy has strategic relevance across a range of portfolios and in particular is key to Adult and Public Health.

4. TYPE OF DECISION

Key Decision - Tests (i) and (ii) apply

5. DECISION MAKING ROUTE

The Supporting People Commissioning Body considered and approved the draft Five Year Strategy at its meeting held on 11 July 2006 prior to

submission to Cabinet. Following approval by Cabinet, the Strategy will be submitted to the Department of Communities and Local Government.

6. DECISION(S) REQUIRED

Cabinet is recommended to:

Consider and approve the Five Year Strategy prior to submission to the Department of Communities and Local Government

Report of: Head of Public Protection & Housing

Subject: To Consider and Approve the Supporting People Five Year Strategy 2006-11

1. PURPOSE OF REPORT

- 1.1 A draft Supporting People Five Year Strategy for 2006-2011 is attached as Appendix A. The Strategy sets the long-term direction for housing related support services by providing a framework to work from, based on the Local Strategic Partnership's vision for the future of Hartlepool.

2. BACKGROUND

- 2.1 Supporting People is a national programme delivered by local authorities working in partnership with probation, health, Social Services (now Adult and Community Services) and supported housing providers. The Supporting People programme is committed to providing a better quality of life for vulnerable people to live more independently. The programme provides housing-related support to prevent problems that can often lead to hospital admissions, institutional care or homelessness and also helps vulnerable people to establish and successfully maintain a home.

The introduction of the Supporting People Programme in 2003 was subsequently implemented with reference and guidance from the first Supporting People Shadow Strategy produced in 2002. Guidance from Department of Communities and Local Government (previously ODPM) makes it clear that the Supporting People Strategy must be set within a strategic framework including the housing strategy. The overall strategic direction is outlined in the Community Strategy and it is from this that Supporting People takes its lead.

The Five Year Supporting People Strategy continues to build and develop the themes identified in the Shadow Strategy.

The Supporting People programme (£3.8m annually) must contribute to and complement a great many other strategies, but at the same time have its own identity and vision.

3. CONSULTATION

The Strategy was written taking into account a range of best value reviews, reports etc. Considerable consultation has taken place on the draft Strategy including the following:

- Older Persons Local Implementation Team
- Learning Disabilities Partnership Board
- Mental Health Local Implementation Team
- Health and Social Care Strategy Group
- Service Users Consultation Event
- Providers Reference Group

The draft strategy has also been circulated to the Primary Care Trust, Probation Service, and through the various planning groups, some of which are mentioned above.

The SP Commissioning Body and Partnership Board which steer the SP programme and include a range of stakeholders have also considered the strategy.

4. IDENTIFIED PRIORITIES

- 4.1 The Supporting People programme plans all housing related support services within the Borough, wherever they are provided by, in a co-ordinated way. All providers are required to work to a certain quality and to improve their services. If services are not meeting people's needs they can be changed or replaced. The Council's overall aim is "to take direct action and work in partnership with others to continue the revitalisation of Hartlepool life and secure a better future for Hartlepool people". Services offered include support to older people (e.g. sheltered housing and alarms for the elderly, advice and assistance given through the Home Improvement Agency), supported housing schemes (including for people with learning disability, mental health issues, young people with complex needs and young parents), floating support to help maintain people in their own homes (e.g. homeless prevention and ongoing independence), contribution to the respect agenda (through support to encourage independence and integration)

The vision for the Supporting People Strategy is underpinned by five themes, which reflect the aims and objectives of the nine themes of the Hartlepool Partnership.

- Regeneration
- Prevention
- Social Inclusion
- Partnership
- Access to Services and accommodation

These themes have enabled the development of future strategic priorities:

- The re-balancing of services for older people including the development of a 'Retirement' Village and other Extra Care services. This will also include the needs of older carers, the growing number of people with a learning disability who live into old age and the growing number of older people with dementia.
- Improvements in access to move-on accommodation.
- Accommodation based service for drug users linked with other agencies that will also address surrounding issues of housing, crime reduction, mental health problems and managing chaotic behaviour.
- Floating support services for young people.
- Schemes for drug users and recent users to help them become drug free and stay drug free.
- Floating support services for people with substance misuse.
- Ex-offenders including serious, persistent offenders.

Commissioning Statement

In order to develop services to meet the strategic priorities identified above the results of the needs and supply analysis were considered (see sections 6 and 7 of the Strategy). This identified where gaps in our services exist. Our Commissioning priorities are based upon those gaps identified as follows:

- Reshape and retarget existing accommodation-based services to ensure the most effective use of scarce resources
- Commission a number of carefully targeted new accommodation based services
- Considerably expand the amount of floating support available
- Review and strategically reconfigure young people's services to meet strategic priorities above
- Review and strategically reconfigure older people's services to meet the strategic objectives of older people's services and identified need of SP services
- Introduce services for people with complex needs including people with substance misuse and mental health problems.

The Full Commissioning Statement is in Section 9 of the Strategy.

5. ANNUAL PLAN

- 5.1 The Annual Plan (section 12 of the Strategy) sets out activities planned for Supporting People in Hartlepool over the next year. Each of the activities relates to the strategic priorities identified in Section 3 of the Five Year Strategy.

The Annual Plan also identifies the key performance targets of the Supporting People programme by which the Department of Communities and Local Government measure the performance of the Supporting People Team. It

also identifies targets identified by the Supporting People team to meet Hartlepool Council performance targets.

The Annual Plan will be the means of monitoring progress and reviewing the Five Year Strategy.

6. CONCLUSION

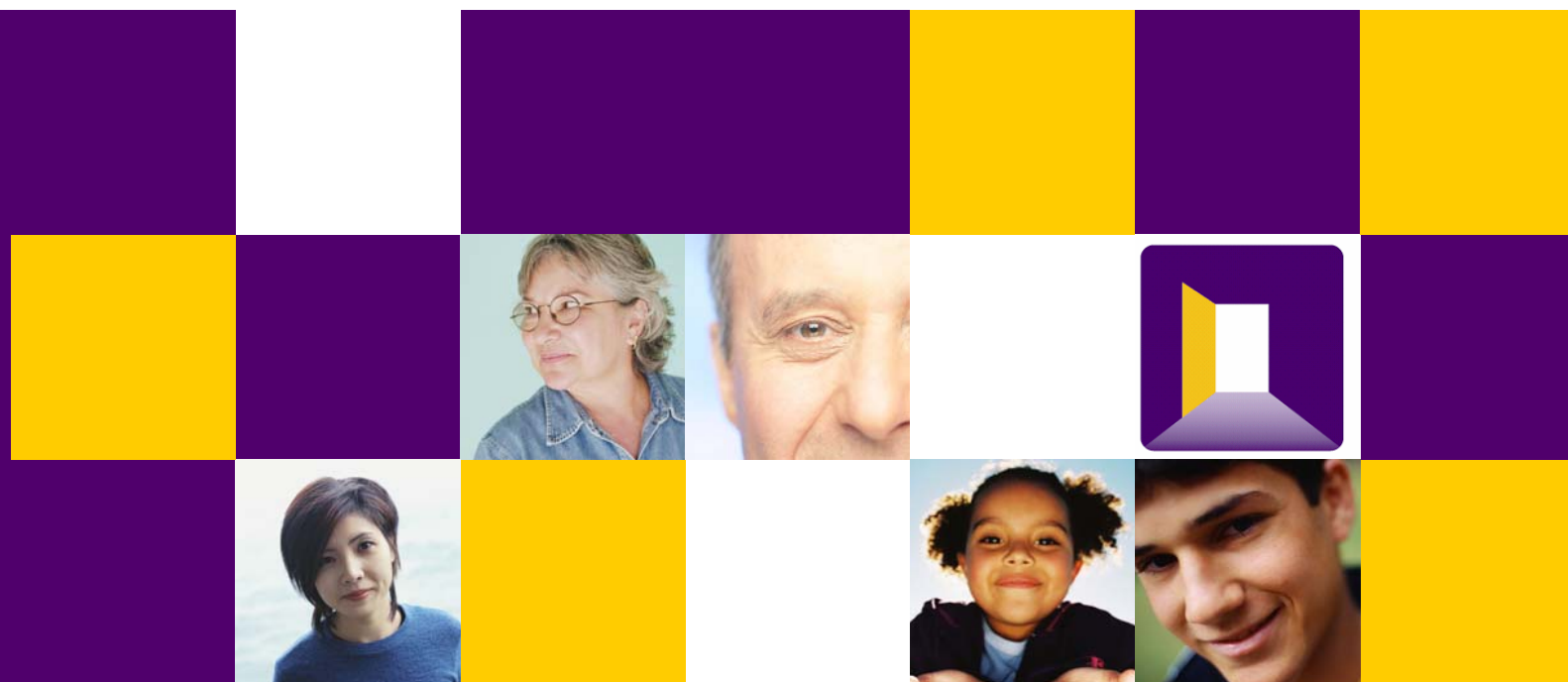
- 6.1 The Strategy sets out how we will achieve good quality services that will have been reshaped or developed to more closely align with local strategic priorities and are flexible enough to meet the changing needs of service users.

7. RECOMMENDATION

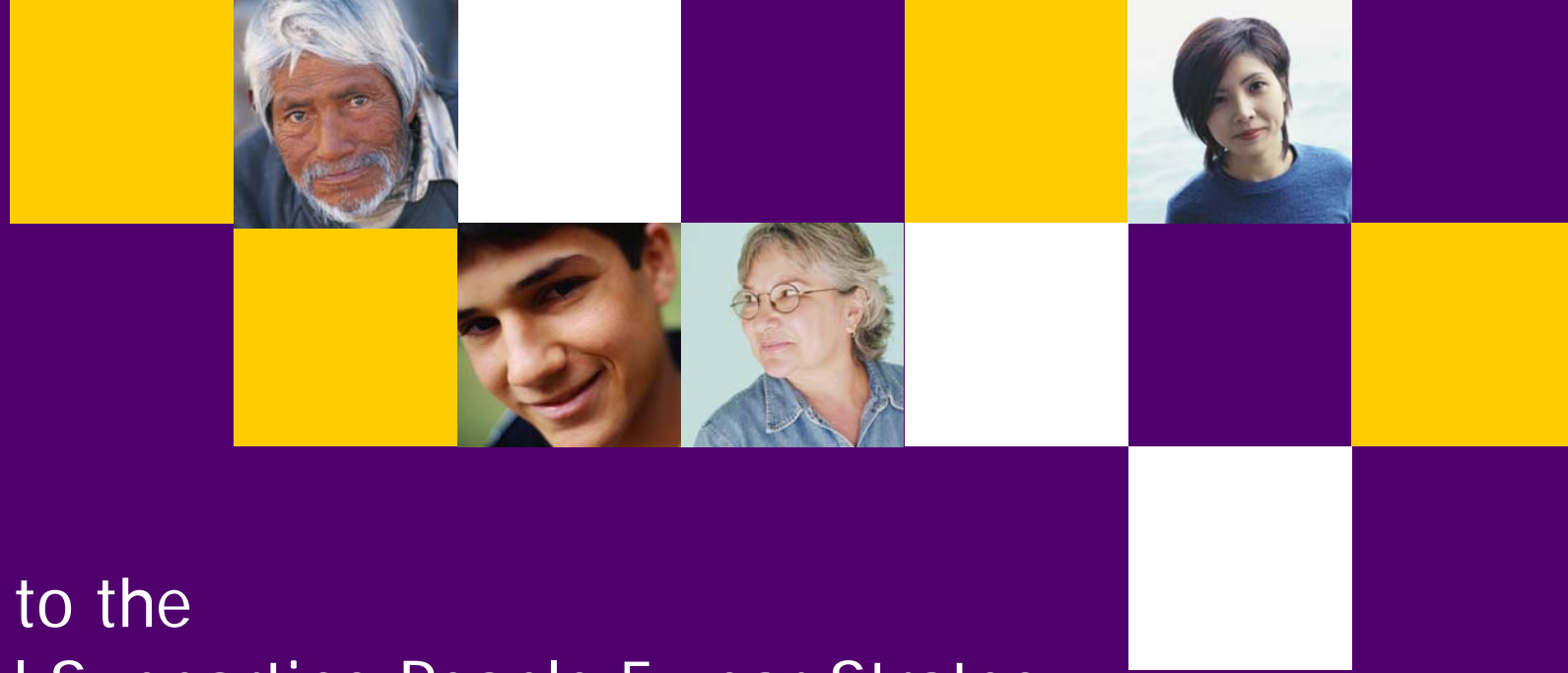
That Cabinet considers and approves the Supporting People Five Year Strategy.

The Hartlepool Supporting People 5 year Strategy

2006 – 2011



supporting independence



Welcome to the Hartlepool Supporting People 5 year Strategy

2006 - 2011

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Section 1



Executive Summary

Hartlepool Council's Supporting People 5 year strategy aims to set the long term direction for support services by providing a framework to work from, based on the Local Strategic Partnership's vision for the future of Hartlepool, and an assessment of the current supply of support services compared to the needs of the service user. As well as this, through the monitoring and review processes, it aims to work towards developing high quality services that are innovative and based on best practice. A description of the way this plan was developed can be found in Section 2.

The Council and its partners began the detailed implementation of Supporting People in 2001 publishing the Shadow Strategy in 2002 and successfully meeting the implementation requirements in 2003. (We have reviewed our progress in Section 5).

This plan is the first opportunity to fully look at the longer-term direction of Supporting People. It is a working document that reflects the continuing development of the understanding and role of support services and therefore it will be reviewed and updated through out its life (see Section 11)

Executive Summary

Five Year Strategy Overview

Strategic Vision

Encapsulated in Section 3 is our vision for support services. The overall strategic direction is outlined in the Community Strategy and it is from this that Supporting People takes its lead. “A good quality of life for all”, including those who need support is Hartlepool’s aim. Identifying those who may need support has emerged as an issue that is being addressed through a range of mechanisms including policies and procedures around homelessness and referral procedures and criteria used by service providers.

Developing new ways of working

It is recognised that different agencies will need to work together to deliver strategic implementation, and this is being achieved through the use of existing strategic planning groups. Direct links with a wider group of stakeholders to establish joint working towards shared goals is seen as a priority for strategically developing services by social inclusion and health. This sets the framework for co-ordinated and cohesive responses to the needs of individuals and local communities.

The vision is underpinned by five themes:

1. Regeneration
2. Prevention
3. Social Inclusion
4. Partnership
5. Access to services and accommodation

These themes have enabled the development of future strategic priorities:

- Accommodation based service for drug users linked with other agencies that will also address surrounding issues of housing, crime reduction, mental health problems and managing chaotic behaviour
- Schemes for drug users and recent users to help them become drug free and stay drug free
- Floating support services for young people
- Floating support services for people with a substance misuse problem
- Ex-offenders including serious, persistent offenders
- The re-balancing of services for older people including the development of a Care Village and other Extra Care services. This will also include the needs of older carers, the growing number of people with a learning disability who live into old age and the growing numbers of older people with dementia
- Improvements in access to move-on accommodation

Executive Summary

Financial Position

In section 4 we consider the financial position. Since the initial funding allocation, we have been subject to one rise, and subsequently, two falls in the programme grant, to a position of being £25,064 above that of the 2003/2004 initial grant. This has had implications for the funding of existing services and limited our ability to commission new services.

The long-term prospects are just as unclear, with the possibility of a further reduction of £192,238. However, the ODPM have advised that this should be taken as an indication of an increased allocation in the long term as a result of a “distribution formula” that they are developing. For financial modelling purposes, we have produced four scenarios:

1. In the first scenario we have assumed the position of the guaranteed minimum set by the ODPM, with no growth, followed by a standstill position for two years.
2. In the second scenario we have assumed a stand still position followed by two years of very modest growth (2%).
3. In the third scenario we assume a modest benefit as a result of the distribution formula of £27,977, followed by a standstill position for two years, owing to the capped funding of £1.7billion for the programme.

4. In the fourth scenario we see the required minimum needed to continue funding existing services, and develop new services in-line with our strategic development.

Fig 1 Funding scenarios (£million)

Scenario	2006/07	2007/08	2008/09	2009/10
1	£3.844	£3.652	£3.652	£3.652
2	£3.844	£3.844	£3.921	£3.999
3	£3.844	£3.872	£3.872	£3.872
4	£3.844	£4.132	£4.132	£4.132

We consider the lower of these options to be below that required to fund the programme including existing, and scheduled new services. The absolute baseline required to fill the most pressing gaps in services is scenario 4, the highest figure, this will allow for a much speedier implementation of the highest priorities, along with an innovative programme of additional developments.

If we were to receive increases in excess of what has been estimated over five years, we would bring forward priorities from the ‘unmet needs’ identified in the Needs Analysis (Section 6). We also need to plan the use, of some of these resources on a sub-regional level. We would therefore expect to see a much stronger sub-regional or regional focus on commissioning.

Executive Summary

Financial Position (continued)

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Under these scenarios, a proportion of these service developments will be funded by:

- Achieving efficiency savings, service change and service decommissioning through service reviews
- Developing funding packages between Supporting People and partner agencies

We optimistically hope that through a combination of increased grant and service change to be able to fund between £800,000 and £1 million in new or improved services by the end of five years.

Commissioning Statement

In Section 7 we have brought together the results of the needs and supply analysis and identified where gaps exist and in Section 8 we consider the results of the review programme before setting out our commissioning intentions in Section 9.

Over the next 5 years we will:

- Reshape and retarget existing accommodation-based services to ensure the most effective use of scarce resources
- Commission a number of carefully targeted new accommodation based services
- Considerably expand the amount of floating support available
- Review and strategically reconfigure young people's services to meet strategic priorities above
- Review and strategically reconfigure older people's services to meet the strategic objectives of older people's services and identified need of SP services
- Introduce services for people with complex needs including people with substance misuse and mental health problems

Executive Summary

Client Group Specific Development

Remodelling:

- Remodel sheltered housing to meet changing needs including for people who are physically or mentally frail
- Identify services through the review process that may become either culturally or gender specific
- Re-target hostel accommodation for single homeless to take account of the range of needs being supported

Floating Support/Reshaping/Expansion of services:

- Young People Services – development of additional floating support
- Development of a service for substance misuse and offenders.
- Develop specialist support services for people with complex needs including mental health issues
- Develop rescuing services for those excluded from housing
- Develop assistive technology solutions to all vulnerable people where appropriate

New Build:

- Complete the development of shared ownership properties for people with Learning Disabilities 2005/6
- 2006 Onwards Extra Care Development for Older People
- 2007 onwards-Development of an Retirement Village
- 2006 Development of Scheme for young people with complex needs (under 25 years)

Annual plan

Although this plan considers the long-term direction we also need to consider immediate implementation issues. In section 12 we have set out our plans for 2005/6

Delivering the Strategy

We see this strategy as the platform for the next phase of development of Supporting People. There is no doubt that we face a number of difficult challenges and that we are dealing with a dynamic set of circumstances. We therefore recognise that we need to constantly review and up-date this plan to take account of the impact of our work and changing needs.

Executive Summary

We now have established decision-making systems to monitor and review progress and are adding additional mechanisms for Service User involvement. We particularly want to build on the success we have had in engaging Service Users in the development of this plan

We are also fully aware that financial uncertainty and rapid change will create risks. We are concerned that Service Providers are also facing a particularly difficult period and will work closely with them to ensure stability in services while implementing change. In Section 11 we have set out how we will deal with those risks

Consultation on the Strategy

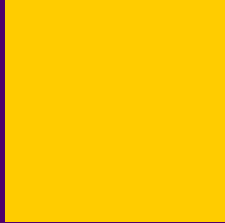
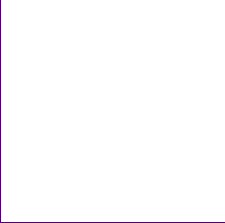
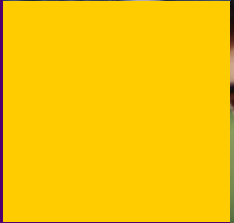
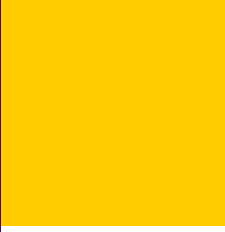
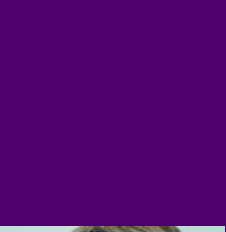
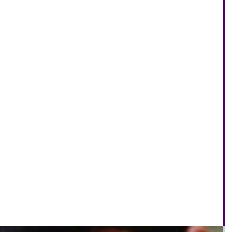
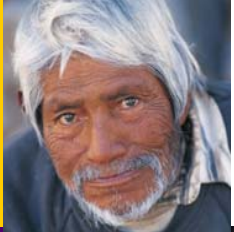
As part of the on-going process engagement with stakeholders and service users the strategy will be published for comment on the Council's Website. It will also be circulated to forums and planning groups across Hartlepool. These comments will form part of the review of this plan

Conclusions

Over all we have been cautious but optimistic in setting the direction for the next 5 years. We have set out key strategic areas of change that will begin to re-shape the pattern of services to more closely align with our analysis of needs.

We know that as these changes are made new issues will emerge and we expect to see further changes in the wider environment. We have therefore set out to develop a set of mechanisms and tools that will be sensitive to these changes and help us to plan for the future while delivering the best possible range and quality of services now.

Section 2



Introduction

The development of Supporting People has been on going in Hartlepool since 2001. In 2002 we published the first plan for Supporting People, the Supporting People Shadow Strategy ¹ that brought together support services for 16 different client groups in one budget. The Shadow Strategy was produced at a time when the Government had not fixed either local or national budgets so this important element was not included in the shadow strategy.

Supporting People formally came into being in April 2003 when local control was taken of the Supporting People budget. This strategy is therefore the first formal plan to be published since the introduction of Supporting People. Anyone who would like to know more about the original purposes of Supporting People and the extent of its responsibilities can find these in the Shadow Strategy or by accessing the Council's Website.²

The Supporting People programme underpins and mirrors other strategies, and cannot be viewed in isolation from them. This is not to devalue Supporting People, but to highlight its importance in contributing to so many local priorities. However, that does not mean that the Supporting People strategy simply lists everybody else's priorities. Supporting People funds housing-related support, and although boundary lines are sometimes hard to draw, this is different from both the care and the housing management services provided by partner agencies.

The strategic vision acknowledges that success will depend on a strong partnership with service providers, since the programme needs their goodwill, skill, and financial resources. For example, any new building or refurbishment will depend on providers raising the necessary capital money, since Supporting People only funds revenue costs. This entails risks for providers, especially when long-term revenue funding is not secure. Work to reshape services can only therefore be undertaken in partnership with providers, and they have been an important part of developing the strategy.

Introduction

About this Plan

We have not attempted to cover all of the many detailed and sometimes complex issues relating to Supporting People. We have tried to keep this plan as concise as possible and in doing so have summarised much of the information that was produced to develop this plan. We have also not repeated information that can be found in other plans. We have referenced our source material and we have included an “evidence base” that covers the background research that supports this plan. Appendix 1 provides information on our source materials.

How this Plan was Developed

This strategy has been developed as part of an ongoing process of engagement with a wide range of people and organisations that have an interest in Supporting People.

The strategy development has been overseen by the Commissioning Body, and included consultation with service users, service providers and a wide range of stakeholders.

Appendix 2 shows the decision-making structure in Hartlepool. All the formal partners in Supporting People, health, housing, probation and social services have signed up to this strategy before it is presented to Hartlepool Council’s Cabinet for final approval and submission to ODPM.

At the heart of the strategy is a needs and supply analysis. We carried this out by:

- Carrying out a desk-top analysis of extensive research information, plan and strategies
- Interviews and meetings with planners, service providers and service users
- Consultation on the results of this analysis

Service user views

The views of service users and providers have been sought through a variety of methods. The points they made have been included in the relevant sections under the needs analysis (Section 6 and Appendix 6); we have included our Service User Involvement Strategy in Appendix 3. We think this approach makes it clearer that all views received fed into the needs analysis and strategy.

We gathered services user views mainly by making use of consultation mechanisms established around existing planning groups. We also held a Service Users Forum, from which a focus group has now been developed. In addition, we took advantage of consultation carried out in the development of related housing, health and care plans. This was particularly helpful in accessing the views of services users who do not readily involve themselves in consultation processes. As an example we made use of extensive user consultation that took place in the development of

¹ Submitted to DTLR October 2002

² Copies can be obtained from Supporting People Team - Hartlepool

Section 3



The Vision and Future Direction

Vision

The great advantage of Supporting People is that the programme plans all support services within the Borough, whoever they are provided by, in a co-ordinated way. All providers are required to work to a certain quality, and to improve their services year by year. If services are not meeting people's needs, they can be changed or replaced. The Council's overall aim as: *'to take direct action and work in partnership with others, to continue the revitalisation of Hartlepool life and secure a better future for people'*.

The Community Strategy Vision is that: *'Hartlepool will be a prosperous, caring, confident and outward looking community, in an attractive environment, realising its potential. To achieve this vision we will continue the regeneration of Hartlepool. We will therefore promote and improve the economic, social and environmental well being of the town, taking into account the needs of future generations'*.

Hartlepool Partnership was set up in 1999. It is made up of a network of sub-groups, or partnerships, which bring together a range of local organisations to give the town a strong, united voice. There are nine themed partnerships, which are summarised in the table below. Each themed partnership is responsible for overseeing the implementation of their chapter of the Community Strategy and managing performance. The Partnership Board has 40 members and is chaired by the local MP, Iain Wright.

Fig 2. The 9 themes of Hartlepool Partnership

Theme	Aim
Community Network	Voice for voluntary and community sector
Culture and Leisure	Develop a cultural identity, attract visitors and engender in residents a sense of pride in area
Economic Forum	The theme partnership for jobs and the economy
Education and Sure Start (pre-16 education)	Working together to deliver pre 16 education
Environment	To secure an attractive and sustainable environment, which is safe, clean and
Health and care Strategy Group	Ensure access to highest quality health, social care and support services and improve the health, life expectancy and well-being of the community
Housing	Provide access to high quality and affordable housing by meeting housing needs in Hartlepool, addressing housing market issues, achieving the decent homes standard and preventing homelessness
Life-long learning	For lifelong learning (over 16)
Safer Hartlepool	Make Hartlepool a safer place by reducing crime, disorder and fear of crime, in particular reducing domestic burglary, anti-social behaviour and drug-related crime.

The Vision and Future Direction

The Supporting People programme contributes mainly on four priorities: -

Priority 3 – Health and Care

Ensure access to the highest quality health, social care and support services and improve the health, life expectancy and well being of the community

Priority 4 – Community Safety

Make Hartlepool a safer place by reducing crime, disorder and fear of crime

Priority 5 – Environment and Housing

The main priority of this theme is to secure a more attractive and sustainable environment that is safe, clean and tidy, and access to quality and affordable housing for all.

Priority 7 – Strengthening Communities

Empower individuals, groups and communities and increase the involvement of citizens in all decisions which affect their lives.

Supporting People programme must keep two forces in balance. It must contribute to and complement a great many other strategies, but at the same time must have its own identity and vision. Below is set out the programme's own vision:

- *Ensure that a wide range of services are provided, so that service users can receive the level of support they need, in short term accommodation, longer term supported housing or their own homes as appropriate*
- *Ensure that all services are aimed at helping service users to achieve as much independence in the community as possible*
- *Achieve good value for money, so that services are affordable to those who have to pay for them*
- *Provide for a diverse group of people, from all parts of the community*

The Vision and Future Direction

Deliver the Vision—Themes

To deliver the vision the Commissioning Body will:

- Take responsibility for ensuring that Supporting People strategically links to other key planning groups, locally, within the region and at a national level(See Appendix 4)
- Sets performance and quality standards that measure progress based on agreed outcomes for service users
- Engages with service users and stakeholders to ensure the services remain relevant to current and future needs

Our main purpose is to ensure that through service planning and monitoring we deliver a set of services that produce the right set of outcomes for service users. The focus of this plan is therefore on these outcomes. We have agreed the following five themes that will structure our plans to meet changing needs and expectations:

Regeneration

Among many factors that will drive change in the town over the next 5 years the one that will probably have most impact is the regeneration plans for Hartlepool. The New Deal for Communities area covers areas of Hartlepool where there are significant levels of support needs. The work is focused on improving the quality and mix of housing, and covers areas of low house values and poor housing.

Two regeneration schemes are currently underway in central Hartlepool – in West Central Hartlepool through New Deal for Communities and in North Central Hartlepool. Hartlepool has a high proportion of high-density small terraced houses. These houses used to be mostly owner occupied; however many are now empty or privately rented. Over the next 2/3 years approximately 800 houses will be demolished and replaced with lower density homes for sale (including shared ownership). The regeneration schemes are aimed at contributing towards ensuring community sustainability. The Council's Regeneration Strategy aims to achieve a balanced housing market over the next 15/20 years

The key challenges to be addressed are:

- Supported accommodation and support services may be affected by the changes as service users and potential service users are relocated
- The areas affected include service users from all the client groups
- Existing strong Links need to be built on and maintained with the regeneration programmes to co-ordinate and manage change
- The regeneration programmes may create opportunities for service change and development

The Vision and Future Direction

Prevention

The single most important message from service users was the desire either to retain, or regain, independence. The provision of support services has one overall aim, to enable vulnerable people to be able to live in the community, with the measure of independence that will provide the greatest quality of life for the individual and their family. Alongside this, agencies should aim to ensure that the community is not put at risk by this level of independence, in terms of either safety or general comfort. To achieve this in all sectors and for all client groups requires co-ordinated and whole systems thinking. This has been a feature of the development of services in Hartlepool.

Applying whole systems thinking across all systems, and developing an enabling and preventative culture should help to reduce, for example, the numbers of people coming out of treatment for drug abuse and failing to be housed in appropriate accommodation. Assessment of risk as well as the optimum setting for achieving independence and stability, shared across agencies, could help to break some of the cycles of homelessness and institutionalisation that are apparent.

The key challenges to be addressed are:

- Assessing the effectiveness of current services in delivering the desired outcomes
- Negotiating service improvement and change to achieve these outcomes
- Linking to existing performance indicators to measure these outcomes to ensure a co-ordinated approach
- Understanding the rapid changes that are taking place in service user needs and expectations
- Making sure that suitable move-on accommodation is available to ensure that people do not stay in supported accommodation beyond the time when they can be independent
- Recognising that there needs to be a balance between monitoring and recording of performance to ensure providers do not face an unnecessary burden of administration

The Vision and Future Direction

Social Inclusion

A key purpose of Supporting People is to ensure that vulnerable members of the community who are in need of housing related support are able to make informed choices, and play a valued role within the community. Alongside this goes a model of support that builds in both the concept of social inclusion and that of moving towards prevention. This model assumes that there is no natural hierarchy in the field of housing support, since a person needing support may wish to enter the field at any of the points. In aiming to prevent a move into institutional care, there is the possibility of progression from one level to another. It further assumes that points of access would be local and based on individual needs, rather than access being through different agencies for each type of support. The aim is to shift the balance of services upstream in terms of promoting independence and choice from levels 5 and 4 to levels 3, 2 and 1.

The model proposes a system of support in which any of the forms of support/housing can link into the individual's own networks; reflect the individual's needs, and offer value and self worth. A person may enter the system at any point, may move from one to another, and may access them all in their own locality. The network would be highly integrated, with protocols for transferring between one type of support and another.

Fig 3. A Social Inclusion Approach to Housing Related Support:

- Level 1 – Community Support
- Level 2 – Specialist Floating Support
- Level 3 – Support to face short/medium term crisis
- Level 4 – Long-term Scheme based support
- Level 5 – Support linked to Institutional Care

The key challenges to be addressed are:

- Taking a person centred approach to the delivery of services and meeting needs
- Developing a performance measure that focuses on service users being able to play a normal role within the community
- Providing support in normal community settings rather than specialist accommodation where appropriate
- Challenging pre-conceptions about the risks and difficulties about supporting people in the community
- Addressing the needs of differing BME communities sensitively
- Making contact with and addressing the needs of those people who are in need but for a variety of reasons do not seek help
- Continuing to research the needs of service users and maintaining a dialogue about their current and future needs

The Vision and Future Direction

Partnerships

The strategic vision acknowledges that Supporting People is built upon a range of partnerships, and it is upon these relationships that the successful planning and delivery of the programme depend. There are many and differing reasons for needing to sustain a wide range of relationships and these include financial, operational, business and performance related matters.

The task is made more complex by the diverse range of client group areas, each of which has its own special requirements and the scale of regeneration that is planned. Partnerships also involve working closely at a community level to ensure a co-ordinated and cohesive approach to community as well as individual needs. These areas of activity have very significant resource implications but also we recognise that they are essential if we are to achieve our objectives

Access

Access to the right accommodation at the right time is crucial. It is also important to recognise that some of the service users have additional disadvantages, and they can act as barriers to accessing services and accommodation. Some people do not access services due to a lack of information. Some services may limit access because of the location or design of the building in which the service is provided.

It is important to ensure that services are able to address the support

Key Challenges are:

- Maintaining the capacity to sustain all the necessary relationships
- Balancing a diverse range of interests
- Agreeing shared objectives and outcomes

Key Challenges are:

Ensuring fair access to services for:

- People from BME communities
- Disadvantaged and resource intensive groups
- Access to services regardless of tenure
- Ensuring that decision-making structure provide appropriate access for all stakeholders and also that there are no undue influences
- Ensuring that access to accommodation is available including move-on and permanent accommodation

The Vision and Future Direction

Priorities

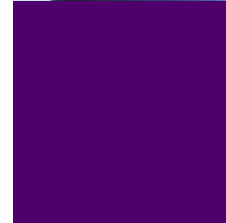
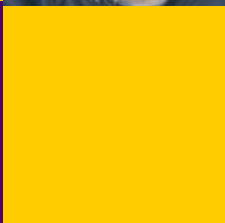
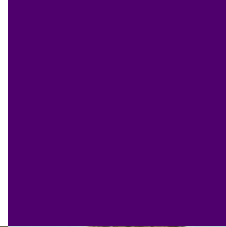
In setting these themes and challenges the following priorities emerge for service planning

Priority	Measure
Minimising the impact of regeneration	Build on strategic links with regeneration programmes Ensure that appropriate SP needs are assessed in regeneration areas Addressing the implications for other support services in Hartlepool
Increasing focus on needs of groups that may be described as Socially Excluded	Increase in numbers receiving either general or specialist support Increase the numbers of substance and alcohol misusers receiving specialist support Increase the numbers of Offenders and Young Offenders who receive support
Change in balance between floating support and accommodation based solutions	Increase the proportion of services provided to people with secure accommodation Proportionately fewer people in supported accommodation Reduction in time in supported accommodation before moving into the community
Managing service change	Manage SP contracts effectively
Focus services on the prevention of home-loss	Increase the proportion of services that provide an early intervention Reduction in numbers being made homeless Reduction in numbers entering hospital through emergencies
Re-balancing of services between people who live in social rented accommodation and other sectors of the community	Increase the numbers of owner-occupiers/private tenants who receive a service Work jointly with 'housing' on the provision shared ownership that offers an element of support

Priority	Measure
Addressing needs for specialist services	Increase the number of people who have complex needs who receive a service
regional	cross-boundary services
Access to "move-on" and permanent accommodation	Agree protocols with housing providers
Funding support services	Continue to look for ways to lever in additional funds
Anticipating future change	Consultation with service users Research programme Maintenance of Partnerships

These priorities create the structure for our commissioning intentions that can be found in Section 9

Section 4



Identifying Resources

Revenue Budget 2005/06

Our revenue allocation for payment of SP subsidy in 2005/06 is £3.9 million. This is £175,662 (4.31%) less than 2004/05 levels.

Funding beyond 2005/06 - Impact of distribution formula

In December 2002, the ODPM consulted on a formula for re-allocating Supporting People resources between authorities. Its aim was to enable the ODPM to calculate a share of the national budget for Supporting People resources for each authority ensuring that funding reflected needs. The formula was revised during 2004, and again in 2005 culminating in final consultation through the first six months of 2006. We await the final decision on this in the autumn of 2006 to establish the full impact on the position of our programme.

Where previously the programme Grant has relied upon historical data for distribution, the formula has been designed to take account of differences between the main Supporting People client groups, and:

- The relevant population estimate for the authority (e.g. numbers of people over 60 based on census figures)
- Relative differences in need (each client group has a weighted score for relative need based upon research)
- Relative differences in age (adjusting for the impact of age upon needs)
- Relative differences in cost (adjusting for price differences around the country)

All but one authority nationally had their grant for 2005/6 reduced. However an element of re-distribution was applied in this process and reductions varied. Hartlepool fell into a category with those authorities that had their budgets cut by less than 5%.

Identifying Resources

Revenue Budget 2006/07 to 2009/10

Our revenue budget for 2007/08 has not been announced. Furthermore, the years 2008/09 and 2009/10 are outside of the Government's usual three-year planning period. So, for financial modelling purposes, we have produced four scenarios:

1. In the first scenario we have assumed the position of the guaranteed minimum set by the ODPM, with no growth.
2. In the second scenario we have assumed a stand still position followed by two years of very modest growth (2%).
3. In the third scenario we assume a modest benefit as a result of the distribution formula of £27,977, followed by a standstill position for two years.
4. In the fourth scenario we see the required minimum needed to continue funding existing services, and develop new services in-line with our strategic development.

In producing these scenarios there has been an assumption that further reductions will be required in the national budget over the next two years to meet the national budget target of £5.12 Billion over 3 years, with £1.7 billion being made available in 2007/2008, and again in 2008/2009.

Fig 5 Budget forecasts

Scenario	2006/07	2007/08	2008/09	2009/10
1	£3.844	£3.652	£3.652	£3.652
2	£3.844	£3.844	£3.921	£3.999
3	£3.844	£3.872	£3.872	£3.872
4	£3.844	£4.132	£4.132	£4.132

Over the life of the strategy there is a £480,000 difference between the four scenarios illustrating the scale of uncertainty for future funding. These scenarios are translated into commissioning implications in section 9.

Identifying Resources

Maximising Resources and Value for Money

Whilst there may be substantial opportunity to work with providers to make efficiency savings, it is very unlikely that these savings will be spread evenly across all services. Across the board cuts have not been assumed in-line with the ODPM's statement on such measures Appendix 9.

We cannot assume an increasing, or even fixed level of funding from the Government. Therefore existing contracts will need to be assessed for potential 'savings', through increased 'efficiency' and, potentially around eligibility factors.

Furthermore, we have not been in a position to grant automatic increases in grant levels for inflation. We know that if this continues in the long run that this will create difficulties for providers. We will have to review the position on an annual basis but have made a modest inflationary increase from 2006.

Savings through service reviews

Our reviews have taken account of value for money considerations, as well as strategic relevance and quality. Decisions on future funding levels will, therefore, be taken on a case-by-case basis.

The general principle we will observe is that Supporting People subsidy cannot normally meet all the running and operational costs of an organisation. In addition, we will work with our partners to ensure that services are delivered jointly and appropriately. SP funding is for housing-related support, and for complementing other services (where appropriate).

When carrying out the value for money element of service reviews, we are paying close attention to the following types of service:

- Services that appear expensive against published norms and benchmarks
- Services that are ineligible for grant, when compared to our eligibility criteria
- Under utilised services
- Poor quality/ non-accredited services

Where there is clear, justifiable value for money savings to be made, these will be made. This should enable us to ensure that the right balance is struck between protecting existing funding levels and freeing up resources to meet identified needs.

Identifying Resources

The Service Review was completed by 31st March 2006, with those services identified ineligible for Supporting People Grant being decommissioned

Savings through decommissioning of services

Where services were decommissioned funding will be made available for improvements to existing services and/or for new services to be commissioned.

Income from Charging - Our Policy

Our charging policy is currently under review, but remains as it was under the shadow strategy (Appendix 10), until the findings from the review.

Summary of the Financial Position

Taking account of all of the above, our forecast financial position, based on option 4 can be illustrated opposite:

Fig 6 Summary financial position

	2005/06	2006/07	2007/08	2008/09	2009/10	ASSUMPTIONS
DCLG GRANT	3.902	3.844	3.652	3.652	3.652	ANNOUNCEMENT – BASED ON MINIMUM CARRY FORWARD ALLOWED
Overspend	.516	0.00	.427	.427	.427	
TOTAL AVAILABLE	3.90	3.844	3.652	3.652	3.652	
LEGACY FUNDING	3.902	3.902	3.902	3.902	3.902	BASELINE FIGURE CUMULATIVE ACTUAL SAVINGS
REVIEW SAVINGS	1.572	N/A	N/A	N/A	N/A	
NEW SERVICES	0.19	0.546	.340	N/A	N/A	ACTUAL SPEND
INFLATION AWARD	0.00	2.00	0.00	0.00	0.00	2.0% 06/07
TOTAL SPEND	4.418	3.792	4.132	4.132	4.123	
UNDERSPEND C/F	0.00	0.52	0.00	0.00	0.00	

In this scenario, we have assumed a single over-spend carried forward from 2006/2007 to 2007/2008. The model illustrates that review savings of £1,572,799.67 have been made in 2005/2006 in-line with the review process. Improvements to existing services, and additional new services to a value of £900,000 can be commissioned. We have also announced the first Inflationary increase to existing services since April 2003 (subject to further Value For Money analysis) to be awarded to all providers.

Identifying Resources

Issues related to capital investment

Hartlepool are committed to a large capital development funded through the Department of Health and Joseph Rowntree Trust to provide a Retirement Village and special arrangements have been put in place to project manage and co-ordinate the funding of care and support services. The Council has made a commitment to fund the support costs.

Some of our other proposals for the future will require capital funding for the development of purpose-built supported housing. In order to ensure that capital bids from providers are co-ordinated with commitment of revenue funding by the Supporting People, we have agreed that the Housing Corporation will be invited to attend key meetings. The Corporation want to be confident that any investment in supported housing not easily converted to general needs use is backed up by the revenue funding needed to make the project viable. We hope that close involvement in the discussions leading up to commissioning decisions

Issues for Providers

The financial uncertainties will be of particular concern to Service Providers. We recognise that cost reductions could have an impact on staff retention. We also recognise that there is a critical point when cost reductions will have a negative impact on the over-all quality of services. As part of our approach to managing efficiency savings and service change we intend to work closely with Providers to ensure stability and quality in service delivery.

Administrative Costs

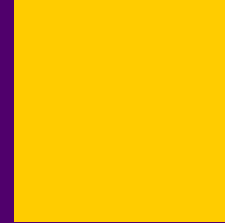
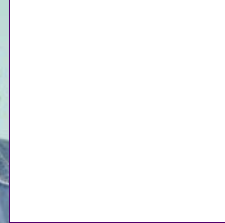
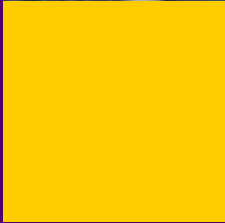
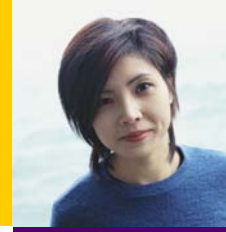
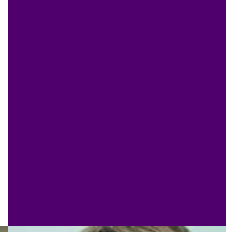
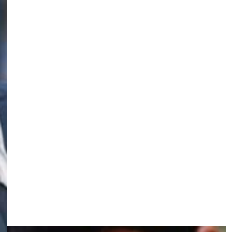
The administration grant has reduced since the start of the programme to £153,000 in 2006/2007. The annual budget pressures exercise held within the council has been utilised to apply for subsequent funding to fill the current funding gap in this area.

Through the review process we have identified the need to increase the number of services to correctly reflect the more specific service rich data, which previously, was difficult to map for some services due to those services being grouped together under the one service name. This coupled with the required new developments both for accommodation-based and floating support services, some of which are already under development, would make for a positive future, and further development of the programme within Hartlepool.

With the need to further develop the sector within Hartlepool, there will be added pressure on the existing administrative resource available. This will continue to be monitored in-line with future developments and requirements of the programme at both a national, and local level.

With the development plans for the sector, we are looking forward to a positive result from the finished distribution formula. However, with the distribution formula still to be finalised, this position will have to be carefully monitored.

Section 5



Progress in Hartlepool

In this section we look at the progress that has been made since the introduction of Supporting People. The main challenges in the shadow strategy are considered and progress on implementation is analysed.

The Shadow Strategy

During the transition to Supporting People and the early years of implementation, our shadow strategy provided an interim basis for decision-making and administration. At the time it was published the Government had set no budget. The shadow strategy can therefore be seen mainly as a positioning document creating a foundation upon which to build.

Most of the services that were inherited by Supporting People were accommodation based, and the vast majority of services were focused on older people. In the period directly after the publication of the shadow strategy and the point when Transitional Housing Benefit stopped there was some growth in services. This was similar to the experience of most areas of the country. The shadow Strategy did give us a clear set of priorities in terms of service provision for a range of groups, including:

- People with Mental Health problems
- Drug and alcohol misusers
- Ex-offenders
- Vulnerable young people
- People with a Learning Disability
- Homeless families
- Older People

A key issue that was noted was the imbalance between the changing needs of older people and the current supply of housing. To address this we have worked in cooperation with partners to develop a strategic approach to this challenging problem. An Extra Care strategy has been developed and the first major building blocks are beginning to be put in place with the development of the Retirement Village

We also identified a need for more floating support and re-settlement services for people with a range and combination of needs. We have been able to commission a number of new services but the changing financial position has limited what we are able to do.

We reviewed our shadow strategy by contacting key partners and providers, to see if needs had changed since 2002. They highlighted the following priorities:

- Avondene, a block of flats owned by a Housing Association, has been renovated and re-opened in November 2004 as 11 flats for adults (18 and above). The scheme offers 'move-on' accommodation from e.g. Scott Grange and for homeless applicants needing supported accommodation. Given the importance of the drugs issue in physical/mental health, crime reduction and ASB strategies, it would be a very positive step if further schemes were to be commissioned for people not yet off drugs, as well as for those with a better chance of staying drugs free.

Progress in Hartlepool

Continued

- We have commissioned a scheme for young people with complex needs, which is due to open in the summer of 2006. Funding has also been achieved for the development of a similar scheme aimed at adults with complex needs, due for completion Summer 2007.
- Whilst we have a scheme for those at risk of offending there remains a lack of provision for this group, particularly women, although discussion are ongoing to open the existing scheme for women.
- There is a need for Extra Care for Older people and older people with Learning Disabilities. The Retirement Village is a start, but further developments are required. Funding is being sought for additional extra care schemes. Schemes offering a range of tenure options (like the Retirement Village) will be encouraged.
- A six unit shared-ownership scheme for people with a Learning Disability is being developed which will provide greater choice particularly for younger people.

Regarding access to existing services, the following points were made:

- The position concerning the availability of permanent accommodation has significantly changed and there are now shortages of some forms of rented accommodation. This is causing problems with access to move on and permanent accommodation
- There are still problems with a lack of “information” on access to services.
- Client group definitions can be a bar to access.

Administration

As well as setting up structures for decision-making, strategy development and consultation, all the essential systems for the effective administration of SP have been put into place. This has not been without difficulties. The small SP team has suffered a number of very long-term staff absences and this has affected progress. These issues have been addressed through a variety of temporary solutions but inevitably there has been some loss of continuity and it has created some delays. However, we have focused on ensuring that the basic essentials for delivering support have been maintained

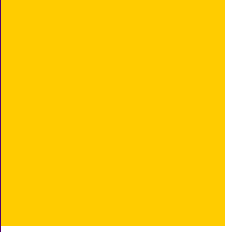
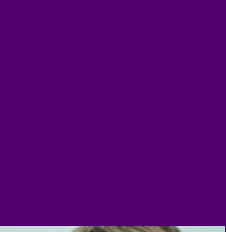
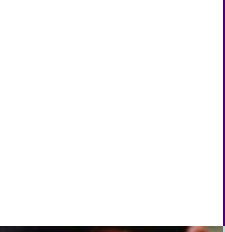
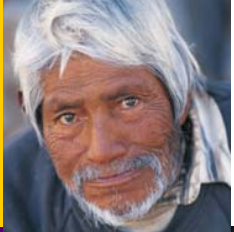
Progress in Hartlepool

Conclusions on progress

Over the past three years a considerable amount of work has been put into implementing the Supporting People programme. It has proved to be both complex, and resource intensive, but the deadline for implementation was successfully met.

When Supporting People was introduced there were very limited services for some client groups such as people with a substance misuse problems and offenders or those at risk of offending. We had also identified a number of areas where services needed to be restructured. We have set about those tasks making use of the resources available through Supporting People but also drawing on the strong partnerships that exist in Hartlepool to help support this development and change.

Section 6



Needs and Supply

In this section we provide an analysis of the current supply and needs for Hartlepool and project future requirements.

Context

This section is intended to provide a brief introduction to Hartlepool and the influence the region has on Supporting People to help orientate the reader. Detailed information can be found in the regional plans² and Hartlepool's Community Strategy 2002.

About Hartlepool

Hartlepool is a largely urban Authority with a very small rural hinterland and has been a Unitary Authority since 1996. It is the second smallest in England. The mid-2005 population estimates are at 89,800 residents in Hartlepool. Of this, 49% are male and 51% female. The population is aging and suffers from the legacy of the decline of heavy industry with high levels of deprivation. These have produced significant challenges concerning higher levels of poor health, substance misuse and crime. As a result there is a significant regeneration programme under-way that is bringing major changes to the infrastructure of Hartlepool.

Hartlepool has a very small BME communities totalling 1.7% of the population.

In December 2004 Hartlepool Borough Council was awarded an excellent 'Comprehensive Performance Assessment' (CPA) rating by the Audit Commission. A glimpse at the ratings for each core service reveals that Social Care Services (adults and children) and Housing Services both received a rating score of 3 out of 4

A detailed description of Hartlepool can be found in the Needs Analysis in Appendix 6. The long-term strategic plans for the borough can be found in the Community Strategy.

The Regional Dimension

Increasingly regional planning is influencing the local agenda. The Sustainable Communities Plan published by the ODPM in 2003 and the Northern Way Growth Strategy² are key documents that set the broad regional agenda. In particular these documents set the structure for the Regional Housing Strategy³.

The draft North East Regional Housing Strategy⁴ focuses on the regeneration of declining areas and decent housing standards within the context of the economic regeneration of the region. The Regional Housing Strategy sets the priorities for capital funding of housing and therefore is an important influence on the delivery of Supporting People.

² Moving Forward: The Northern Way 2004

³ North East Regional Housing Strategy 2003

⁴ A new strategy is due for publication in May 2005

Needs and Supply

Conclusions (cont)

The Regional dimension has evolved along side the development of Supporting People. Its importance to local planning is likely to continue to strengthen as more emphasis is placed on cross-boundary initiatives led by the Governments approach to regional and sub-regional markets in housing as well as in support.

Planning and commissioning of support services at both the regional and sub-regional level is now being tested across the country. It is therefore safe to assume that during the life of this strategy there will be an expectation from ODPM that cross authority service commissioning increase.

Supply analysis

Within this section we consider the current range of services that are provided in Hartlepool, which client groups are receiving support, and what sorts of support. We will also examine the cost of these services. We will then go on to draw conclusions from this analysis about what changes or additions need to be made to current and future services.

In 6 .3 we discuss the results of the needs analysis, and in section 7 we bring the results of the supply and needs analysis together to set out what areas need action taking.

Supply

On 1st April 2004, 1344(5) people in Hartlepool were receiving support funded by the programme. Of these, 999 people were living in specialist accommodation, such as sheltered housing or specialist-supported accommodation. 345 people 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.

⁵ Figures and tables produced from local Supporting People supply

Needs and Supply

Continued

However, the regeneration aspect of the housing agenda will have the most influence on the future planning for the Region and for Supporting People as this contains proposals for large-scale redevelopment of declining areas. The vast majority of the regional budget is targeted on these issues. Typically, these areas will house large numbers of people who are in need of a support service. This has the potential for some service disruption through the relocation of service users. It may also present opportunities for the creative development of new services within the regeneration areas but also limits the availability of funding for new accommodation outside of these areas. This has implications for developing new rented accommodation.

Supporting People Planning

Hartlepool is a member of the North East Regional Implementation Group (RIG) that brings together all of the Authorities in the North East. Hartlepool is also a member of the Durham and the Tees Valley Cross Authority Group. Cross Authority Group (CAG)

The purpose of the CAG is to address the planning and funding of future service provision within the geographical area of Durham and the Tees Valley. It will also take on board issues arising in the North East Region and nationally in accordance with identified demand for future services. A full description of the CAG and its role can be found in Appendix 5.

Briefly the following are the key tasks of CAG members:

- Producing the cross authority statement
- Needs and Supply Analysis at a cross-authority level
- Identifying existing cross authority schemes / services
- Identifying gaps in current services and the need for new services
- Considering the results of relevant scheme / service reviews
- Identifying areas where joint protocols may be needed and establishing them via the Supporting People Core Strategy Groups
- Consider reports and advice on regional and national context.
- Relationship(s) with Commissioning Bodies
- Ensuring providers and users are properly engaged in the decision-making processes
- Consider the data from Client Records reports
- Feed into the strategic planning of services

The CAG will not be involved in implementing plans, as this will be the responsibility of local Commissioning Bodies. We will, however work with Adult & Community Services and the CAG to explore the opportunities of regional and sub-regional

Needs and Supply

Fig 7 Supply at April 2004

Primary Client Group	Accommodation based services	Floating support services	Total	% of Total
Frail elderly	0	0	0	0
Generic	0	276	276	20.5
Homeless families with support needs	0	0	0	0
Offenders or people at risk of offending	11	8	19	1.4
Older people with support needs	910	0	910	67.7
People with a physical or sensory disability	4	0	4	0.3
People with drug problems	0	0	0	0
People with HIV / AIDS	0	0	0	0
People with learning disabilities	41	0	41	3.1
People with mental health problems	0	11	11	0.8
Single homeless with support needs	20	25	45	3.3
Teenage parents	0	6	6	0.4
Women at risk of domestic violence	6	9	15	1.1
Young people at risk	7	10	17	1.3
	999	345	1344	

(Certain Services are excluded from these figures: Home Improvement Agencies, Community Alarms, Leasehold Schemes, and Pipeline Services).

The vast majority of services are provided to residents of social housing. Additionally, 2 services have been commissioned since April 2003, and 4 new services have been commissioned since April 2004.

Fig 8 Services Funded in 2003/4

Primary Client Group	Accommodation based service	Floating support service	Total	% of Total
Older People with Physical Disabilities	6	0	6	60.0
People with Physical Disabilities	4	0	4	40.0
	10	0	10	

Needs and Supply

Expenditure

Spending on 1st April 2004 was £3.9 million. This was divided between the client groups as follows (£000s):

Fig 10 Spending

Primary Client Group	Accommodation based service	Floating support service	Total	% of Total
Frail elderly	0	0	0	0
Generic	0	£1,607	£1,607	40.2
Offenders or people at risk of offending	£171	£59	£230	5.8
Older people with support needs	£1,304	0	£1,304	32.7
People with a physical or sensory disability	£89	0	£89	2.2
People with drug problems	0	0	0	0
People with HIV / AIDS	0	0	0	0
People with learning disabilities	£334	0	£334	8.4
People with mental health problems	0	£50	£50	1.2
Single homeless with support needs	£38	£54	£92	2.3
Teenage parents	0	£27	£27	0.7
Women at risk of domestic violence	£127	£23	£150	3.8
Young people at risk	0	£41	£41	1.0
Young people leaving care	£69	0	£69	1.7
	£2,132.00	£1,861.00	£3,993.00	

Generic services receive the single largest element of the budget, 40% followed by older people 32%.

Generic services provide low-level support to a range of needs.

Needs and Supply

Fig 11 Provider Type on the 1st April 2004

Service Provider Type	Accommodation based service	Community or social alarm service	Floating support service	Home improvement agency (HIA) service	Out-reach service	Grand Total
Charitable Organisation	£237	0	£73	0	0	£310
Local Authority - Housing Dept	0	0	£124	0	0	£124
Local authority - Social Services Dept	£10	0	£1,514	0	0	£1,524
LSVT(RSL)	£337	£605	0	0	0	£942
Private Company	£80	0	0	0	0	£80
Private Individual	0	0	0	0	0	0
RSL	£529	£150	£161	£64	£59	£963
Voluntary not for profit Organisation	£52	0	0	0	0	£52
Total	£1245.00	£755.00	£1,872.00	£64.00	£59.00	£3,995.00

The former Local Authority housing service Housing Hartlepool receive 23.5% of the budget while Social Services receive 38% of the budget

Since some services are very much more intensive in comparison with others, the spending by each type of provider gives a different pattern. Average weekly unit costs (calculated using weighted averages for each service) by provider organisation type are shown below. This shows the extent of the range of service that Supporting People is funding, with the average contract totalling approximately £70 per person per week:

Needs and Supply

Fig 12 Average weekly costs on the 1st April 2004

	Accommodation based service	Floating support service	Outreach service	Resettlement service	Overall Average
Charitable Organisation	£ 52.35	£ 70.51			£ 55.75
Local Authority - Housing Dept		£ 41.76			£ 41.76
Local authority - Social Services Dept	£ 97.61	£ 116.92			£ 116.77
LSVT(RSL)	£ 14.17				£ 14.17
Private Company	£ 102.32				£ 102.32
RSL	£ 20.29	£ 71.88	£ 142.50		£ 33.53
Voluntary not for profit Organisation	£ 124.67				£ 124.67

Comparison of costs

Compared to ODPM tables(6) the costs of services generally can be described as average. However there are exceptions:

High cost services have been prioritised within the review programme. The reviews have used a number of tools to judge costs including:

- Regional benchmarks
- Evidence from the QAF
- Service users views
- Test of strategic relevance

Low Cost services

A number of schemes fall below national averages. This is a concern because low cost can also mean poor quality. Again these schemes have been targeted within the review programme. We have also noted older people receive 33% of the budget to provide 68% of the service users.

This results in the lowest cost services. The general qualities of these services are being considered within the implementation of the SLOOP report.

Needs and Supply

Ineligible services

ODPM indicated that Supporting People funding should not be provided to Registered Care Homes and we were obliged to withdraw this funding by 2006/7.

Supporting People funding was being paid to two Registered Care Homes. These schemes were a legacy of the Housing Corporation development programme. They were allocated Supported Housing Grant at the time they were commissioned and this funding was transferred into the Supporting People budget. Agreement was reached with the Provider and Adult Services that support funding was withdrawn at the end of the three-year review period 31st March 2006.

The contract originally with Social Services has now been ended being replaced with a contract for two more specific support services representing 8% of the budget.

Managing the market

Hartlepool has historically had a relatively underdeveloped supported housing sector. Currently there are 11 housing associations with Supporting People contracts (excluding Housing Hartlepool). The voluntary sector in the housing/social care field is also underdeveloped, with 7 charitable and voluntary groups providing Supporting People services.

We are aware of the risks inherent in having a small number of providers delivering services so we are working to ensure that we continue to have a balance of differing types of provider. We also work in close partnership with providers to minimise the chance of vulnerable people being left unsupported for any length of time as a result of service failure.

Over the long term, we would expect to see growth of services and this will provide an opportunity to ensure that we have a better mix and range of providers to meet local needs. There will also be opportunities as a result of the review process to work with

Service Reviews

All of the reviews have been completed by the end of March 2006. Some value for money checks have been identified as required and these will be completed by September 2006, a couple of contracts require additional negotiations

Needs and Supply

Conclusions on supply

- 74% of the services are accommodation based, which has implications for flexibility in service provision. Supported Accommodation does not always meet the needs of service users, many of whom would prefer to live in ordinary accommodation with a support service. This current pattern of services makes it more difficult to respond to changing needs
- Services to some client groups that fall under the banner of “homelessness related” are generally under-developed, although there is a better supply of supported accommodation for single people. This accommodation currently supports other needs as well
- Sheltered housing in particular is unlikely to continue to meet future needs in its current form and changes are needed
- Costs are mainly within regional and national tolerances but further action is now being instigated to drive down costs and ensure Best Value

Local Needs Mapping

Set out here are the needs identified within the needs mapping exercise. These estimates are the result of extensive desktop research of current information, together with detailed interviews with planners and discussions with providers. Information has also been gathered from service users. It is unlikely that we will have the capacity to be able to meet all of these needs during the life of this strategy. We have therefore conducted a “gap” analysis (section 7) and set out our commissioning intentions for the next 5 years in section 9. A detailed report on how these needs were arrived at can be found in Appendix 6

We found that across the client groups there were many areas of unmet need agreeing with the research done to support other plans and strategies. Over all, both nationally and locally, mapping support needs is still in its early stages of development as gathering information on support only began systematically with the introduction of Supporting People and for some client groups’ information is still scarce.

As far as possible we have addressed the needs of the BME communities within the client groups and not as a single entity. Below is a summary of needs by client group:

Needs and Supply

Older People

Current issues:

- Management of the re-balancing of specialist accommodation including the provision of additional extra care housing schemes to meet increasing needs of a growing elderly population – including offering a range of tenure options. These issues are addressed in detail within the SLOOP report and form part of an over-arching corporate response to the accommodation and support needs of older people.
- Working with providers and residents to decommission schemes identified as 'not fit for purpose' in the SLOOP report, fitting in decommissioning with alternative provision coming 'on line'
- Working with the Home Improvement Agency to ensure a continued good service to elderly owner-occupiers, including the provision of a handyperson service within SP
- Identifying where schemes dedicated to older people could potentially be either refurbished or rebuilt to provide housing suitable for other client groups
- Developing a strategic approach to broadening the provision of low level support and assistive technology
- Adapting existing provision for people with increased mobility needs

Needs identified for the future are:

- The implementation of the SLOOP strategy is a very significant part of addressing the longer term needs of older people. Planning group has been established to deliver these changes and Supporting People is a key partner
- Funding for meeting low level needs to prevent the need for care, for example where there is an onset of dementia, and to complement personal care for people living in their own accommodation
- Sheltered housing to meet the needs of older people with alcohol problems
A strategy for developing and commissioning assistive technology, within sheltered

Needs and Supply

People with a physical disability or sensory impairment

Current issues:

- Existing specially adapted or purpose built accommodation has been oversubscribed
- There is a growing need for supported housing for younger people with profound physical disabilities. Although there are general needs properties suitable for physical disabilities they are limited in number and the alternatives are to be accommodated in sheltered housing for older people or within other supported housing schemes

Needs identified for the future are:

- Funding for adaptations to existing housing stock for people with physical disabilities
- Provision of Housing for younger people with physical disabilities, some of who will need support by encouraging RSLs to build suitable properties and to offer floating support.
- There is also evidence that some people who have a history of long-term substance misuse will lose some physical abilities. We anticipate that some substance misusers will require both disabled accommodation and support. A scheme currently being bid for (complex needs over 25s) will include at least one unit to wheelchair standard but more are likely to be needed
- There is a need for further research into the support needs of people under 65. Developments in assistive technology and the desire by younger people to be as independent as possible mean suggest the numbers who require suitable accommodation will not be the same as those that will need a support service

Needs and Supply

Learning Disabilities

Current issues:

- There are key issues for young people, some of whom will have higher levels of disabilities, who are currently living at home but who will have aspirations to be living in their own accommodation at a much earlier age than was previously the case
- A significant level of need comes from people living with elderly carers
- There is a need for sheltered housing for older people with learning disabilities. This may be 50+
- More flexibility of Supporting People contracts is needed, as the needs of service users in this group change
- A new scheme (funded by the Department of Health) of 6 supported shared ownership flats, built and managed by a housing association offers an exciting alternative to current provision

Needs identified for the future are:

- Additional small supported living schemes, dispersed around the borough
- Increasing the 'floating' support available to encourage independent living
- Replicating Newholm Court elsewhere in the borough (i.e. schemes for mixed client groups)
- Use of assistive technology to support people with learning disabilities living independently
- Adaptations to existing housing stock
- Services for people on the autistic spectrum – working with Adult Services and health services to ensure appropriate accommodation, care and support are provided through a range of

Needs and Supply

People with mental health problems

Current issues:

- A new scheme is now offering excellent accommodation and support for this client group and replaced a scheme, which was not 'fit for purpose'. Demand for this scheme is high and appropriate 'move on' accommodation is required
- Floating support to encourage residents to move into independent tenancies is crucial
- There is a need for discussion at a strategic level and with service providers about the needs of those with a dual diagnosis, an increasing issue across the whole country as well as within Hartlepool

Teenage Pregnancies

Current issues:

- The new scheme at Anna Court has proved very successful however the level of need in the town remains high and additional supported accommodation is likely to be required.
- In addition to the needs of young mothers, young couples with children also need to be considered

Needs identified for the future are:

- Additional supported housing provision may be needed but this may depend on an increase in floating support, which should help to speed up the transition from supported accommodation resulting in an increase in numbers making use of existing provision and reduce the pressure on supported accommodation. This would also create the opportunity to support people who develop mental health issues in their existing accommodation preventing home loss
- Specialist floating support for people moving on from supported housing
- Supported housing and floating support for people with a drug or alcohol problem as well as a mental health problem

Needs identified for the future are:

- An additional 6 bed scheme for teenage parents
- Some focused support for teenage couples
- Additional floating support provision

Needs and Supply

Families at risk of Domestic violence

Current issues:

The change from accommodation with shared facilities to self-contained units has proved very successful. Additional support has been provided through an outreach service, which is also successful

Needs identified for the future are:

- Additional outreach provision
- Supported housing provision with 24 hour staffing for women fleeing domestic violence who have drug or alcohol problems

Homeless Families, Single Homeless, Rough sleepers with support needs

Current issues:

- There is insufficient emergency temporary accommodation for families and for single people in the borough
- A hostel in Middlesbrough for single people which does accommodate people from Hartlepool may be decommissioned

Needs identified for the future are:

- There is a lack of emergency accommodation for young people that is sensitive to the needs and risks associated with this group
- Emergency accommodation for homeless families and single people, particularly for people with substance misuse problems, and for women
- Floating support for all these groups
- Floating support services should also include some work on the prevention of homelessness

Needs and Supply

Young people including young offenders, young people leaving the “Looked After” system, and other young people at risk

Current issues:

- There are plans to set up a multi-agency panel to resolve problems of housing and support for young people at risk
- Demand is particularly critical amongst 16-18 year olds
- There are significant difficulties for young people, both under 18s and over 18s, trying to access mainstream housing, including private and social housing

Needs identified for the future are:

- Additional advice and floating support services needed for all young people, but particularly for those drug/alcohol and other needs
- A foyer-type scheme, probably dispersed – to complement existing and any new emergency provision

Needs and Supply

Substance Misuse including Alcohol Misuse

Needs identified for the future are:

A range of provision, including:

- Accommodation for substance misusers who have not yet begun to tackle their problem, so that they have some stability, and can begin to stabilise. This type of provision would need significant inter-agency cooperation and is likely to be commissioned by the DAT and sensitively managed
- Supported housing for those who are in treatment to be commissioned by the DAT
- Provision for couples and for those with children, including women fleeing violence who also have a drug or alcohol problem – probably floating support or cluster units.
- Provision for young people including under 18s with chaotic lifestyles. The scheme currently being built is focussed on this need.
- Robust specialist floating support – including help for those who are aiming to move into supported housing, and providing an incentive to those who want to be involved with the Dordrecht and Drug Interventions Programme schemes. This type of service would need to be jointly commissioned with the DAT
- Freeing up access into mainstream housing including that provided by Housing Hartlepool and other Housing Associations, and the better quality private rented sector stock in the town, with robust move-on agreements between supported housing and social housing providers

Current issues:

There is a need for greater input from drug and alcohol workers into supported housing, ideally to provide activities, counselling, and group work but at the minimum to increase the links which help people to access treatment and other activities

Links between the Supporting People Commissioning Body and the Safer Hartlepool Partnership are in need of strengthening, and the two partnerships need to be jointly planning and commissioning services to complement each other's provision

Agreements have been put in place for residents of established Supported Housing schemes to be given a priority for rehousing, within the Joint allocations policy of the Council and Housing Hartlepool, when they are ready to move on. However there is a problem in the lack of available vacancies

A cross-agency relief pool is needed to ensure that staffing complements are able to be maintained in services working with this client group

Needs and Supply

Offenders and those at risk of offending

Current issues:

- Options for move-on to permanent accommodation have been greatly reduced and is also an on-going issue concerning the cultural barriers that make it more difficult for Offenders to access accommodation.
- Joint protocols for improving access to social housing are currently being negotiated.
- Support for residents in the private sector should be increased.

Needs identified for the future are:

- Additional access to mainstream housing for offenders, through formal agreements with a range of housing providers. A protocol is currently being worked up in partnership with Housing Hartlepool and the DAT.
- Floating support to ensure successful transition from supported to independent living.
- Supported housing provision and access to permanent housing for homeless women offenders, including temporary accommodation targeted at those likely to or already working in the sex industry
- Additional semi-supported housing for all offenders, but with a priority for those who are recovering from drug user and moving forward on the recovery pathway
- Continued actions to address the provision of poorly managed and maintained private rented sector stock in Hartlepool, A two-year private sector pilot project on behalf of the Government has been brought into mainstream council services. The technical officers are continuing to tackle the conditions of private sector rented properties. The Council's tenancy relations' officer is working with private landlords to prevent harassment and illegal eviction and is also having a major impact in the town. Additionally there is a voluntary accreditation scheme, encouraging good management methods, and intend to introduce selective licensing in the town. The successful floating support scheme should be brought into SP services.

Needs and Supply

Refugees, asylum seekers, and Black and Minority Ethnic groups

Numbers involved in these categories are very small. There is no evidence that specific services should be commissioned. However it will be important to ensure that existing and new services are culturally sensitive

HIV/AIDS

At the moment only one person is known to Adult Services. As a result no support needs have been identified for this client group although this is likely to change as a consequence of the growth in substance misuse. The position should be reviewed on a Cross-Authority basis

Travellers

There have been no new developments for this group. It is possible that in future the Government will require all local authorities to make provision of designated sites for travellers, but there is little evidence of need being identified for supported housing or floating support

The decision not to provide an official site will be reviewed annually. There do not appear to be any needs identified for housing-related support

Hartlepool is on a Tees Valley Wide Communications Group in conjunction with SPARC (Society for the promotion and advancement of Romany culture). This group is to monitor and review issues in connection with Gypsies and Travellers in the Tees Valley region. Work includes monitoring need in the area. The group meets on a quarterly basis.

Needs and Supply

Strategic Relevance

In this section we consider what the current drivers are of both national and local policy, and how they will influence our thinking on the choices of development of existing services and any new services that we choose to prioritise.

The Government has identified a number of key areas within which they wish to see progress:

- Reduction in the numbers of people who re-offend
- A reduction in the numbers of substance misusers who are not accessing treatment and achieving a degree of stability
- Reductions in the numbers who are experiencing homelessness
- Reductions in the numbers of teenage pregnancies and support for those who fall pregnant
- There are also priorities for people with mental health, learning disabilities and for older people, all related to maintenance of independence, or enabling people to become more independent

The Government has two over-arching strategies:

- To shift service towards prevention
- Work towards social inclusion

In Hartlepool prevention has been an underpinning feature of our work in the areas of older people, mental health and learning disabilities. We have taken the decision to begin to shift resources away from institutional forms of care towards preventative services such as the development of the Retirement Village, supported housing and the HIA. We saw this as an opportunity to provide more choice for a range of needs by offering models of accommodation and support that were focused on retaining independence. Our approach has had many benefits. As an example we experience very few problems with hospital discharge. Overall our approach is reducing pressure on hospitals and other emergency services.

Our plans in this area are not complete. Set out in the Housing Strategy and the Extra Care Strategy (30) are a number of proposals that continue this work. They are seen as important to achieving the community's overall vision. As part of this approach Supporting People will work with providers of sheltered housing to bring about service change.

³⁰ Extra Care Strategy 2004-2016

³¹ Drug Action Team

Needs and Supply

Strategic Relevance

We have not been as successful in addressing the needs of those people who have a substance misuse problem. Until the DAT (31) was established, like many other areas, information on the scale of need was difficult to obtain. Most information gathered was crime related and therefore there were few systematic ways of gathering information about support. As a result of jointly commissioned research by the DAT and the Council it is now clear that there is a significant and growing problem that is impacting on the level of crime and affecting the quality of life in Hartlepool. These are also key issues for the community. This is adding additional pressure to health, housing and police services that are dealing with criminal and anti-social activity driven by substance misuse. Linked to this is offending behaviour.

The Crime Reduction Strategy(7) has set goals for the reduction of offending and repeat offending. Part of the approach here is to recognise the importance that housing plays stabilising the situation and in reducing the risk of re-offending. To ensure the successful maintenance of accommodation may require a support service. This strategy continues to see Domestic Violence as a major cause of concern and as well as addressing the problems dealing with crisis situations sees more support services as a significant area for development

Estimates(32) suggest that in the region of 70-80% of offenders who have an accommodation problem will also be substance misusers.

There is a range of support services now available for single homeless people. However the Homelessness Strategy(33) identified a significant number of young people who are in need of support. Many of these will also overlap with other client groups, particularly with substance misuse and offenders. Research carried out to support the Homelessness strategy confirmed that there are significant over-laps suggesting that many people have complex and sometimes challenging needs.

⁷ Crime and Disorder and Drugs Strategy 2005-08

³¹ Drug Action Team

³² Home office Drugs Team

³³ Hartlepool Homelessness Strategy 2003

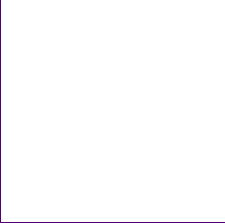
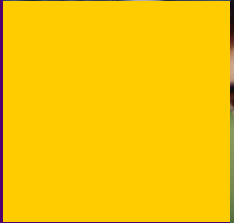
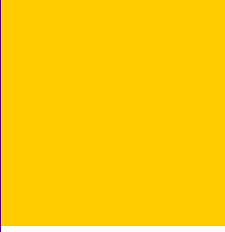
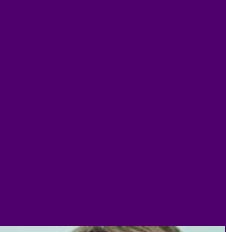
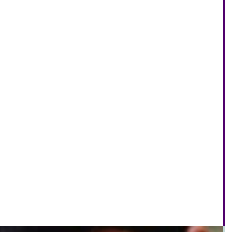
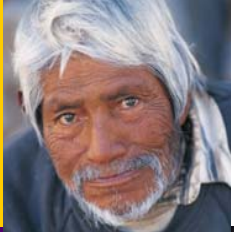
Needs and Supply

Conclusions on needs mapping exercise

It is clear from the overall results that need exceeds supply and within some client groups there is a significant gap. Through the research a number of issues were identified that come up consistently within each of the client groups. These are:

- Co-ordination of planning and service delivery needs to be improved using better working practices between health, housing and social care. As research continues to uncover more information on needs better information is emerging on the way services should co-ordinate
- Access to move-on and permanent accommodation is affecting the delivery of support services. There is some evidence of supported accommodation “silting” up as people wait to be re-housed. This reflects the regional pattern. Recent changes to the joint allocations policy making these applicants a priority for re-housing and the new joint protocols should assist with this.
- Support services should be flexible to address rapidly changing needs
- Many clients have multiple and complex needs.
- There is evidence of large numbers of people who have multiple or complex needs living in temporary or private accommodation
- More services are needed that provide an early interventions to prevent loss of accommodation across a range of circumstances

Section 7



Gap Analysis

In this section we bring together the needs and supply analysis to assess the overall picture and identify areas of needs that will require particular attention.

7.1 Areas of unmet and growing need

In this section we examine those areas where we have identified unmet needs that are continuing to grow.

- **Substance misuse:** there is very limited provision but strong evidence of large numbers in need. The numbers of people accessing treatment are growing and predicted to continue to grow during the life of this strategy. The scale of the need is such that with the low level of current services we are unlikely to address all the needs within the life of this strategy. Ranges of support services are needed to match the differing stages of needs within this client group and therefore a number of solutions are required. There is an over-lap between this group and a number of other client groups, and some within this group are known to be accessing supported accommodation intended for single homeless
- **Offenders and people at risk of offending:** Again there is limited provision and a direct link to substance misuse where significant overlaps exist between the client groups. Numbers of offenders are continuing to grow
- Although there are extensive support services mainly aimed at **older people** in sheltered housing recent research has suggested that the role of sheltered housing needs to be re-focused to better meet the current and future needs particularly of the growing numbers of frail older people and this should be complemented by the development of Extra Care. Also the numbers of older owner-occupiers has grown significantly and will continue to grow. There are also growing issues concerning older people who are carers, people with Learning Disabilities and people with Dementia. This is reflected in the SLOOP report, which is currently being implemented. The role of assistive technology should be fully explored and utilised.
- **BME communities'** numbers are very small and they access few services. It is important to encourage the take up of services and to continue assess the need for specialist services.
- **Single Homeless People, rough sleepers and young people leaving care:** Although there is provision for this group, more is needed. Additional provision has been commissioned for those with complex needs but the extent to which other services will have to continue to support these needs has to be considered. There may be a need to reshape some services to support some specialist needs.

Gap Analysis

- **Teenage Pregnancies:** there remains a need for some additional services, but these are small in comparison to other client groups
- **Domestic violence:** large numbers of people who approach the police do not go on to seek additional help. Many of these would benefit from support.
- **Mental Health:** this is another area where unmet needs are partly linked to substance and alcohol misuse. There is also a continuing need to complete the re-provision of services in community settings
- There is an over-all shortage of accommodation for younger people who have a **physical disability or sensory impairment** some of whom may need a support service
- There is some evidence that accommodation and support is needed for people with a **Learning Disability** who want to live independently.

Supply issues

The key issues that emerged from the supply analysis are set out in section 6. The analysis suggested that the current dependence on accommodation-based services is creating inflexibility and limiting the options for addressing future needs. However, the needs analysis identifies the need for both floating support and accommodation-based services. It is possible by making available access to more permanent accommodation linked to increased floating support that space in existing supported schemes will increasingly become available for those who need that type of accommodation. The recently developed re-housing protocol mentioned earlier is a step towards facilitating this.

We have clearly identified a range of people who have multiple needs, some of whom will have challenging problems that could only be met in specialist accommodation. Some of these people would be classed as “high risk” and therefore these needs should be addressed urgently, and this means making use of existing provision.

There is a clearly identified issue about the condition of sheltered housing and the need to provide services that reflect changing patterns of need and expectation.

Gap Analysis

Areas of most strategic value

In this section we consider those areas that offer the most strategic value:

- A key priority at national and local level is substance misuse. There are significant implications for the wider community as this problem continues to grow. There are also overlapping links into Offending and Youth Offending, Single Homelessness and Mental Health. If we are build cohesive and safe communities we must address this problem. Evidence suggests that the numbers in need are likely to grow through-out the life of the strategy
- Offenders are particularly high risk and young offenders. This group will continue to create risks for the wider community and have the potential to de-stabilise communities unless these needs are addressed. These needs are a government priority and also a priority for Hartlepool. We know that over all crime is reducing but that the numbers of offenders who will need support are growing
- The growth in the numbers of Older People over 85 will create addition pressures on health and social care. At the same time significant changes are being planned to re-balance the supply of accommodation and services. This is a key strategic issue.

Areas of provision which are in need of continuing or urgent review

Through the needs and supply analysis, together with guidance from ODPM we have identified the following areas that should be prominent in the future service review programme:

- As part of the shift in services for older people sheltered housing contracts need to be reviewed
- All high cost and /or poor quality services
- Supported schemes that are accepting substance misusers in order to recognise within the Supporting People contract the complex level of needs being supported

Gap Analysis

Areas that will need further research over the life of the strategy

Several areas of additional research have been identified:

1. The extent and reasons for tenancy failure after re-housing. A large percentage of all those currently re-housed (10%) terminate their tenancy within 12 months. Some of these will be for positive reasons but the extent of tenancy failure is currently not known.
2. The numbers of people within the BME communities are very small and therefore their support needs are difficult to identify
3. There is limited information on people with a physical, visual or hearing impairment, which makes this an area where estimates of needs are extremely difficult. Unfortunately, what is required to fully understand the complex needs of this client group is beyond the scope of this strategy. It is essential that further joint research be undertaken with Social Care, Housing and Health to develop a clearer picture of the true extent of need in this area, particularly when the demographic profile of Hartlepool is taken into consideration. This is a recommended action and would be timely to inform the review of the Supporting People commissioning plan for this group by March 2006.

Conclusions as a result of the Gap analysis

With the introduction of Supporting People the availability of information on support needs is improving, but it is an evolving process that is leading to the identification of specific sub-groups of need. Evidence suggests that the needs are changing, and therefore flexible services will be the key to addressing future needs.

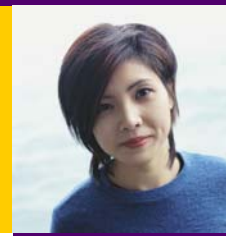
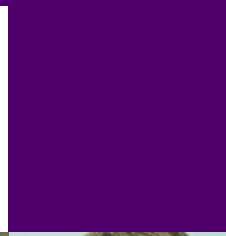
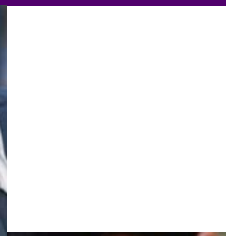
In a most of the client groups there is still a gap between current supply and needs. There are some client groups where there are very specific needs that could be overlooked within a broad strategic review. However these detailed needs are identified within the needs analysis.

Overall the following are the client group areas with the largest gap between needs and supply:

- Substance misuse
- Offenders including young offenders
- Single people with complex needs
- Older people

The issue of access to suitable accommodation is also a key factor. Some work has already been done to improve access to permanent accommodation through changes in the allocations policy. The impact of these changes will need to be evaluated but there is an under-lying problem of a shortage of suitable accommodation. This matter is being addressed within the Housing Strategy and it will be an issue to will remain under constant review.

Section 8



Performance Management

Findings from the review process to date

The Reviews have all been completed; The Review Team developed a methodology to cover the process of information gathering from providers, pre-review and validation visits. There is a clear approved methodology for value for money assessment as well.

This work has revealed a number of issues:

- As a result of the review process many providers have been asked to improve quality standards via action plans. This has met with a positive response and there has generally been agreement to improve their procedures/practice within 3 months.
- There have been problems with some providers failing to comply fully with grant conditions by not making the necessary returns on performance and the QAF. These issues have been addressed through the review process.
- There is some evidence that providers have “sub-contracted” support work to other providers. Although this may have been done to ensure effective delivery of services the position is being reviewed
- The Supporting People team acknowledges that reviews require specialist knowledge of the client group as well as knowledge of Supporting People. It is for this reason that the expertise of strategic planning leads for each of the client groups are asked to provide advice and support. This also has the advantage of building in strategic relevance tests within the reviews.

Criteria for continued funding

Eligibility/grant conditions

ODPM have issued new grant conditions with the 2006/7 financial settlement. Largely these conditions are unchanged from the previous year. However, we recognise that over time there will be a need for a better definition focused on the sensitivities within each client group. Over the life of the strategy there is an expectation that the position will evolve both from our perspective and from national guidance.

Strategic Relevance

ODPM have issued guidance on a range of matters that help to define strategic relevance. These measures are included within the QAF(8) and will form an integral part of the service review process.

Quality and Performance measures

ODPM have identified three performance measures:

- Service users who are supported to establish and maintain independent living (for long term services).
- Service users who have moved on in a planned way from temporary living arrangements (for short term services)
- Fair access to people who are eligible for Supporting People services. This relates primarily to BME groups but we will look to examine this against other client groups.

Performance Management

Accreditation

A new local accreditation process has been developed

Addressing under-performance

Where under-performance is identified clear improvement targets will be agreed with service providers and these will be monitored within an agreed timetable. We recognise that for small organisations some performance targets will be more difficult to achieve and that in some cases additional support of time will be required. We will therefore assess our response to under-performance on a case-by-case basis

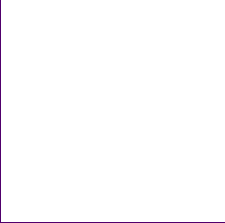
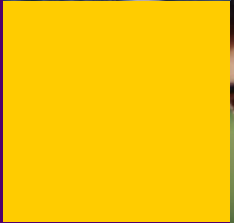
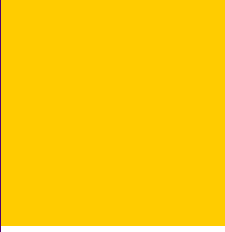
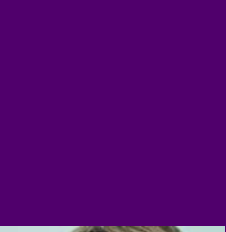
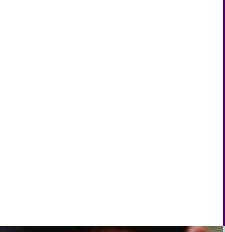
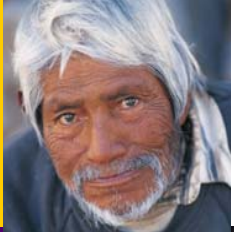
Procurement

We will be developing joint commissioning in partnership with Adult and Community Services, this will facilitate the integration of the Supporting People procurement processes to work more closely with social care commissioners in developing a clear system for procurement and in identifying and including other key stakeholders.

Contracting

ODPM have indicated that current position concerning Supporting People contracts should begin to change and that they should begin to be integrated with other contracts for each provider producing a single contract. This also has implications for the administration of Supporting People, as it should lead to greater integration with mainstream services. The work on integration will form part of next years' work plan.

Section 9



Commissioning Intentions

Introduction

This section sets out what the strategy will mean in practice. It translates strategic intentions into concrete service developments.

Action

Over the next five years we will:

- Reshape and retarget existing accommodation-based services to ensure most effective use of scarce resources
- Commission a number of carefully targeted new accommodation-based services
- Reshape floating support services to allow a more flexible service to be provided, which varies as people's needs fluctuate
- Reshape floating support services to facilitate a more even geographical distribution of services across the borough
- Considerably expand the amount of floating support that is available

Accessible services

- We will work with all providers to improve accessibility of services to people from black and minority ethnic groups. This will involve further research and consultation to understand needs better. Particular attention will be paid to Asian people, who are currently the most under represented in service provision
- All support services within the borough should be accessible to people with disabilities. Providers will be supported to meet the requirements of the Disability Discrimination Act(36), and to go beyond this to provide best practice
- We do not have sufficient numbers of travellers in the borough to warrant specific services, but travellers must be aware of how to seek support if they need it
- We will make small amounts of funding available to providers to enhance services to meet these requirements (e.g. producing publicity material which is appropriate for travellers, BME communities, visually impaired, training staff in sign language etc) and ensure that appropriate information is available to all sections of the community.

Gender specific services

There are very few gender specific services locally, and we will work with providers to review whether services are equally well able to meet the needs of men and women, or whether some single gender services should be developed. This is particularly an issue in mental health services, but could also be important elsewhere. Also, factors other than religion and culture also indicate that some services might be better provided for men and women separately.

³⁶ Disability Discrimination Act 1995 Up dated guidance on access

Commissioning Intentions

Move-on and permanent accommodation

The efficiency of several services is being affected by the lack of ordinary housing for people moving out of supported housing. This leads to frustration and loss of confidence in service users, and reduces the availability and value for money of services. We will investigate the options for improving the supply of move-on and permanent accommodation through:

- Working with all the housing providers in the borough to ensure that accommodation is available within the existing stock
- Working with the regeneration programmes to ensure that changes in the supply of accommodation do not adversely impact on the ability to move on
- Work with the regeneration programmes to identify opportunities to improve supply

Key issues facing providers

Support providers are operating in a difficult climate, due to uncertainty about future funding levels, at a national and local level. Involvement in the Supporting People programme has brought new risks to organisations. Some services were historically under-funded, and providers face difficulties in meeting the requirements of the programme. Others are much more generously funded and may face requirements to reduce costs. Providers whose services are judged to no longer be strategically relevant, or which are unsuitable in terms of cost or quality, will face the possibility of losing contracts or substantially changing their service. Services requiring capital investment bring particular risks if revenue funding is not guaranteed on a long-term basis.

We will use Supporting People programme funding to ensure that providers are operating within acceptable levels of risk. Unit costs will not be reduced to levels that compromise quality, in the search for increased volume of services.

Recruitment and retention of staff present serious challenges for providers, and a local strategy for recruitment is needed. Better sharing of skills and experience between and within statutory and non-statutory providers is vital, and joint training / secondments / job shadowing will be developed over the next five years. Areas suggested for joint training include harm reduction strategies for those working with people with alcohol problems.

Commissioning Intentions

Client group specific development

Fig 12. Remodelling

Priority	Year
Review of sheltered housing	2006 onwards
Consider remodelling existing schemes/properties for alternative client groups	2006 onwards
Re-target hostel accommodation for single homeless to take account of the range of needs being supported	2006 onwards

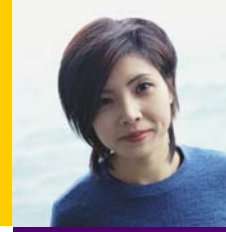
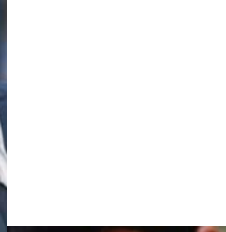
Fig 13. New build/services

Priority	Year
Scheme for people with young people with complex needs	2006/7
Retirement Village	2007/09
Development of Extra Care services	2006/onwards
Implement and expand the use of assistive technology	2006 onwards
Shared ownership scheme for people with learning disabilities	2007/8
Scheme for people over 25 with complex needs	2007 onwards
Develop Community alarm service to be tenure blind	2006 onwards
Develop floating support service for people with learning disabilities	2007 onwards

Figure 14 Reshaping/Expansion of Services

Priority	Year
Increase floating support for people with physical disabilities	2006 onwards
Increase floating support for homelessness to help meet the preventative of homelessness agenda	2006 onwards
HIA Handyperson services	2006 onwards
Increase floating support for North Tees Women's Aid	2006 onwards

Section 10



Risk Assessments and Management

The Risk Register

We compiled a comprehensive risk register for consideration by the Commissioning Body (see Appendix 7). The aim is to identify the key risks facing the SP programme, assess the seriousness of these risks and propose ways of managing them.

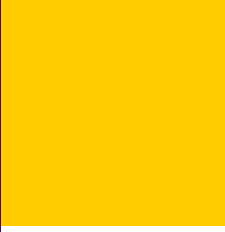
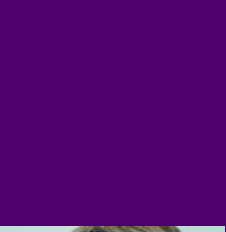
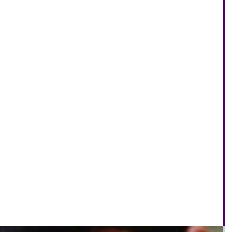
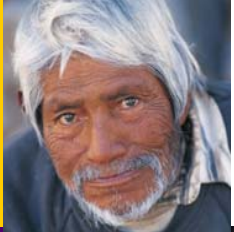
The risks we identified fell under the following headings:

- Strategic risks to the partnership as a whole (e.g. a major partner disengaging from Supporting People)
- Risks to Supporting People operations (e.g. significant vacancies in the Supporting People Team at short notice)
- Financial risks (e.g. unexpected under or over-spends against budget)
- Risks associated with reviews and accreditation (e.g. a provider of an important service not getting accredited)
- Other provider related risks (e.g. a major provider pulling out of the county)
- Risks to service users (e.g. from chronic under-staffing)
- Risks to the public (e.g. from increased levels of anti-social behaviour following a service closure)

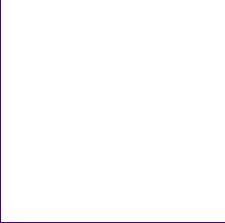
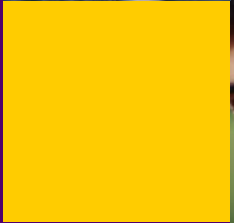
Risk Reporting

We have identified a responsible person for each risk area and institute regular risk reporting to the Commissioning Body. Over the next five years, we intend to continue with this system, keeping the register up to date and ensuring the Partnership Board is well briefed about the incidence and management of risk.

Section 11



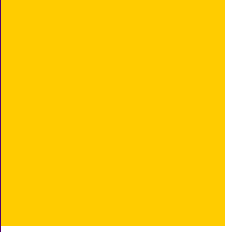
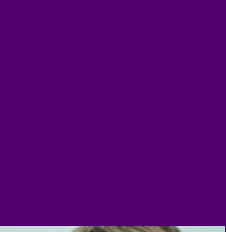
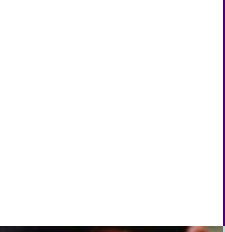
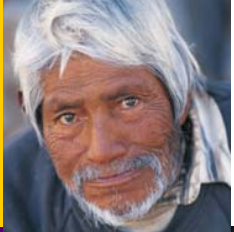
Keeping the Strategy Under Review



It is our intention that the Supporting People five-year Strategy should be a “live” document subject to regular review by all stakeholders. We see this approach as essential to ensuring that our aims and objectives are achieved – and that we can change tack quickly if necessary. We intend to review the progress on the strategy annually by:

- **Regular consultation** – the work of the Commissioning Body, Partnership Board and Provider Forum will continue, with their agendas and roles evolving as commissioning decisions are made and the strategy in general unfolds. A key element of these forums is the opportunity for consultation.
- **Improved Service User Involvement** – we want to ensure service users get much more of a say, through their providers’ service user involvement programmes and the various consultative groups that are already set up by the Council and its partners. We have now held our first Annual Service User Forum and from that have developed a Service User Forum Group, members of which sit on the Partnership Board
- **Keeping the strategic links up to date** – all the strategies mentioned above have their own “planning cycles” of review and revision. Furthermore, terminology changes and service areas are always being linked in new, innovative ways. So, we intend to produce a strategy schedule, which will explain the main links to Supporting People and provide guidance to the various planning cycles. This will be kept up to date so that new strategies and unexpected developments can be taken into account
- **Ongoing supply mapping** – consultees tell us that one of the most useful things about Supporting People is that it creates an exhaustive list of provision. We intend, therefore, to issue regular, up to date information about Supporting People services. We will also monitor the changing supply map to verify whether the gradually changing pattern of provision is in accordance with the priorities set out in this strategy
- **Ongoing needs mapping and gap analysis** – we recognise that the needs of service users are rapidly changing and that as Supporting People has developed in Hartlepool our understanding of these needs is evolving. We therefore need to continue to research needs in order to understand these changes and plan future services
- **Updated Annual Plans** – our Annual Plan for 2006/07 is set out below. These plans are required annually and will provide an opportunity to re-visit the Five Year Strategy on a regular basis

Section 12



Annual Plan 2006/7

Introduction

The Annual Plan sets out the key actions to be undertaken to meet the commissioning and work priorities of the Supporting People programme in 2006/07. In Section 3 we identified our strategic priorities and section 9 identified the investment priorities. The Annual Plan translates these into six key objectives. Each objective provides a list of actions that need to be taken by the Supporting People Team in Hartlepool to meet the specific priorities identified in this plan over the next year. The plan gives an indication of the timescale for carrying out each action and identifies who is responsible for ensuring the work is undertaken. The detailed plan can be found in Appendix 8.

The six key objectives within the Annual Plan are:

1. Ensure appropriate planning and management of the Supporting People Team
2. Effective management of the contracts and provider involvement within the Supporting People programme
3. Effective management of the 5-year strategy and development of new services and service change
4. Continue to review services and monitor performance of all SP services
5. Ensure the effective functioning of the decision-making structure
6. Ensure the effective involvement of service users

These actions have been identified, by considering current progress with the Supporting People work programme locally, and the risks associated with the programme (See Risk Register, Appendix 7).

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 2006/07. It also identifies specific targets identified by the Supporting People Team to meet Hartlepool Council performance targets.

Annual Plan 2006/7

Priorities for 2006/7

As a result of the financial settlement, there are going to be very few opportunities for new funding to expand services. Additional services will need to be funded by reconfiguring existing services.

Service Development

Section 9 set out our service development options for the next year. There are some specific issues that need comment that will impact on the delivery of the annual plan:

Older People

- This year will see the first practical stages in the implementation of long-term plans for rebalancing services for older people. This will be a long-term priority that will have a significant impact across a number of areas of the Council and for its partners

Single Homeless, Substance Misuse and Offenders

- The delivery of the commissioning intentions is based on improved access to public sector and, to a lesser extent, private sector housing. Negotiations with landlords and the development of protocols will be key activities during the year.

Risks

The main concern over the next year will be the management of the reduction in the grant and its impact on existing services. We need to ensure that the interests of service users are foremost in our planning. We recognise that our approach must be sensitive to these needs and therefore we will not make across the board decisions but look at each service individually and in its proper context.

We also know that service providers will be concerned by the implications of the financial settlement. We want to work with providers to reach sensible decisions about how the budget reductions are managed.

Management of the programme

We maintain a detailed work programme that is updated regularly, and progress is reported to the Partnership Board.

Annual Plan 2006/7

Allocation of costs between client groups and service types

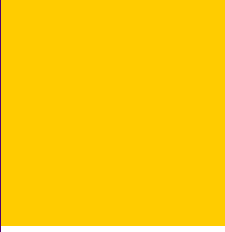
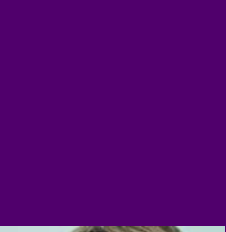
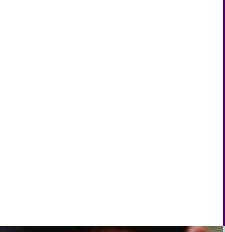
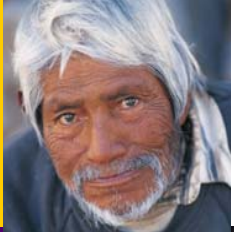
Set out below is the budget for 2005/6. Progress against the budget will be reviewed in detail by the Partnership Board and will be reported on to the Commissioning Body.

Fig 14. Allocation of budget by client group

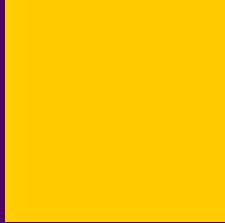
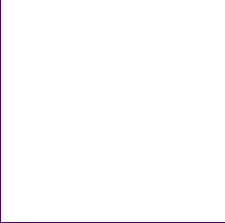
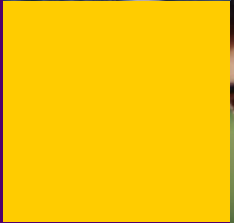
Primary Client Group	Accommodation based services	Floating support services	Total Units	Spend
Frail elderly	0	0	0	0
Generic	0	277	277	1,606,707
Homeless families with support needs	0	0	0	0
Offenders or people at risk of offending	11	8	19	229,892
Older people with support needs	2468	0	2468	1,425,031
People with a physical or sensory disability	4	0	4	20,375
People with drug problems	0	0	0	0
People with HIV / AIDS	0	0	0	0
People with learning disabilities	42	0	42	384,525
People with mental health problems	8	11	19	244,723
Single homeless with support needs	31	25	56	213,386
Teenage parents	6	6	12	144,809
Women at risk of domestic violence	6	9	15	153,340
Young people at risk	7	10	17	118,000
	2583	346	2929	4,540,788

Allocation of budget by client group will be made available for the 2006/7 financial year in April 2007.

Section 13



Conclusions



Hartlepool Council and its partners have successfully implemented the Supporting People funding system. Opportunity for new commissioning has been taken but the reduction in available grant in 2003/4 made further development more challenging. The financial settlement for 2005/6 and beyond makes the scale of further new development uncertain. However, there remain both unmet needs and growing needs as demographic pressures, particularly for older people, impact on the town.

At the same time Hartlepool is going through major change that will escalate as the impact of the regeneration programmes takes effect. These present further and probably our most demanding challenges. We recognise that a significant part of our task will be managing change while maintaining a high level of confidence and stability in the sector

For these reasons the Commissioning Body for Supporting People in Hartlepool views this five-year strategy as a “live” document. The strategy and our view of needs and supply will continue to grow and develop, and we see this as a starting point in fully utilising available resources to meet the support needs of vulnerable people in Hartlepool.

Our aims at the end of this strategy are to have a set of good quality services that have been re-shaped to more closely align with local strategic priorities and are flexible enough to meet the changing needs of service users.

For more information contact:

The Supporting People Team
Level 3
Civic Centre
Hartlepool TS24 8AY

Tel: (01429) 284263
Email: supporting.people@hartlepool.gov.uk



This document is also available in other languages, large print and audio format on request: ☎ 01429 284263

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درخواست یر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع یر بھی میسر ہے۔
এই ডকুমেন্ট অন্য ভাষায়, বড় প্রিন্ট আকারে এবং অডিও টেপ আকারেও অনুরোধে পাওয়া যায়।
本文件也可应要求，制作成其它语文或特大字体版本，也可制作成录音带。

ئەم بەلگە یە هەر وەها بە زمانەکانی که، بە جایی درشت و بە شریتی ته سجیل دەس دەکه ویت
Bu belge çeşitli dillere çevrilmiş olup, isterseniz iri harflerle basılmış şeklini ve kasetini de size gönderebiliriz.



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Supporting Evidence

1. References
2. Decision-Making Structure
3. Provider and Service User Consultation
4. Strategic Links
5. Cross Authority Statement
6. Needs Analysis
7. Risk Analysis
8. Annual Plan
9. Across the Board Cuts
10. Charging Policy
11. Supply Tables

Appendix 1: References

Documents

Supporting People Shadow Strategy

Report of PFA consultant's visit to Hartlepool Refuge (June, 2004)

PFA report 'Tackling Homelessness amongst Substance mis-users in Hartlepool' (February, 2002)

Hartlepool Best Value Performance Plan 2004/05

Healthcare Commission Performance Ratings 2004 and 2005

Tees Valley JSU Reports on:

- Ethnic Minorities in the Tees Valley
- Deprivation in the Tees Valley area
- House Prices in the Tees Valley (May, 2005)
- Unemployment in the Tees Valley (June 2005)

Hartlepool Local Authority Population estimates, mid 2003

Audit Commission Reports:

- CPA report for Hartlepool Borough Council (December, 2004)
- Joint Review Report of Social Services (July 2003)

Asylum Seeking Communities in North East England Quarterly Statistics (Jan-Mar, 2005)

Hartlepool Borough Council Corporate Race and Diversity Scheme (2005-08)

Hartlepool Community Strategy (2002-2012)

Hartlepool Neighbourhood Renewal Strategy (2002-2012)

Hartlepool PCT Local Delivery Plans 2004-05; and 2005/6-2007/8

County Durham and Tees Valley Cross Authority Statement (2004-05)

A New Housing Strategy for the North East, May 2005

Hartlepool Housing Strategy 2005-2010

Homelessness Strategy, Review and Action Plan 2003-2008

Housing Aspirations Study, 2002

Neighbourhood Renewal Strategy (2001-2011)

Hartlepool NHS Primary Care Trust Annual Report of the Director of Public Health and Wellbeing for Hartlepool (2003-04)

County Durham and Tees Valley NHS Strategic Health Authority Local Strategic Framework for County Durham and Tees Valley (2005)

Cleveland Police Corporate Policing Strategy 2005-08 and Local Policing Plan 2005/06

Safer Hartlepool Partnership Crime Disorder and Drugs Strategy 2005-08 and Review of performance 2002-05

Hartlepool Teenage Pregnancy Strategy (2000-2010) and report of research into the needs of teenage parents (2003)

Hartlepool Youth Justice Plan (2005-06)

Joint Strategy for carers in Hartlepool (2002-03)

Hartlepool Older Persons Strategy

Hartlepool Older Persons LIT Extra Care Housing Strategy (2004-2016)

Mental Health documents:

- Suicide prevention performance framework 2005 targets
 - Carers work plan (2005)
 - Hartlepool BC Best Value Review of Services and Improvement Plan
 - NSF Autumn 2004 Review
 - Work plans and progress reports for NSF standards 1;2;3;4;5; and 7
- Drug Action Team Adult Treatment Plan (2004/05) strategic summary, self-assessment checklist and planning grids
- Youth Justice Plan (2005-06)

Websites

www.statistics.gov.uk/census2001

www.neighbourhoodstatistics.gov.uk

Audit Commission

Healthcare Commission

www.refugeesne.org.uk

www.northteesandhartlepool.nhs.uk

Northern and Yorkshire Regional NHS Excellence Modernisation Programme

website www.nyx.org.uk

www.hartlepool.gov.uk

Tees Valley Joint Strategy Unit www.tees-valleyjsu.gov.uk

Hartlepool Partnership

English Indices of Deprivation 2004: Summary (revised). ODPM

KPVS Migration figures www.statistics.gov.uk/downloads/theme-population/KPVS

Cleveland Police www.clevelandpolice.uk

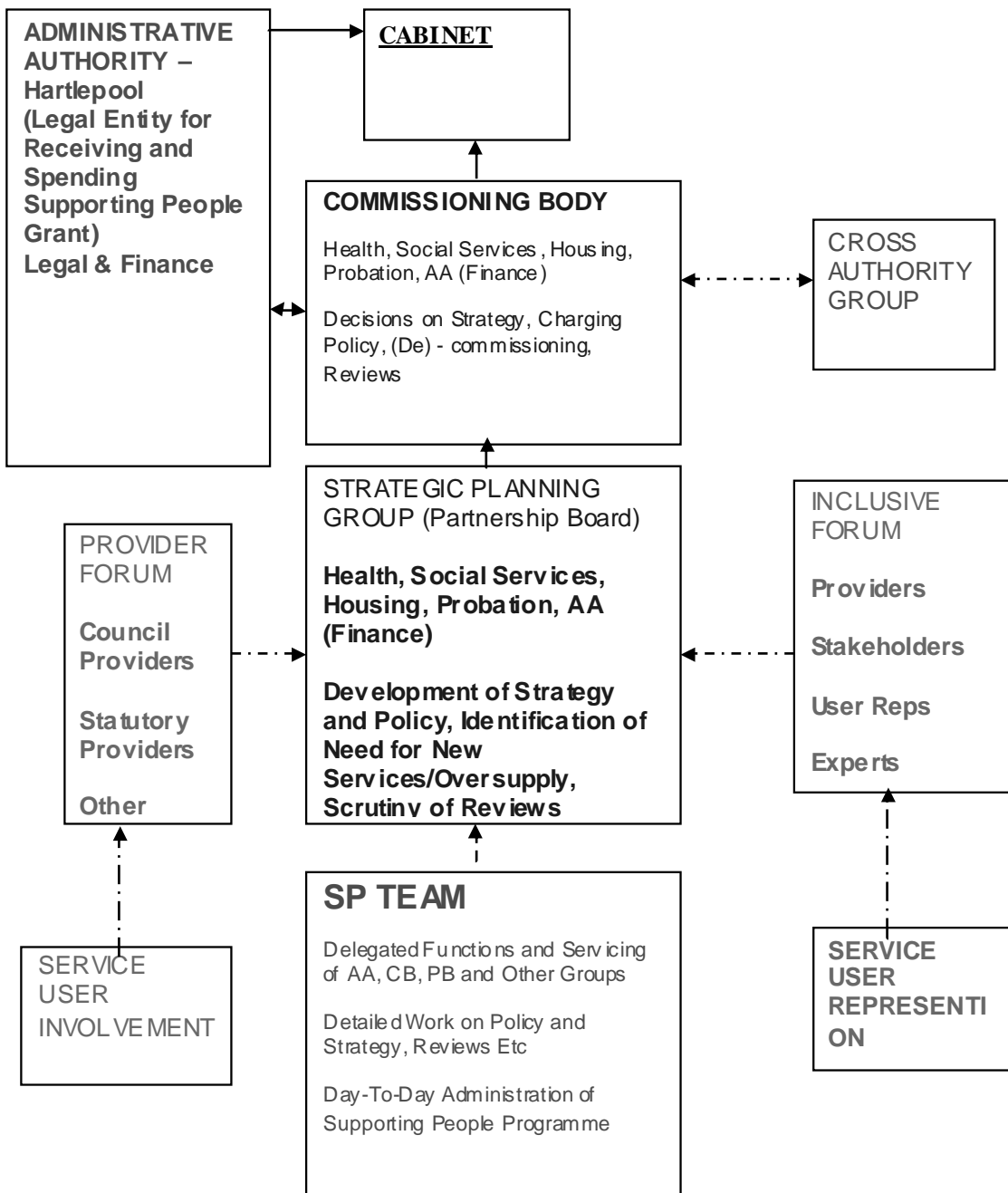
Multi-agency drugs database

Appendix 2: Decision making structure in Hartlepool

KEY TO COLOURS AND ARROWS

DECISION MAKING	INFLUENCING
OVERSIGHT/ACCOUNTABILITY	ADMINISTRATION

RECOMMENDATIONS/DECISIONS	—————→
INFLUENCE	- - - - -→
SERVICE	- - - - -→



Appendix 3: Provider and Service User Consultation

1.0 User Involvement Strategy

1. Introduction

ODPM guidance on Supporting People consistently emphasises the importance of user involvement to enable users and potential users of services to influence the strategic development of services in their communities. This is all the more important in a situation where currently services are provider-led and through the Supporting People Review process work is being undertaken to remodel them appropriately. At the same time users of services are vulnerable people who need to be supported to give their views. In a situation where they may fear for the security of their homes where a service provider is often also a landlord, and also where it is often unlikely that they have had an opportunity to compare one service with another prior to being accepted. At the same time there are likely to be groups of vulnerable people for whom there are currently no services tailored to their needs. An obvious example would be the absence of housing-related support (other than through Home Improvement Agencies) for older homeowners. For all client groups, there is a need to gather information on types of need from potential users to inform future service developments.

2. Good Practice in User Involvement

There is a bewildering range of suggestions and literature on involving service users. However the underlying principles are relatively straightforward and are:

- a) User involvement and consultation should be flexible, imaginative and tailored to those being consulted.
- b) Money and/or time invested in user involvement should be measured and compared with the achievement of outcomes either in actual changes to services, new developments, or new strategic goals.
- c) Seek the views of potential as well as existing/former users.
- d) Feedback the outcome of consultations to those involved.
- e) Ensure that user involvement is ongoing. Users will contribute more with experience of being consulted, and the situation from their perspective may be changing for better or worse over time.
- f) Enable users to develop a view of how to measure the benefits to them of their involvement. Use this to measure results alongside b) above.
- g) When consulting set limits that are not too narrow as to prevent people contributing experiences that may be relevant (e.g. about the impact of

locality on their support needs) but not so wide as to encourage lack of focus.

3. Work-plan

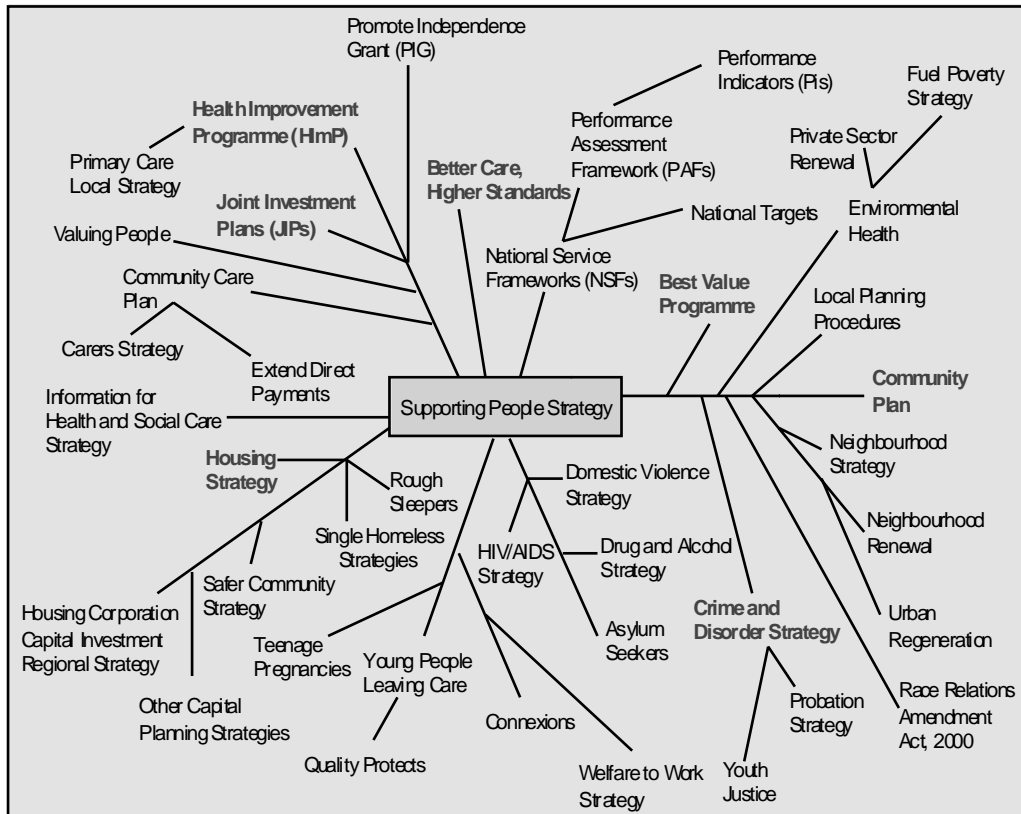
The work-plan below has been devised with these principles and the situation of Supporting People as a new strategic and regulatory framework in mind. It identifies a range of actions from large events to gain a range of views and publicise our services, to setting up a system for recording the views of users by client group whether these come through formal consultation, reviews, via providers, or by other means.

Fig 15 Action plan

ACTION	DATE	PERSON	ANTICIPATED OUTCOME	ACTUAL OUTCOME
1. Inclusive Forum for all Client Groups	Oct 06	S.P. Team	Publicise range of SP services & strategic/regulatory system. Gain views of wide range of people via discussion & short questionnaires	
2. Make User Feedback a standard agenda item at provider forum	March 06	Chair of P.B.	Providers provide information to SP team based on their own consultation methods. Sharing of methods between providers.	
3. Propose additional User representation on PB	March 06	P.B.	P.B. consider how users should be represented	
4. Use Reviews to map SUI and make improvements`	Dec 05 & ongoing	Review Officers	Ensure involvement to meet level C of QAF (involvement in own planning). Map services meeting Level A (policies & procedures) & share good practice	
5. Set up Log for User comments by client group. Use Team Meetings to ensure log is updated.	March 06 & ongoing.	S.P. Team 'owner'	Suggestions from users on how services need to improve/change are logged and fed into strategy/development	
6. Arrange visits to projects	Jan 05 &	Providers	Users can comment on	

	ongoing	SP Team	what they value in their own & other services. Community groups can comment on how services do/do not meet their needs.	
ACTION	DATE	PERSON	ANTICIPATED OUTCOME	ACTUAL OUTCOME
8. Map all user consultation groups /consultation exercises in Hartlepool. Ask SP to be put on agenda.	By March 06		Database of user groups by client group. Feedback from groups to SP strategy.	
9. Ensure articles from Users in SP Newsletter	Dec 05 & ongoing	SP Lead (newsletter) Team (articles)		
10. Record Progress on 1-9 above. Feedback to groups, forums as appropriate.	Ongoing	M.P.		

Appendix 4: Strategic Linkages



Appendix 5: Durham and Tees Valley Cross Authority Statement

Cross Authority Statement 2004/05

Introduction

The *Supporting People* programme funds housing related support services for vulnerable people who require assistance in order to secure or maintain independent living. *Supporting People* came into effect on 1st April 2003. It creates the opportunity for the integrated local and regional strategic planning of services to reflect the needs of local populations, and for the funding of a more diverse range of high quality support services across different types of tenure.

Purpose

ODPM require that all administering authorities are members of a Cross Authority Group (CAG), and have identified groupings of neighbouring authorities, which they consider 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, 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, and people with drug or alcohol problems or rough sleepers.

The Durham and Tees Valley CAG consists of the County of Durham and the five unitary local authorities, Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees. These authorities have formed a natural alliance to develop services within the Durham and Tees Valley area. The aim of the group is to address strategic objectives that could not be achieved without working in collaboration.

The purpose of the CAG is to address the planning and funding of future service provision within the geographical area of Durham and the Tees Valley. It will also take on board issues arising in the North East Region and nationally in accordance with identified demand for future services.

Supporting People links to Regional Housing Strategy

Regeneration is the main theme of the NE Housing Strategy – authorities are facing severe housing market 'failure'. This affects both private sector properties

and social housing. The future capital funding of social housing will be decided through the Regional Housing Board and schemes will need to fit in with the regional and sub-regional strategies. An added complication for supported housing schemes is the uncertainty over revenue funding for schemes. The Housing Corporation is not processing funding bids that do not have committed revenue funding. Given the overall reduction of Supporting People grant funding over the next few years for the majority of the authorities in the Durham and Tees Valley area, few authorities will be able to offer that commitment unless new money can be attracted.

Generally it is likely that the issues around Supporting People – the complexity and the uncertainty of funding – will prevent the identification and allocation of resources to supported housing schemes for the foreseeable future.

Fig 16 Tees Valley Map



Fig 17 Tees Valley Cross Authority Statistics 2004/05

	Darlington (2003)	Hartlepool (2003)	Middlesbrough (2003)	Redcar and Cleveland (2003)	Stockton- on-Tees (2003)	Durham (2003)
Electorate (Dec 2002)	76,700	68,900	101,400	106,400	127,900	N/A
% Population Non-white	2.1	1.2	6.3	1.1	2.8	1.0%
Number of households	42,300	37,400	55,200	57,400	73,000	200,100
Number of						

	Darlington (2003)	Hartlepool (2003)	Middlesbrough (2003)	Redcar and Cleveland (2003)	Stockton- on-Tees (2003)	Durham (2003)
household spaces	44,300	39,300	58,800	59,900	76,200	217,294
Resident Population						
1971 Census	98,100	99,700	158,000	148,100	164,300	509,300
1981 Census	98,700	94,900	151,100	151,000	173,400	508,700
1991 Census	98,900	91,400	144,400	146,400	175,300	494,500
2001 Census	97,800	88,600	134,900	139,100	178,400	493,470
Area (hectares)	19,747	9,386	5,387	24,490	20,390	222,608
Population density (persons per hectare)	5.0	9.4	25.0	5.7	8.8	2.18
Economically Inactive including:						
Retired	34.4	41.0	42.0	40.1	36.0	39.27
Student	15.3	15.4	14.1	16.4	14.3	15.0
Looking after home/family	2.8	3.7	6.1	3.5	4.0	4.6
Permanently sick/disabled	6.5	7.2	8.2	7.7	7.0	6.3
Other	6.8	10.8	9.2	9.1	7.1	9.7
	3.0	3.9	4.4	3.4	3.6	3.6

The Index of Multiple Deprivation and the Tees Valley

Although the Index of Multiple Deprivation 2004 has been produced in a slightly different way to that of 2002, these changes have had little effect on the overall position of the Durham and Tees Valley authorities, and the results are generally as expected. In summary:

- Results for income, employment and education are little changed
- Results for the health domain show increased levels of deprivation
- In relation to the new crime domain, the Tees Valley scored quite highly, but not significantly so
- Local areas score poorly in the Barriers to Housing and Services domain. This may well be due to the indicators which make up the domain including not only overcrowding and applications, but also difficulty of access to owner occupation (affected by property prices)

Durham and Tees Valley Supporting People Budgets

The budget allocation for Supporting People for 2004/05 is outlined in the table below. These amounts are before any efficiency saving has been applied by

ODPM. For 2004/05, the ODPM applied an efficiency saving of 2.5% on all administering authorities. At the time of drafting this statement, it is not yet known how ODPM will allocate funding for 2005/06. This information will not be available until the results of the Spending Review 32004 are announced and individual councils' allocations published.

Fig 18 Grant allocations

Authority	Supporting People Grant 2004-05	Supporting People Grant 2005-06	Reduction
Redcar and Cleveland	£2,218,296	£2,245,094	-£26,798
Stockton-on-Tees	£2,778,127	£2,753,375	-£24,752
Darlington	£4,073,739	£3,868,563	- £205,176
Hartlepool	£4,078,130	£3,902,468	-£175,662
Middlesbrough	£6,290,557	£5,973,730	-£316,827
Durham	£15,313,772	£14,615,606	-£698,166

Membership

The CAG was established in 2001 and has met bi-monthly since that date. The Chair is held on a rotating basis between the six lead officers and each authority takes a turn to host the meetings. The core membership of the CAG comprises the Supporting People lead officers from each of the unitary authorities within the area. In addition the CAG has also consulted with colleagues from the North Tees Primary Care Trust, Darlington Primary Care Trust, SITRA, the National Probation Service based in Teesside & County Durham, the Benefits Agency, and a provider representative from the National Housing Federation. Informal links have also been made with North Yorkshire Supporting People team, as there are services that this group delivers to clients from North Yorkshire.

Role of Members

The following are the key tasks of CAG members:

- Producing the cross authority statement
- Needs and Supply Analysis at a cross-authority level
- Identifying existing cross authority schemes / services
- Identifying gaps in current services and the need for new services
- Considering the results of relevant scheme / service reviews
- Identifying areas where joint protocols may be needed and establishing them via the Supporting People Core Strategy Groups
- Consider reports and advice on regional and national context
- Relationship(s) with Commissioning Bodies
- Ensuring providers and users are properly engaged in the decision-making processes
- Consider the data from Client Records reports

- Feed into the strategic planning of services

The CAG will not be involved in implementing plans, as this will be the responsibility of local Commissioning Bodies.

Lead officers play a vital role in that ensuring there is co-ordination within the planning and administrative processes and synchronization within the plans across authorities.

Whilst each administering authority is responsible for the reviewing of its own services, where the service is a designated service, then a lead officer from another authority will be a member of the review team.

Designated Services

Designated services are those that have been acknowledged by ODPM as being of national or regional importance. Once designated, the administering authority cannot terminate a service without the written consent of the Secretary of State (Supporting People Grant Conditions).

Services are designated on the basis of the following criteria:

- All accommodation based services which provide for women at risk of domestic violence as their primary client group
- Services which provide for high risk offenders
- Services which cater for a very specialist combination of needs - e.g. a service for Chinese elders with mental health problems
- Services that offer national coverage – e.g. specialist brain injuries services, of which there are only one or two in England

Designation criteria have only been applied to accommodation-based services. This is because the provision of such services is typically dependent on the availability of suitable accommodation for the service user group.

Based upon the above criteria, the designated services for Durham and Tees Valley CAG are as follows:

Tees Valley and Durham Designated Services

* Both the Women's Refuge and services for Offenders have been designated by O.D.P.M as cross authority services in the recently published Supporting People designated service list.

Fig 19 Domestic violence

Authority	Service	Client Group	No. of units	Contract value	Review Date
Darlington	Women'	*Domestic	8	£93,621	Jan 2005

Authority	Service	Client Group	No. of units	Contract value	Review Date
	s Refuge	Violence			
Darlington	Hostel	*Offenders	6	£80,493	April 2004
Darlington	Accomm service	Offenders	6	£59,260	April 2004
Durham	Women's Refuge	Domestic Violence	5	£55,137	July 2004
	Women's Refuge	Women's Refuge	6	£109,428	June 2004
	Women's Refuge	Women's Refuge	6	£210,694	April 2004
	Women's Refuge	Domestic Violence	6	£112,997	April 2004
Hartlepool	Women's Refuge	Domestic Violence	6	£126,619	December 2003
Middlesbrough	Women's Refuge	Domestic Violence	11	£98,449	Jan 2006
Redcar & Cleveland	Women's Refuge	Domestic Violence	8	£163,904	Jan 2004
Stockton	Women's Refuge	Domestic Violence	7	£124,368	Oct 2003
Totals			75	£1234.97	

Furthermore, there are several schemes that have been identified by the Durham and District Supporting People partnership as being appropriate for the cross authority pattern of access to services.

Fig 20 Cross Authority Provision

Provider	Client group	No of Units
Norcare	Ex-offenders	12
Norcare	Alcohol misuse	8
North East Direct Access	Homeless People	63

Decision Making

Issues requiring decisions are considered by the CAG at the regular meetings. It is considered sensible to ensure all member authorities agree in principle the key issues requiring a decision. It is important each member authority shares responsibility for the overall success of the CAG and the process of decision-making. The following protocols apply.

- Decisions will normally be made by reaching consensus

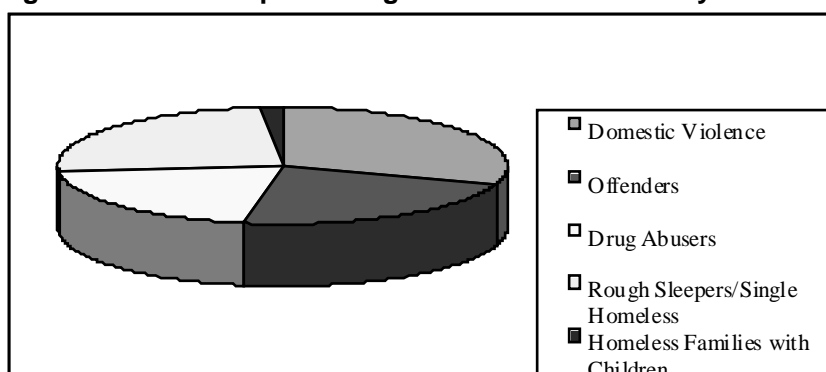
- In the event of a disagreement, the majority view will prevail and issues will be resolved through discussion and debate.
- If this process identifies concerns for specific CAG members or their respective Commissioning Bodies, further discussion will take place.
- In the event of continued disagreement, the CAG will refer any issue that cannot be resolved to the ODPM.

Client Record Data

The National Baseline Survey, carried out by ODPM, identified clients moving to other Commissioning Body areas (see Table 1 below). However, ODPM advise that the figures are “patchy” and therefore need to be viewed alongside the quarterly returns from the Client Record Office, which show a reduction in movement between authorities.

From April 2003, a Supporting People client record form was introduced. The Joint Centre for Scottish Housing Research (JCSHR) has been contracted by the ODPM to process the data collected from the client record forms. Providers are required to complete a form for all new service users who begin to use Supporting People services. The data from the Supporting People client record form provides information on a quarterly basis to Administering Authorities and the ODPM about who is accessing the services and by which routes. It also provides information on the characteristics of individuals who use *Supporting People* services. The information can then be used to monitor fair access to Supporting People services and to examine whether the range of support needs are being met locally.

Fig 21 – Client Groups moving between local authority areas



Results of National Baseline Survey aggregated picture of performance within the Durham and Tees Valley CAG

In the whole of the North East, Newcastle has the highest total number of new clients (by a large margin), followed by Middlesbrough, Darlington and Durham. Durham and Darlington have about the same number of new clients, though

Durham has slightly less than Darlington. All the authorities mentioned seem to have the highest number of new clients in Housing Association/ RSL, Housing Authority and Voluntary Organisation run accommodation. This matches the trend seen in the data for the whole of England. The total number of new clients for the North East represents 5.72% of the total number of new clients in England.

Supporting People 'Client Group Summary' Analysis

Supporting People 'Client Group Summary' information and Census 2001 population figures for the local authority areas of Darlington, Durham, Middlesbrough, Stockton-on-Tees, Redcar and Cleveland and Hartlepool has been analysed.

The key issues from this analysis are detailed below. The information analysed was correct at 31 March 2004 and should be interpreted in the light of local need data.

Older People

The analysis shows that the largest proportion of household units for all areas is for older people with support needs.

Fig 22 SP household units for older people with support needs

LA	% SP units for older people with support needs as a % of all SP units.	Household units for older people with support needs per 1,000 older population*.
Darlington	88%	159
Durham	93%	226
Hartlepool	80%	112
Middlesbrough	79%	60
Redcar and Cleveland	68%	21
Stockton	82%	45

* Older Population – at retirement age or over

When compared with Census 2001 older population figures, the proportion of household units for older people with support needs compared to number of older people is highest in Durham and Darlington. Redcar and Cleveland and Stockton have the lowest provision when compared with older population figures.

There are no Supporting People supported household units within the Tees Valley or Durham for older people with mental health problems/dementia.

Learning Disabilities

The provision of household units for people with learning disabilities is highest in Darlington (1.19 units per 1,000 population) and lowest in Stockton (0.16 units per 1,000 population).

Homelessness

Darlington has the highest provision of household units for single homeless people, whilst it is lowest in Durham. Middlesbrough and Stockton have the highest provision for homeless families with support needs.

Domestic Violence

Although Durham has the highest number of household units for women at risk of domestic violence, the highest provision compared to population numbers is in Hartlepool (0.16 per 1,000 population). The second highest provision is in Redcar and Cleveland (0.10 per 1,000 population).

Young People

Durham has the highest provision for young people at risk. Darlington has the highest provision for young people leaving care.

Refugees

Only Middlesbrough has Supporting People supported household units for refugees. This might be a reflection of the higher number of asylum seekers dispersed to Middlesbrough, which are subsequently given refugee status compared to the other local authority areas.

People with Drug Problems

Only Middlesbrough and Stockton have SP supported household units for people with drug problems.

People with Alcohol Problems

Only Durham has Supporting People supported household units for people with alcohol problems.

Other Groups

There are no Supporting People supported household units within the Durham and Tees Valley area for mentally disordered offenders, travellers, people with HIV/AIDS or rough sleepers.

Conclusion

This Statement has been developed in accordance with the guidance issued by ODPM and in response to the results of the Baseline Survey.

Under Supporting People, local authorities are expected to provide for the housing related support needs of all clients in their area. There is a range of services across Durham and the Tees Valley that address the support needs of vulnerable people who need to access services outside of their local area or who have no local connection. This includes services for client groups where the level of need is not sufficient to require provision in every authority or where need can only be met by provision in authorities other than the client's home authority.

The CAG recognises that many supported housing services work with people from more than one local authority area and many vulnerable people are transient and either have no one place of residence, or may not be able to access services where they live. The members of the CAG have agreed to work closely with each other on these issues to:

- Ensure that all authorities accept responsibility for hosting, supporting and developing services that do not only respond to their specific local need
- Identify, plan and where possible jointly commission cross authority services, sharing expertise, experience and resources with regards to housing support services for vulnerable people who are transient
- Ensure that the needs of vulnerable people in Durham and the Tees Valley, for which it is difficult to define a local connection, are met
- Ensure that cross authority access remains a reality for those vulnerable clients who need services outside their locality
- Avoid duplication in terms of monitoring reviews and consultation requirements on behalf of providers and to share best practice
- Ensure that services that could or should be focusing on local needs are supported to do so

Each local authority member of the group is supportive of the continued need for cross authority provision to address the needs of some service users from a number of client groups and in particular, women experiencing domestic violence, single homeless people, people with drug and alcohol problems and offenders and those at risk of offending. To this end our statement also reflects the interests of service users.

The CAG also recognise their responsibility to ensure value for money when developing cross authority provision in line with Government requirements. Where a service could be provided with greater value for money in partnership with another local authority area, the members of the CAG will use reasonable endeavours to arrange for the identified service to be provided in partnership, where that assists in providing strategically relevant, good quality value for money services.

As each local authority area develops its 5-year strategy and the commissioning plans are drawn up, this will inform and identify potential

service areas for joint commissioning. In the coming months and years the CAG will act as a conduit for developing new and re-modelled support services, working with the local authorities in the Durham and Tees Valley area. There will be a need to develop joint commissioning arrangements for new services across the boundaries of the local authority areas. This will be especially important where there is an identified need for a support service, shared by other local authorities in the area but where it would be uneconomical to commission a specific service within any one Borough. The CAG will take the lead on joint commissioning arrangements.

It is also expected that, in line with the National Procurement Strategy and local procurement arrangements each local authority area will collaborate across the CAG in order to secure Best Value in procurement and to secure the benefits of the aggregation of services and contracts.

Specifically the CAG have identified levels of unmet need amongst ex offenders, young people with complex needs and people with complex needs/mental health problems. The needs of these groups may be best met by the development of specific services for these cross authority service recipients.

The development of additional services may be particularly beneficial to address the under provision of refuge places in local authorities. At present BVPI 176 recommends that each local authority has one refuge place per 10,000 of the population. This results in local authorities having a shortfall in available refuge places. This could be effectively addressed through wider support services including increased floating support, and effective and efficient move on facilities, and security adaptations for individuals own homes. Increasing the number of alternative support services would increase the number of options available to individuals, including obtaining similar levels of support from neighboring local authorities. This would be a significant step towards reducing the number of places taken in refuges through long stays, which are resulting from move on delays and consequently a limited availability of spaces.

The CAG will explore the options for such developments, in the coming months now that the Supporting People budgets for 2005/06 have been announced.

Appendix 6: Hartlepool Supporting People Needs Analysis

Older People with Support Needs

Introduction

Older People are the largest single group of service users both nationally and in Hartlepool. It is a diverse group with a wider range of differing needs.

This sub-section section will consider national and Hartlepool needs that have been identified in the various planning processes and these will be linked to demographic evidence and tenure. The section will close with conclusion and a summary of the findings.

National context

There is a wide range of national policy statements and initiatives that need to be reflected in the local framework that identifies the needs of older people. Within the scope of this section we are only able to summarise a few key points

The key themes are:

- Developing an overarching approach to the older population as a whole which reflects all aspects of the lives of older people, tackles age discrimination and promotes social inclusion (Better Government for Older People-BGOP)
- Modernising social services through promoting independence, prevention, and improving social services for older people
- A National Service Framework for Older People (NSF) covering health and social care, focussed on rooting out ageism and promoting wellbeing
- A more integrated approach to delivering health, social care and support with an emphasis on whole systems working in areas such as hospital admissions and discharges, and community based services; hip fractures; stroke; rehabilitation; intermediate care; mental health; equipment; and adaptations
- Giving a higher priority to linking housing and housing support services with health and social care services to enable more older people to remain in the community and improve the quality of older people's lives
- The development of financial levers (sticks and carrots) to promote improvement and change
- There is also an abundance of secondary and related reports that are too numerous to be addresses within the context of this report.

The Audit Commission/BGOP has conducted a study on "Promoting Independence and Wellbeing". The work resulted in a series of reports that are designed to both influence national and local policies. It is particularly significant that the Audit Commission was directly involved and it can be anticipated that future performance measures will include a greater emphasis on prevention strategies at a local level.

The work of the Audit Commission is broadening the definition of prevention to reflect:

- Demographic changes as the population ages
- The expectations of older people linked to their increased understanding of their rights leading to the challenging of age discrimination and health inequalities
- The need to address the sense of exclusion that older people have from the regeneration agenda
- The need to reduce the pressure on the hospital system by shifting resources

The challenges that emerged from this work were:

- Shifting the focus of services from the most vulnerable through "rescuing services" to services that address the aspirations of older people by helping them to lead full independent lives for as long as possible
- This will require a fundamental shift in the perception of older people as dependent on services towards independence and wellbeing
- To make a real difference to older people's lives broader approaches need to be developed that include safer neighbourhoods, access to leisure activities and transport

The national policy focus therefore is now broadening out from the 15% of older people who are intensive users of health and social care services, to the wider older population. This is highlighted in a recent discussion paper - *Public Services for Tomorrow's Older Citizens: Changing Attitudes to Ageing (2004)* - from the Audit Commission, LGA (Local Government Association), ADSS (Association of Directors of Social Services), BGOP, Nuffield Institute for Health and the Joseph Rowntree Foundation.

The Government view Supporting People as a key tool in the development of preventative services. It therefore is essential that Supporting People is able to play a full part in developing an appreciation of the role of low level support services within a "whole systems approach"

Although Supporting People may not have large additional resources to fund new services it has been given tools to help make shifts in existing services to better meet local needs. It can also act as a catalyst for the development of new services. Set out below are national performance standards that have a direct relationship with Supporting People

National Performance

Fig 23 National PI's

Relevant national objectives for older people	PI's
National Service Framework for Older People: Standard 8 is particularly relevant - the promotion of health and active life in older age. Also of relevance is Standard 3: provision of intermediate care (preventing unnecessary hospital admission, support early discharge, and reduce/delay need for residential care), and Standard 2: person-centred care (services based on individual assessment and taking account of preferences of services users, families and carers)	<p>Improve the quality of life and independence of older people so that they can live at home wherever possible, by increasing by March 2006 the number of those supported intensively to live at home to 30% of the total being supported by social services at home or in residential care.</p> <p>2004-5 20%</p> <p>2005-6 25%</p>

Needs – at a National level

Drawing on a range of government guidance including ODPM, DoH and SSI/Audit Commission information the following needs have been identified:

- The focus of funding for home-care services is on intensive support and to achieve this there has been a shift away from lower level supports services. However, there is consistent evidence from research with Older People that they view low level support as a key element in maintaining independence. There is also evidence that in the long run that this approach is cost effective.
- Development of specialist support for older people with Mental Health issues, both non-dementia and dementia
- Delayed hospital discharge and prevention of admissions through a range of solutions including Intermediate Care, intensive support at home and Rapid Response through multi-disciplinary teams
- Development of Extra Care
- Increase the “housing” element within the multi-agency response through:
 - Increased use of HIA's by giving them a wider remit including Handy-person services, energy efficiency etc
 - Re-think the use of existing sheltered housing to support higher and wider level of need
- Develop provision for the small but increasing numbers of older people with a Learning Disability

Within Hartlepool we can see all of these national issues being reflected in the shape of service change and development. Over the past three years significant shifts in service have been planned and are now being implemented that reflect the national agenda. In particular the shift towards more services that support people at home is leading to more intensive home care services. This is also being reflected in the reducing numbers entering residential and nursing care. These changes are dealt with in more detail latter in this section.

Demography

The population of over 65's is estimated to grow between 2002 and 2016. These shows there will by 2016 be about 1,052 more people over 65 in Hartlepool. By 2016 the number of older people in Hartlepool aged over 75 will grow by 20% to 7,200, an increase of 1,400 (SP Shadow Strategy, 2002).

The Neighbourhood renewal Strategy (NRS 2001-2011) has identified that certain NRS areas have a relatively old population, these are: Rossmere (where 21% of the population are over 65 years); and South Park/Brinkburn areas (where 23% of the population are over 65 years).

County Durham and Tees Valley Cross Authority Statement (2004-05) notes that the largest proportion of household units for all areas is for older people with support needs. 80% of Hartlepool's units are for older people with support needs, which translate to 112 per 1,000 population of over 65 year olds.

Hartlepool Extra Care Housing Strategy (2004-2016) projected that 200 units of extra care housing are required in Hartlepool by 2016.

Table 24 Growth of number of older people

Age	Numbers of People	
	2002	2016
65-74	8390	8520
75-84	4578	4880
85+	1440	2060
Total	14408	15460

Table 25 shows current and projected numbers of people supported in residential and nursing care in 2002 and 2016. This shows that by 2016 there will be about 135 more people with needs requiring care at this level.

Table 25 Number in Residential/ Nursing Care

Age	Numbers of People 2			
	Current		Projected	
	Total in Age Band	Total in Residential/ Nursing Care	Total in Age Band	Est. total in residential/ nursing care

65-74	8390	79	8520	85
75-84	4578	241	4580	253
85+	1440	253	2060	370
Total	14408	573	15460	708

Hartlepool has a population with higher levels of morbidity than neighbouring local authorities, and the population nationally.

Table 26 Morbidity

	Hartlepool	Darlington	M'Bro	Stockton	England & Wales
% people with a health problem	24.4	20.4	22.3	19.9	18.2
Standard mortality rate	127	107	122	106	100
Permanently sick disabled	11.3	6.9	9.3	7.3	5.6

The impact of this on dependency levels in old age is significant, and reflected in the levels of service provision to older people. This is reflected in Hartlepool providing higher levels of care as measured by Department of Health Performance Indicator for care levels provided to older people:

Table 27 Home Support

	2002 - 2003				
	Hartlepool	Darlington	M'Bro	Stockton	England & Wales
Intensive Home Care	18.8	9.2	15.6	10.7	12.3
Older People Helped to Live at Home	123.1	70.5	143.1	104.1	91.3

These high levels of morbidity contribute to high levels of referral and assessment activity carried out by Hartlepool Social Services.

The tenure held by people in respect of their homes is also relevant to consideration of the type of provision to be made. 63% of people in Hartlepool are owner/occupiers, compared with 69% nationally. Providing more property to buy as well as rent is therefore indicated.

Also relevant is the type of housing stock in the town. There are relatively high numbers of people living in terraced houses – 41% in Hartlepool compared with 26% nationally and 32% in the Tees Valley and North East.

The numbers of older people who are owner/occupiers are growing in line with the general shift towards owner occupation. However, national research indicates that older people are more likely to occupy older housing with less equity and they are less able to maintain this property. Like other sections of the community their first choice is to remain in their own home and few will

see renting as their preferred choice if they decide to move. A significant percentage of the BME communities choose owner occupation and they will also continue to see this as their preferred choice. With the growing numbers of owner/occupiers there will be a need to develop more services for this group. This may include:

- Extension of the mobile warden and community alarms service
- Extension of the HIA and the addition of other supporting services
- Improved advice services

Regeneration

Hartlepool has successfully bid for extensive regeneration programmes and there are major implications for Older People the majority of who do and will continue to, live in ordinary housing. Some Older People face a degree of future uncertainty as to their homes. For some people Hartlepool's plans for re-investment and regeneration represent a threat to their current housing – through decommissioning, clearance or improvement programmes. However, all proposals have full backing of residents and there is a high degree of consultation and involvement in the decision making process. Additionally the Home Improvement Agency is active in the regeneration areas, offering advice and assistance to elderly home owners.

The need to resolve issues of 'fit for purpose' of some sheltered housing schemes was first raised in the SLOOP report (now the Older Person's Housing Strategy). This suggested, through a Best Value Review Rationalising the existing supply of specialist housing for older people in terms of:

- Condition
- Location
- Range
- Services offered
- Developing new housing for older people that is able to offer an alternative to long term care and a re-housing option as existing schemes are decommissioned
- Improving the provision of general needs housing in both the social and private sectors to ensure it meets the needs and future needs of residents who potentially require high levels of accommodation accessibility
- Developing housing and tenure options that enable people to have a choice of housing and meets the objective of the borough in increasing the level of privately owned property equity
- The housing solutions will need to relate to the services needed by older people and how these can be developed to ensure and promote:
 - Continued independent living as far as possible to meet the stated preferences of older people
 - Services that enable and empower individuals, and which support good health
 - Culturally appropriate services that reflect the communities they serve

- Cost effective use of service resources across housing, social care and health
- Community based solutions for older people particularly those with high levels of frailty, those with mental health needs and the increasing numbers of older people with learning difficulties

Strategic context and links

Hartlepool's Older Person's Strategy (2004) vision is: '*To improve the quality of life for older people by enabling them to participate as active citizens in the life of Hartlepool, and, when necessary, to receive the right care in the right place at the right time*'.

The strategic objectives include:

- Objective 4. - ensure that older people can live in houses of their choice which best meet their needs and promote their independence with funding for support.
- Objective 5. – help older people to stay well by identifying ways to preventing ill health and accidents, but when they fall ill to ensure they receive the right services in the right place at the right time.

The Housing Strategy (2006-2011) outlines the Council's commitment to meet the decent homes standard, implement the SLOOP report and expand options for older people to remain living independent lives.

Hartlepool Older Persons LIT Extra Care Housing Strategy (2004-2016) sets the joint strategic direction for the development of 'Extra Care' housing for older people in Hartlepool, outlining the kind of provision needed in Hartlepool and how it is to be developed and resourced.

Home Improvement Agency

Hartlepool has a long established Home Improvement Agency run by a local housing association offering advice and assistance to elderly home owners. The expansion of the handyperson service, funded for two years through SHIP should be explored to offer floating support to the elderly, contributing to fall prevention and reduced hospital admission as well as ensuring residents are supported in their homes.

Relevant performance indicators and targets

- PCT Local Delivery Plan outlines key national targets which include: increasing the number of older people supported intensively to live at home to 30% of the total being supported by social services at home or in residential care; and each year there will be less than 1% growth in emergency hospital admissions and no growth in re-admissions
- Best Value Performance Indicators relevant to Older People's services are outlined in the table below with actual and target figures.

Table 28. Hartlepool BVPP (2004/05) Performance Indicators and Targets relating to Older People's Services.

	Actual 2003/04	Target 2004/05	Target 2005/06	Target 2006/07	Target 2012/13
BVPI 54 Increase the number of older people helped to live at home per 1,000 population aged 65+ years	124.6	125	125	125	125
LPI More older people receiving intermediate care	64.2	700	700	700	800+

Future Commissioning

A considerable amount of work has been carried out in the past 8 years to understand the needs of older people in Hartlepool. The Borough was a pilot area for Better Government for Older People (BGOP). Key themes to emerge from this work included: listening to and involving older people as equal partners; improving the quality of information, access and communication; addressing the issues of isolation and loneliness; and improving the health and well-being of older people.

A Best Value Review of Older People's Services was carried out in 2000/01. As part of this work, a detailed study of Supported Living Options for Older People (SLOOP) was also carried out. Key findings include:

- A need to shift investment away from institutional care to care at home, which maximises the potential for rehabilitation and enablement
- Develop Extra Care sheltered housing by remodelling the existing stock (the SLOOP report found that standards vary enormously and physical access is severely limited in many schemes)
- Increase the number of low-level preventative services (to add to Endeavour's Care and Repair Scheme and the Red Cross Hospital to Home Service), e.g. a one-stop shop Healthy Living Centre
- The Community Alarm System is not meeting its potential
- There is a need to improve performance on Hospital discharge and prevention
- There is a need to strengthen and broaden joint working between Housing, Health and Social Care Services.

Work on implementation of the SLOOP report is now under way and two sheltered schemes have been de-commissioned. However, partly as a result of reducing the level of supply, all the other sheltered schemes are now fully let. The development of the Retirement Village and additional Extra Care are now important in creating capacity to address other schemes that have been identified as not fit for purpose or where changes to the service may be planned.

The National Service Framework Local Implementation Team (NSF LIT) took on the responsibility for overseeing the implementation of the SLOOP Action

Plan. The work of the Better Government for Older People – Pilot Programme has continued through the fifty plus Forum. This Forum helps ensure engagement and involvement with older people, and also provides representation on the Local Implementation Team (LIT). In 2004 the fifty plus forum, with extensive involvement of older people and in partnership with the LIT – produced the Hartlepool Older People's Strategy.

Hartlepool Extra Care Housing Strategy (2004-2016) describes a range of consultation activities with older people, which enabled them to establish a clear picture of the design and service features that were important to older people, and would therefore be included in the development of the new extra-care facilities. These are:

- Modern, self-contained flats and/or bungalows (re-modelled or new-build), that secure owner-occupier, shared equity or tenant status for residents. Most units need 2 bedrooms and should be of sufficient standard to meet customer expectations.
- Dwellings to incorporate sustainable, flexible, modern design, in structure and fittings to promote independence, including where possible the installation of assistive technology.
- Buildings and services designed to meet needs of people with dementia.
- Accessible community facilities for an active life in old age e.g. shop, support and advice on opportunities for employment/volunteering, information and advice services (including benefits advice), laundry, assisted bathing, hair salon, activity/recreational rooms, computer suite, fitness/health suite and pool, GPs consultation room, lounges, restaurant, café, library room, transport accessibility.
- Access to services that reduce and compress morbidity through health promotion, early detection and treatment of illness, prevention of illness and accident, rehabilitation and re-ablement.
- Schemes should incorporate provision to ensure appropriate care pathways are available to support people on discharge from hospital
- An on-site scheme managers office, with CCTV and support staff available to manage all housing care/support services 24/7. An on site team of qualified personal care staff including appropriate levels of night staff.
- Community based services, which offer access to some amenities for other members of the community.
- Bespoke services for ethnic minority service users
- Procedures, criteria and allocation processes agreed jointly by the residents, housing agencies, social services and health services.

Other needs/gaps identified

The Joint Review Report (July 2003) draws the following conclusions relating to older people:

- An increasing number of people are supported at home with intensive home care, though more needs to be done for older people with dementia-related problems.

- A range of intermediate care services, including the award-winning multi-disciplinary link team, has developed and delayed discharges from hospital are at a minimum
- More needs to be done to develop appropriate diversion from hospital (set up) and to reduce the high level of re-admissions

Hartlepool Housing Strategy (2005-2010) notes a fairly high level of 'unfitness' in the private sector, with 16% of unfit housing occupied by households aged over 60 and on low incomes. Furthermore, there are approximately 1,300 houses occupied by elderly households on low incomes with outstanding repairs estimated to cost between £1,000 and £5,000. Initial option appraisals are being carried out to identify those dwellings for which demand is considered 'fragile'. Progress on these is as follows:-

- Appraisal is underway in Belle Vue in conjunction with Housing Hartlepool, Hartlepool Revival and residents
- A further phase of appraisal in NCH began in January 2005, involving the Council, Housing Hartlepool, Home HA and the Dyke House Residents Association. This will focus on the fragile areas identified in the Housing Market analysis work carried out by Nathaniel Lichfield & Partners in 2004. The Council and Housing Hartlepool are working together on an action plan to transform the older persons' bed-sit accommodation to meet current and future aspirations. The Council is considering ways of funding an extra care scheme to replace Orwell Walk. Hartlepool Housing Strategy (2005-10) reports on consultations with resident representative groups, where the following issues were raised. Hartlepool Housing Strategy (2005-10) reports on consultations with resident representative groups, where the following issues were raised:
 - Help for older people to remain in their own homes and maintain satisfactory repair standards
 - Help for owner-occupiers to maintain their own homes
 - More help for vulnerable people, especially through the Disabled Facilities Grants

Mental Health

The prevalence of dementia in people over 65 is about 5%, rising to about 20% in people aged 80 and above. This would suggest that around 750 people in Hartlepool have dementia and that this will increase as the numbers over 80 are projected to increase. There will therefore be an increasing need to provide support to this growing group. In particular there is significant evidence of effective support being provided at home rather than in care. Initiatives funded through Supporting People are increasing that link:

- Assistive technology
- Aids and Adaptations
- Community Alarms
- Support services

There is also increasing use of sheltered housing to support people with low to medium dementia. In 1995 "Brighter Futures" (Kirkwood, Buckland and

Petre) concluded that sheltered housing "has been found to be a successful environment in which those with dementia can live with well being".

Of course there are already older people living and being supported in the community with dementia.

The development of this type of initiative requires close local co-operation to avoid simply transferring an institutional model of support into sheltered housing. "Not Alone", published by the Housing Corporation and Anchor Trust, builds on "Brighter Futures," and sets a good practice guide for how this might be delivered:

- The development of a dementia service within sheltered housing needs to be placed within the broad strategic objectives of enabling and independence
- Tackling the shortage of residential care for people with dementia
- Examining the potential of housing based models for people with dementia
- Building on the model of specialist care and support services into the home
- Examining the potential of new technology to support people with dementia at home

There are no Supporting People supported household units within the Tees Valley or Durham for older people with mental health problems/dementia (CAG Statement 2004/05)

Learning Disabilities

Given the link in older age between learning disability and dementia, there is likely to be a growing number of older people with both a learning disability and dementia.

These issues will make new demands on the housing and service systems for older people with a learning disability.

Although the numbers are not significant in numerical terms there are questions as to whether or not older people with a learning disability get stuck in learning disability accommodation as they get older. There is also concern about what happens when older family carers can no longer carry out that function

There is a further issue as to how far housing for older people, such as sheltered housing, is open in terms of both access and support service models for people with learning disabilities. There are examples from other parts of the country of broadening the concept of shelter to make it more accessible for older people with learning disabilities, and to offer them greater choice in terms of housing options

Older Carers

The increasing numbers of people are beginning to fall into the Older Carers category. The Commissioning Strategy highlighted the problem. We have already mentioned Learning Disabilities but there are also older people who are looking after older people such as their parents. Often the solution is to ensure that the right levels of support are provided in the home. This will include packages of adaptations, technology and support. However, in some cases this will also include alternative accommodation with support.

Tenure

Supporting People breaks the link between tenure and support so offers the potential to deliver support to older owner-occupiers. However, due to historical factors the balance of current services is towards Social Rented Housing, with the exception of the Home Improvement Agency, while the percentage of households and growth is in owner-occupation. It is important to highlight the fact that nationally (BGP) older home owners do not feel that the current system and services are open to them, so a key issue is to ensure that the strategy does address the needs of all tenure groups in a real way.

Many owner-occupiers are not wealthy, and the main asset is their home. Although pensions have grown over the past 30 years, they have grown much faster at the top end of income than the lower end (Centre for Policy on Ageing 2001) and the latter is also the prevalent group in Hartlepool. There is evidence that many owner-occupiers are caught in a trap of having an income that takes them above benefits threshold levels but they have little disposable income and are therefore reluctant to seek help from support services. They also have difficulty in maintaining their property. For these older people access to information is a crucial starting point in enabling them to make choices. The HIA has been established for many years in Hartlepool – offering advice and assistance in seeking funding. The HIA administers grants on behalf of the Council, enabling essential repairs to be undertaken.

Very few services funded through Supporting People are specifically targeted at owner-occupiers or those who live in the private rented sector. Most people who receive a warden or community alarms service live in public sector housing. For owner-occupiers the Home Improvement Agencies is a valuable service that can act as an access point to a range of other services.

There are also very few affordable options for those who want to make use of the capital they have to purchase specifically designed property such as sheltered housing for sale, or shared ownership sheltered housing. Currently the 'social' housing options for ownership are a Guardian HA scheme (leasehold) and 6 Tees Valley Housing Association shared ownership bungalows. These were built with grant funding from the Housing Corporation have proved extremely popular. The alarm system is Supporting People grant funded.

The lack of information and choices means that older owner-occupiers are less likely to make positive choices about suitable housing, and are more likely to seek help in a crisis.

Needs Identified

- A successful bid has been made to the DoH (£9.8m) and Housing Corporation (£850k) for a retirement village in the town to be built by Joseph Rowntree Housing Trust. Start on site is anticipated by March 2006. When completed this scheme will offer 240 units of accommodation (including about 60 extra care) and a range of tenure options.
- Hartlepool Extra Care Strategy (2004-2016) also refers to the following planned changes to accommodation and support services:
 - A scheme to re-provide Orwell Walk (Sheltered Housing) and Swinburne House (Local Authority Residential Home) is being developed with Housing Hartlepool. This will provide 20 extra care as part of a 60 unit scheme. Some of the remaining 40 units are likely to be shared ownership. Shared ownership units will be included in this scheme
 - Further schemes totalling 120 additional places will have to be commissioned by 2016. This would be part of the overall implementation of improved housing for older people that are underway to deliver the recommendations of the Review of Supported Living Options for Older People.
- Increases in intensive home care are likely to be matched by a need for increased support services. There are likely to include out-reach and floating support. Mobile Warden Services could be developed to address part of this need
- The development of Extra Care can act as a strategic tool in aiding the change process and therefore will be seen as a key method of addressing need. However, there are a variety of different models and it will be important to make use of models that fit local needs
- As the population ages the numbers of people with dementia will also increase and specialist support services will need to grow to address these through:
 - Use of existing sheltered housing
 - Use of new Care Village/Extra Care provision
 - Development of support packages at home
- There are a growing but small number of older people who have needs linked to Learning Disabilities. They have a diverse range of needs, some will need intensive supported accommodation while others will need a small amount of additional support to remain in their own home

- The number of Older Carers is growing and there needs for both support and accommodation are likely to grow
- The shift in tenure towards owner-occupation will have to be followed by a shift in the balance of support services away from its current focus on rented accommodation

Conclusions and estimate of needs

Given the number of older and other people who could potentially require housing support services, and the impact that could come from the commissioning plans for this group this will require a long-term and significant response. The Supporting People Shadow Strategy began to address the change issues identified above and this will need to continue within the 5-year strategy. The extent of the need is very dependent on the complex relationship in assessing care, health and housing needs and this will be a constant challenge.

The housing and support markets for older people are becoming increasingly complex, as older people have more resources to be able to exercise choice. However, the markets are currently segmented by different generations of older people - younger older and "older" older - using different factors on which to base and make housing choices.

The markets are also influenced by the lack of good information and advice available to enable older people to make the right choice for them at the right point in their lives, and the lack of appropriate choices available to them. Some older owner-occupiers feel that the 'welfare system' is not interested in or understanding of their needs. This is a pattern that we regularly see in areas that we work.

Older people are interested in alternatives to residential care - both housing and care - and they want practical 'timely' help, for example with adaptations in order to be able to remain independent.

A key element in addressing this situation would be to develop a comprehensive Older People's Strategy that is supported through a "whole systems planning approach". This is an approach that has been increasingly adopted by authorities across the county and is recommended by the ODPW/DoH. It helps to integrate and manage the major shifts that need to be made across disciplines and organisations. Hartlepool is currently in the process of developing a strategy that should be published next year.

Numbers

Over-all, there is clear evidence that both in terms of numbers of people, changes in expectation and addressing strategic requirements that there will remain a large unmet need through-out the life of the 5-year strategy and beyond. Also there are plans to make significant changes to the structure of the sheltered stock. We can conclude that for those currently in receipt of a service the initial need is for at least 250 units of Extra Care. However, within

the life of the 5-year strategy at least a further 100-120 units will be needed to address the growing levels of frailty.

The numbers of owner-occupiers is growing but very little information is available that can provide some precision to an estimate of numbers in need. This is partly a result of the way information is gathered, but also the lack of services to this sector. Further research is required in this area. However, this should not stop service development, as it is clear without the ability to estimate numbers accurately, that the lack of services means that there is a significant unmet need.

Estimates for people suffering from dementia suggest that around 750 people over 65 will suffer from some form of dementia and some of who will also have a learning disability

Service Development

In the short-term it is clear that the development of preventive services will continue to remain a high priority. This involves:

- Shifting existing support services to better meet current and future needs
 - Increase use of sheltered housing to support a wider range of needs including: Intermediate Care, Dementia, Mental Health and Learning Disabilities
 - Provide housing and support for older carers
 - Remodel some existing sheltered housing into provide some elements of Extra Care
 - Review the roll of the mobile warden services and their capacity to support needs outside of the RSL sector
 - Consider the capacity and technology in Warden Call centre to meet future developments in technology
 - Further invest in SMART and Assistive technology
- Commissioning new services that are strategic to this long term shift
 - Complete the "Retirement Village" development
 - Develop additional Extra Care schemes when resources allow
 - Develop floating support services, particularly aimed at owner-occupiers
 - Develop specialist support service packages for older people with dementia, Mental Health issues and Learning Disabilities to help them remain at home
- Strengthening of integrated service delivery
 - An underpinning aspect of service delivery will be flexible and integrated working. This may be assisted by more use of shared budgets and the sharing of tasks across disciplines
- Although need will continue to outstrip supply it is currently only possible to judge minimum numbers:
 - 250 Units of Extra Care Units by 2009 and further development afterwards
 - Encourage the development of Shared ownership and outright purchase sheltered and Extra Care

- Develop specialist accommodation for Dementia sufferers within existing sheltered and new Extra Care
- The needs of the BME communities are growing but are still very small:
 - Development of advice services that will help people access services on a cross authority basis
 - Low level support services such as gardening and shopping
 - Access to sheltered housing and Extra Care that is within or close to the community and that provides community sensitive services
 - Floating support services

People with Mental Health Illnesses

The NSF framework spells out the national vision for mental health services and is driving structural change in the way services are delivered. It places a strong emphasis on a 'whole systems' approach to the delivery of treatment, care and support to people experiencing Mental Health issues, based on seven standards, covering 5 specific areas of service delivery.

Fig 28 NSF standards

Standard one	Mental health promotion
Standards two and three	Primary care and access to services
Standards four and five	Effective services for people with severe mental illness
Standard six	Caring about carers
Standard seven	Preventing suicide

The framework makes it clear that access to appropriate housing and housing support services is an essential requirement for delivering these standards. For example, on standard 7 preventing suicide, the NSF observes:

'Suicide accounts for 400,000 years of lost life before the age of 75 years. It is associated with poverty and adverse social circumstances and numerous studies have demonstrated the correlation between poor housing, low income and mental ill health'

The NSF also highlights the important functions that supported housing can play in providing alternatives to hospital based interventions and in promoting independent living:

'Twenty four hour staffed places provide accommodation and support for some of the most disabled and disturbed service users who would otherwise require long term hospital care. On average around 25 people per 250,000 fall into this group, but in inner city areas (especially inner London) the levels of need are up to five times higher. Despite evidence of their value, there are shortfalls of 24 hour staffed places and supported accommodation in some parts of the country, including those where needs are highest. Further development of this element of the mental health system of care is a high priority through partnership between statutory and non-statutory services.....'

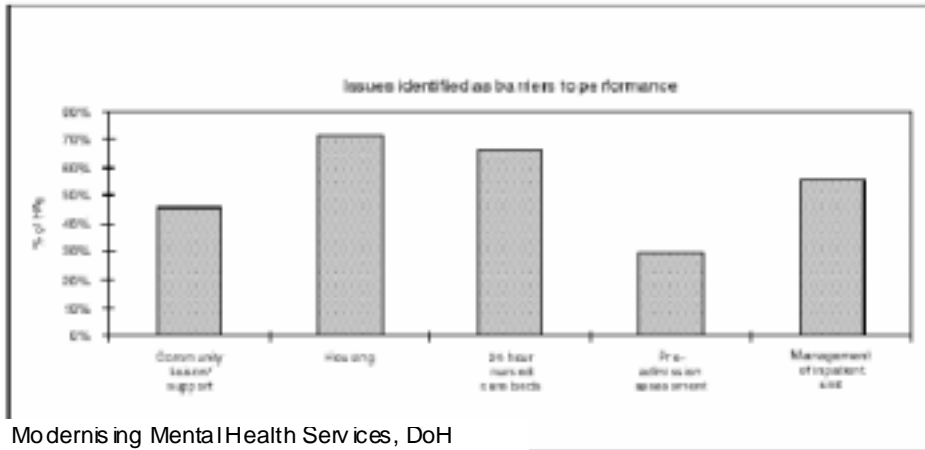
..... Ordinary housing supported through the local authority also has an important place in providing more or less independent living. Housing and support schemes commissioned by local authorities working in partnership with health authorities also provide more or less independent living. Much of this type of accommodation is provided by housing associations, and managed by specialist independent organisations.' (Page 51, NSF)

Modernising Health and Social Services (D.o.H. 1998):

This White Paper highlighted that the lack of suitable housing and housing supports services was the most commonly cited reason for inappropriate delays in discharging people from acute psychiatric wards:

'Health Authorities cite a number of barriers to more effective and efficient performance (Figure 30). A shortage of ordinary housing and a lack of 24 hour staffed residential accommodation were cited as major causes of people staying longer than necessary in hospital beds, particularly acute beds. For example, the availability of 24 hour staffed beds varied between 2 and 20 beds per 100,000 population. These factors lead to restrictions on the availability of acute beds for people needing an admission, particularly in the inner cities where the prevalence of mental ill health is higher...

Fig 30 Barriers to performance



Modernising Mental Health Services, DoH 1998

Mental Health and Social Exclusion (D.o.H. 2004)

This recent report by the Social Exclusion Unit highlights the central role of supported housing services in fulfilling the government's social inclusion agenda. This report includes the following performance indicators in relation to homelessness, housing and housing support provision:

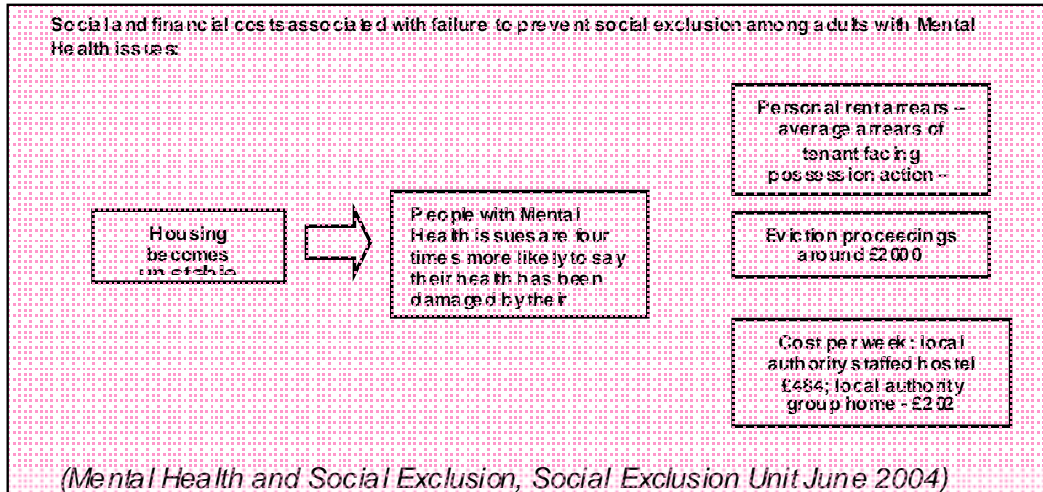
Fig 31 Homelessness PI's

INDICATOR	DATA SOURCE	OUTCOME
Housing		
i) number of homeless people with Mental Health issues accepted as being in priority need for housing	Office of Deputy Prime Minister (ODPM)	Year-on-year decrease in numbers

ii) Number of people with Mental Health issues assisted by the Supporting People Programme	ODPM	Contextual information
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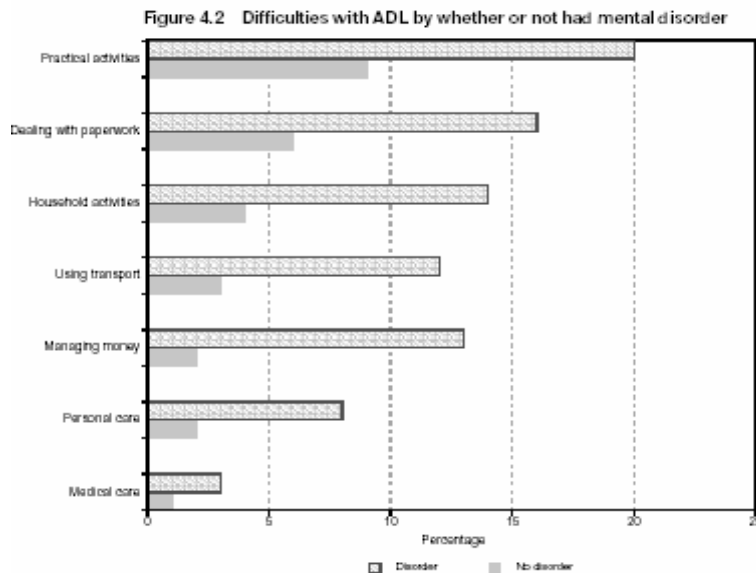
(Mental Health and Social Exclusion, Social Exclusion Unit June 2004)

The Social Exclusion report also highlights the social and economic impacts of housing and homelessness problems associated with mental illness:
Fig 32 Impact on Mental Health



Defining and measuring support needs: It is self-evident that people with Mental Health issues have, on average, greater support needs than the general population. However an ONS report, 'The Social and Economic Circumstances of Adults with Mental Disorders', provides some measurement of the level and nature of these needs, compared to people without Mental Health issues (ADL refers to Activities of Daily Living):

Fig 33 Difficulties with ADL



The Social and Economic Circumstances of Adults with Mental Disorders, Meltzer et al, O.N.S.

Needs Identified

Estimates of the prevalence of mental distress in Britain vary. The Office for National Statistics or ONS puts the figure at 1 in 6 adults at any one time. Another major survey that is frequently quoted puts the figure at 1 in 4. (*Common Mental Disorders*)

The 1 in 6 figure given by the ONS represents those people defined as having 'significant' Mental Health issues, whilst the latter survey uses a wider definition of Mental Health issues. This also includes a breakdown of the progress that these 1 in 4 people are likely to make through the mental health system as follows :

- Around 300 people out of 1000 will experience Mental Health issues every year in Britain
- 230 of these will visit a GP
- 102 of these will be diagnosed as having a mental health problem
- 24 of these will be referred to a specialist psychiatric service
- 6 will become in-patients in psychiatric hospitals

Source: Based on figures from Goldberg, D and Huxley *Common Mental Disorders*. Routledge 1982

If that is applied to Hartlepool it would mean:

- 26700 will experience Mental Health issues
- 20470 people will visit a GP
- 9078 of these will be diagnosed as having a mental health problem
- 2136 of these will be referred to a specialist psychiatric service
- 534 will become in-patients in psychiatric hospitals

The Supporting People Shadow Strategy refers to Social Services workload case figures of 1,195 in 2002. 448 (37.5%) people were on an enhanced CPA. The Community Support Team supported 46 people between 2001/02. The Shadow Strategy noted that existing provision consisted mainly of a Social Services scheme, the Firs, which provided short stay accommodation to 7 residents with mental health who required minimal staff support/intervention to regain their independence. This was linked to a group home for 3 people who received floating support from staff at The Firs, and a Community Support Team, also based at The Firs, which supports around 40 people living in their own homes.

The Firs is no longer used as a supported housing scheme for this group.

Eamont Terrace, a new scheme managed by Richmond Fellowship, opened in June 2004, supporting 8 people in a purpose-built scheme with individual flats. Service users all have mental health problems at medium to higher

levels, and can stay for up to around 2 years. No service users have yet moved on to permanent housing from this scheme. There is no floating support service attached to the scheme as yet, but it is identified that there is a need for such a scheme to support service users as they move on elsewhere.

A scheme provided by New Horizons, in properties owned by Endeavour Housing Association, provides 8 furnished tenancies, as well as floating support.

Indications from providers of supported housing for this group are that a significant proportion of service users have a drug or alcohol addiction as well as a mental health problem. Although services for treatment are in place and can be accessed by this group, there are no supported housing resources for people with both sets of problems. It is anticipated that there could be difficulties identifying safe and supportive areas for people to be re-housed to from Eamont Terrace, and that rehousing will be rather more difficult to achieve for those with a dual diagnosis.

The Richmond Fellowship scheme opened around the same time that The Firs closed. Providers note that there is considerable unmet need for this client group in Hartlepool: Richmond Fellowship estimate that a 2nd scheme replicating their new scheme would be filled within a few weeks, given the pressure from social workers and others trying to find places for their clients is considerable.

The Best Value Review of Mental Health Services (2004) identified some issues about need for housing and support:

- People with stable housing are more likely to be owner occupiers whereas people with moderate or severe risk are more likely to be in local authority or private sector rented accommodation
- 15 out of 39 people with moderate to severe risk were expressing difficulty with current accommodation
- 10 out of 32 people who have current stable housing have had problems within the last two years, compared with 27 out of 39 with moderate to severe risk

It also identified that more intensive support was needed than the Firs could provide, and that there was an additional need for floating support along the lines of the New Horizons and Endeavour model.

Priorities

A Best Value Review of Mental Health Services produced in 2004 identified the following priorities:

- Additional floating support schemes – a further 5 people to be supported by 2005
- 8 flats with support available to people with mental health problems (Richmond Fellowship scheme)

- Re-focus the staff resource released at The First to provide intensive support to people placed at Richmond Fellowship scheme and elsewhere
- Transfer Landsdown Road to a housing agency to offer additional 'choice' of housing options for people with a mental illness
- Implementing proposals in Homelessness Review applying to people with mental health (and substance misuse) problems

Other issues raised during the consultation process on needs

Connections between Supporting People and other strategic groups for this client group

There may be a need for discussion at a strategic level about dual diagnosis and supported housing needs, as well as planning to meet the level of need for people solely with mental health needs.

Priorities for the next 5 years

- Additional supported housing provision and floating support
- Specialist floating support for people moving on from supported housing
- Supported housing and floating support for people with a drug or alcohol problem as well as a mental health problem

People with Learning Disabilities

Valuing People sets out a number of key objectives including the provision of choice in housing and clearly states that people with learning disabilities should be given a genuine opportunity to choose between housing, care and support options. Local councils are therefore expected to ensure that all housing options are considered when they are exploring the future housing, care and support needs of people with learning disabilities and their families. These options should include small-scale ordinary housing, supported living and village and intentional communities as well as residential care.

To enable people with learning disabilities and their families to have greater choice and control over where, and how, they live, it may be necessary to increase the range and choice of housing open to people with learning disabilities in order to enable them to live as independently as possible.

As part of the Valuing People process, local authorities were required to produce a local housing strategy for people with learning disabilities and related plans for commissioning care and support packages.

Needs Identified

- Of the 328 people known to services in 2002, there were at least 7 people who were living with elderly parents and would require supported accommodation soon.
- On average approximately 5 people per annum become known to services for the first time.
- There are about 5 or 6 young people in any one year with complex needs who require 24-hour support to enable independent living, either in long-term supported accommodation or through support services in their own homes. The Best Value Review identified 25 young people with a learning disability in transition into adult services in June 2004. During consultation, 77% of them stated that they hoped to have their own accommodation when they were older

Hartlepool Best Value Performance Plan (BVPP, 2004/05) includes a local performance indicator measuring the number of adults with a learning disability aged under 65 years who the Local Authority helps to live at home, per 1,000 adults under 65 years old. The actual rates for Hartlepool were 3.2 in 2002/3 and 3.5 in 2003/4 Targets for 2004/05, 2005/6 and 2006/7 are 3.6, 3.7 and 3.7 respectively.

DoH (Signposts for Success) estimate that 60% of people with Learning Disabilities will have additional needs requiring ongoing medical interventions. This also raises the issue of those people who have more complex problems that will need additional support.

The Shadow Strategy reported that the priorities identified by the Learning Disability Board were to meet the following needs:

- Older carers
- Young people in transition
- 2 people needing accommodation currently in long stay hospital
- 6 people with learning disabilities and severe challenging behaviour
- Parents with a learning disability
- Out of area placements returning to Hartlepool
- Additional self-contained supported accommodation
- 24 hour supported scheme for people with challenging behaviour
- Scheme to move towards independent living

2 supported housing schemes of 6 units each were identified as being priorities for development in the Shadow Strategy.

Since the Shadow Strategy was produced, a Learning Disability Housing Strategy was published, in early 2005, and this identified the following scale of need and priorities for the future, in relation to supported housing:

- The national accommodation based figure of 0.58 units per head of total population equates to 52 designated Supporting People Units for Hartlepool services compared with the current 36 units available. Current

levels of Supporting People units are also lower than the regional figure per 1000 head of population.

- Need to develop provision for people with complex needs and challenging behaviour
- Additional 16 Supporting People designated units of accommodation were needed
- Floating support of at least 7 units and 10 units by 2006, targeted towards people facing a period of transition such as following the death of a carer or where a move from residential accommodation to independent living is being supported
- Long term supported accommodation and support for young people who stay at home
- Research into models elsewhere for meeting complex needs

A joint bid with Redcar & Cleveland BC to the Department of Health Extra Care Fund has been successful for 6 shared ownership properties in the Rift House area

Newholm Court, a scheme to house people with learning disabilities within the area of a sheltered housing scheme, has continued to meet the needs of this group with considerable success. Additionally, New Era provide a floating support service

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View of Providers

Provider agencies have identified that the first generation of people with learning disabilities reaching an older age brings with it implications for their accommodation and support, with some likely to need adapted accommodation and others possibly requiring sheltered housing which will meet their individual support needs. A number have already moved into sheltered housing within Hartlepool.

Most significantly, people with learning disabilities, including profound disabilities and physical disabilities, are now likely to live longer and to have aspirations for independent accommodation at a much earlier age than has previously been the case. Planning to meet these needs should start at the stage before the group reaches adulthood, and some work on the transition between children's services and adult services - which hopefully will include a projection of housing and support needs - has already begun. The Housing Strategy 2005-2010 identifies the scale of need as 5 or 6 in any one year.

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A further key concern is how to provide housing and support, and occupation, for those people living with ageing parents, who are less able to take care of this group and who also provide much of the voluntary effort going into centres offering leisure activities.

It was noted that the removal of respite and rehabilitation accommodation for older people also impacted on people with learning disabilities, who occasionally made use of these resources.

The Social Services Department also notes that there has been an increase in number of service users with Autistic Spectrum Disorder.

Conclusions

The numbers of people with a Learning Disability will continue to grow with more people living into old age. Whilst there is a significant level of support provision in Hartlepool there is a clear identified need for widening the options available and increasing the numbers.

Priorities

Priorities identified through the BV review and the LD Housing Strategy are:-

- Increasing the number of supported housing scheme units available to at least national levels (16 units)
- Develop provision for people with complex needs and challenging behaviour (bid to Housing Corporation October '05)
- Increasing the number of floating support units by at least 10 targeted towards people facing a period of transition
- Offer floating support for young people who stay at home (number?)

Other needs identified were adaptations to existing housing stock, as people age and become frailer, and more flexibility of Supporting People contracts, to meet changing needs as individual service user's age.

People with a Physical or Sensory Disability

The findings of the recent Department of Health/SSI report "Independence Matters – social care services for physically and sensory disabled people" (December 2003) identified the need to develop a range of housing accommodation that takes into account location, access to community facilities and transport links.

Hartlepool Best Value Performance Plan (BVPP, 2004/05) includes a local performance indicator (LPI SS5) measuring the number of adults with a physical disability who the Local Authority helps to live at home, per 1,000 adults under 65 years old. The actual rates for Hartlepool were 10.6 in 2002/3 and 10.3 in 2003/4 Targets for 2004/05, 2005/6 and 2006/7 are 11. groups

Assessing future needs

Much of the need included in this client group is for Older People and is therefore addressed within that section. However, local information on needs is sparse for the 18-65 age group. Also, as there is no local strategy specifically for Physical Disabled and/or Sensory Impaired adults, there is nothing in place to draw together the various strands of information that do exist and much of this information is difficult to access.

The Supporting People Shadow Strategy (2002) reported on an analysis 'recently undertaken to identify local needs based on those known to Social Services. Work is in progress to confirm baseline information in relation to physical disabilities/sensory loss and/or impairment for those aged 18-65 years'.

There is also little national data available for this client group that bears any direct relevance to the remit of Supporting People. However, recent research may give us some useful starting points for estimating numbers. Key findings are summarised below. More information about the relevant research can be found on the Joseph Rowntree Foundation Website.¹

- Difficulties with housing are commonplace for disabled adults. It is estimated that around 9 out of 10 disabled adults will encounter problems with their current housing situation. The biggest problems are related to lack of space and location (i.e. safety and anti-social behaviour issues)
- There is a rough split in the population of young disabled adults between those who wish to leave the parental home (approximately two thirds) and those who wish to stay (approximately one third)
- Approximately 50% of older disabled adults who are not permanent wheelchair users would like to live in more suitable accommodation. 65% of older wheelchair users prefer to have their current home adapted to meet their needs

Roughly interpreted, these findings suggest that at least fifty percent of young adults with a physical disability are likely to require housing related support services and at least fifty percent of older adults with a physical disability are likely to require some form of housing related support. It is highly probable that these figures will increase proportionate to the severity of the disability.

Problems are encountered when an attempt is made to attach numbers to these estimates. For example, there is some national evidence that most disabled adults want to sort out their housing problem themselves and do not automatically register their need with the Local Authority, and that this is especially the case for those with less severe disabilities. It is also worth noting that no research was found relating to sensory impairment. This suggests that the numbers of adults in this group requiring Housing services, and housing-related support, is likely to be much greater than any current estimates based on available figures

The Shadow Strategy identified that it was important that people with physical disabilities and/or sensory loss and impairment are afforded choice and are able to live in suitable accommodation. One specific priority was mentioned:

- 6 bungalows with shared community facilities and 24-hour support

The Joint Review Report (July 2003) draws the following conclusions relating to physical disabilities and sensory impairment:

¹ www.jrf.org.uk

- A culture of work-focussed service support to disabled people has developed and the employment team have won a social care award
- Plans for more individualised inclusive support for people with greater disabilities need to be progressed
- The concerns expressed in the 2000/01 SSI report about services for children with a disability have been addressed

Supported housing providers referred to a growing need for supported housing for younger people with profound physical disabilities, sometimes developed as a result of drug misuse. At present, people with these needs have to be accommodated in sheltered housing for older people or within other supported housing schemes, neither of which are seen to be appropriate.

Accommodation

Housing Hartlepool are committed to adapting disabled tenants homes by 2010. Since transfer, the process of meeting this need has continued with almost 700 adaptations provided in 2004/05. In 2005 Housing Hartlepool adopted a policy for the provision of adaptations, which prioritises individual needs based on an objective assessment.

The Supporting People Shadow Strategy (2002) noted that a proposed development for younger physically disabled people was expected to be completed in 2003. Prior to it being built, demand for the scheme had exceeded the 4 units available and discussions were taking place with providers to provide additional properties for wheelchair users.

The Housing Strategy (2005-2010) notes that 4 bungalows for profoundly disabled people and 2 bungalows built to wheelchair standard have been completed by Home Housing Association and Tees Valley Housing Group. Since completion the bungalows have been over-subscribed, highlighting an urgent need for more similar accommodation. There were 69 applicants registered on the joint waiting list in July 2005 seeking substantially adapted or full wheelchair standard property.

Demand for adaptations and Disabled Facilities Grants is 'far in excess of our current resources', and expected to continue to rise. The Council continues to bid for additional funding from a range of sources (Regional Housing Board, SHIP and NRF).

Conclusions

- There is limited information on this client group, which makes this an area where estimates of needs are extremely difficult.
- There is evidence that there is a significant unmet need for accommodation but without better information it is difficult to produce estimates for those who need support

Priorities

- Provision of 'floating support'
- Undertake research into the needs of younger people with a Physical Disability and /or a sensory impairment
- Continue to work with social housing providers to identify properties suitable for conversion for disabled people
- Encourage RSL's to build properties suitable for wheelchairs, including family size accommodation

Substance and Alcohol misuse

National policy on substance misuse

Tackling Drugs to Build a Better Britain, the national drugs strategy published in 1998, sets out the aim of supporting problem drug misusers in reviewing and changing their behaviour, with positive lifestyles seen to be requiring better linkages with accommodation and other services. The Strategy was reviewed (Updated Drug Strategy 2002), and the update includes a recognition that there needs to be an increase in supported accommodation available for drug users, better management of drugs in public housing, and resources put into tackling homelessness amongst drug users, particularly rough sleepers.

Drug services for homeless people, published in late 2002 by Office of the Deputy Prime Minister, Home Office, and the National Treatment Agency, is a key document for local authorities and their partners. The guide was published at the point when Supporting People Shadow Strategies had been produced, shortly before the Supporting People initiative was about to be implemented, and as Homelessness Strategies were being prepared. It contains a substantial amount of information and ideas for tackling drug problems amongst homeless people, and builds upon the guidance set out in *Tackling drug misuse in rented housing*. The guide also explains the link between housing and homelessness services and the National Treatment Agency's Models of Care.

A further important part of the context surrounding this client group was the statement on homelessness made by the director of the National Treatment Agency. This was sent to all DATs in December 2002, to accompany the good practice guide. The statement pointed out that research shows that around 80% of single homeless people (either in hostels or sleeping rough) have a drug dependency, and asked DATs to ensure that they consider this client group when developing commissioning and treatment plans. It specifically requested the following action:

- Adapting mainstream services so that they are accessible to homeless people and provide them with efficient treatment.

- Establishing specialist services where these are needed.
- Playing your part in ensuring that the full range of accommodation and support needs are met for homeless people as a basis for successful treatment.

The national policy direction has mapped out a range of responses that are needed to address various stages in the management of substance misuse and alongside them suggested a range of support services and supported housing that meet these differing stages. A significant amount of work has been carried out locally to identify the level of need and this is reflected in this section.

Needs Identified

Hartlepool DAT summarises the situation in Hartlepool as follows (key points):

- There is a closed market in the main, with a number of localised dealers providing to a known clientele.
- Heroin and methadone are frequently used drug of choice with research suggesting up to 30% of the sample now use Crack regularly.
- Most users have poly drug use combining between 2–5 drugs often with alcohol. There appears to also be significant use of benzodiazepines.
- Heroin and benzo diazepam are introductory drugs for young people (13–19 years) with injecting the main means of administration however little evidence of injecting crack.
- Many users will be supported financially by family and friends with a small proportion funding their habit through employment and/or benefits.
- The Edge project considered that the number involved in criminality is high at 69% of the research sample involved in shoplifting, handling goods and theft. Those individuals using Crack/heroin or cocaine are responsible for the majority of acquisitive crime.
- Whilst the Arrest referral scheme makes contact with high numbers there are major fallouts with few moving into treatment, Arrest referral workers now have a caseload to develop outreach and stronger support into treatment.
- Within the survey and focus groups with users and carers confirm that probably 2/3 of users are out of treatment. Many have accessed ABS or their GP at some time, often needing 2 – 3 attempts at treatment but over half of the survey had been banned or suspended at some time which reinforces the perception (more recently reality) that access will be difficult.
- Whilst the mobile needle exchange by Addaction is well known and increasingly used there is a common concern about poor injecting practice and need for harm minimisation programmes. 26% of sample injecting reported sharing more of the sample 56% reported sharing equipment. This corresponds with Addaction analysis and national surveys but there will often be under reporting by clientele in research.

Numbers

The Audit Commission (2002) reports that 0.5% of the population of Britain may be drug-dependent. In a population of 97,000 in Hartlepool, this would imply a drug-dependent population of around 485 people.

Tees Valley Multi-Agency Drugs Database (MADD) provides figures for drug use in Teesside between April 2002-March 2003. The following information is provided:

- The rate of problem drug use in Tees Valley was 5.1 per 1,000 population. Hartlepool's rate was 6.4 and the highest in the sub-region
- 598 people in Hartlepool were identified as problem drug users who sought treatment. 376 (63%) were aged under 30 years old. 59% of this number were aged between 18-24 years.
- Men were more than twice as likely as women to be drug misusers
- Heroin was the main drug, with 70% reporting use of this drug. Alcohol was the second most common drug, with 20% reporting use.
- An analysis of drug use by age revealed that alcohol was the main problem drug in people over 40 years old, cannabis was the main problem drug of those aged under 18 years and opiates were the main problem drug of those aged 18-24 years
- 56% of drug users injected, this rose to 65% of 18-24 year olds. More recent Hartlepool DAT data (Adult Drug Treatment Plan, 2004-05) shows the proportion of drug users injecting and sharing needles to have increased year on year from 2002 to 2005 (60% injecting; 22% sharing)
- 91% of the sample were using drugs at least once a day, raising to 96% amongst 18-29 year olds
- 56% of the 598 were arrested during 2002-03. Of these, 71% declined arrest referral. The majority of those who accepted arrest-referral were aged under 30 years.

MADD also provides information on drug use by ward. In the year 2002/03 the following wards had drug use over 2 times the Cleveland average: Dyke House; Jackson; Owton; Stranton. Drug use in Brinkburn, Brus, Grange, Rossmere and St Hilda's was also higher than the Cleveland average. In Cleveland Police's Local Plan for 2005/06, reference is made to Hartlepool's Dedicated Drugs Unit's recent raids in Owton and Central Hartlepool.

Hartlepool Drugs data, published by the Cleveland Police for the first quarter of 2003/04 and 2004/05 are presented in table X. The data suggests that police activity is slightly less in 2004/05 than 2003/04. This is particularly noticeable with relation to arrests for possession and crimes for supply². And suggests fewer supply crimes are being investigated and fewer arrests are being made for possession.

Fig 34. Cleveland Police drugs data for Hartlepool, Q1 2003/04 and 2004/05

	First quarter 2003/04	First quarter 2004/05	Difference
No. arrests for supply	7	6	-1

² Please note: crimes are investigations that may not result in an arrest

No. arrests for possession	41	17	-24
Total arrests	48	28	-25
No. crimes for supply	23	8	-15
No. crimes for possession	25	30	+5
Total crimes	48	38	-10

Hartlepool DAT provides figures for the numbers of drug users in treatment within their adult treatment plan (2004/05). Key findings include:

- A year on year increase in the total number in treatment, or with planned treatment from 561 in 2002/3 to 805 in 2005/6
- A year on year increase in the number of treatment places the DAT has commissioned from 631 in 2002/3 to 1173 in 2005/6, and consequently in the targets for successful completions, which now range from 40% success for GP prescribing through to an 85% success rate for structured day programmes

Strategic context and links

The Joint Review Report (July 2003) draws the following conclusions relating to drug misuse:

- The problems associated with major drug misuse in Hartlepool may not be as severe as those in other parts of the Tees Valley, but they still have a significant impact on the lives of Hartlepool children.
- There are good strategies in place to provide a range of drug prevention and treatment services
- There needs to be a more consistent assessment and recording of risk in individual cases
- Regular updating training should be provided for frontline staff
- Work needs to be done to engage men in parenting skills and responsibilities

Cleveland Police Local Plan (2004/05) Objective 1: A safer Cleveland Police Area. This objective incorporates a public service agreement to '*reduce problematic drug use and the harm caused by illegal drugs, including increasing the number of drug misusing offenders entering treatment through the criminal justice system*'. Specific commitments are:

- We will target suppliers, especially of heroin and crack cocaine
- We will help reduce levels of dependency by directing problem drug users into intensive drug treatment programmes (through arrest referral schemes)

In 2004, the North East Substance Misuse Statement of priorities was agreed by key agencies in the region. The main aims are to reduce the harm to communities caused by problem use of legal and illegal drugs. The Safer Hartlepool Partnership's strategic objective is to provide more, better and fairer drugs treatment.

Performance

Hartlepool PCT Local Delivery Plan (2004-05) refers to Hartlepool DAT key developments as:

- A new community base for specialist drug services in the town (which includes prescribing and a range of counselling and other interventions)
- Development of a Young Persons Team
- Implementation of the Arrest-Referral Schemes for offenders (i.e. police referring detainee to drug advisory/counselling services)
- Audit of drug misuse in Hartlepool

Drug Action Team Adult Treatment Plan (2004/05)

Self-assessed performance gives an overall summary of Amber. No benchmarking data was made available. There are only a few red scores. These included:

- Supported housing or other housing available for drug users
- Accommodation funded through Supporting People for drug users
- Joint Strategy and Action plan for cases of co-morbidity with mental health LITs

A summary of quarterly progress as at September 2004 included the following progress and commitment to further actions:

- Refurbishment of Hostel and changes to criteria/process has improved emergency access. Further action is to develop a 10 bed unit for under 25 year olds with substance misuse
- Established additional facilities for semi-independent living, particularly for prolific offenders with drug problems completing the Dordrecht treatment programme. An initial investigation with Community Campus re self refurbishes schemes. Further action is to continue meetings with Community Campus, DISC, private landlords and NDC, in relation to the potential for establishing a 'self-refurbish' scheme
- Enhanced referral process between Housing Hartlepool and Hartlepool Borough Council's Homeless Team has been established, which is a joint assessment in some cases with DISC, NACRO, or Advance Support. Further action is to increase the number of supported short term tenancy agreement contracts leading to securing longer term stable tenancies with Housing Hartlepool, and to co-ordinate floating support workers from across a range of agencies to ensure more effective assistance to stabilise tenancies;
- Awareness raising exercises have been undertaken to promote changes in housing allocation policies including promotional workshops and surgeries with user group and support agencies. Further actions include continuing training and awareness raising across housing agencies and further work with the private sector in relation to tenant management

In relation to the wider aspects of support:

- Appointment of GP specialist lead and Primary Care Liaison Nurse in a Community Drug Centre. Other staffing being appointed.

- Plans to pilot increased health care advice moving towards a static needle exchange and similar provision
- Benefit Advice appointments established at CAB. Further action includes consideration of commissioning of specific service and training for front line staff in basic benefit assessment
- Regular awareness raising events are taking place, including meetings with residents groups and the voluntary sector
- Joint work with colleagues from health, schools and youth services has been established.
- A task group has been established to develop specific projects e.g YOS, HYPED and DPC
- A project proposal for Neighbourhood Drug Co-ordinators has been submitted to the NDC and a consultation/project group process has been evoked
- The DAT is committed to continue to focus work in disadvantaged wards

Other Performance Indicators

Cleveland Police Corporate Policing Strategy (2005-08)

- Target for the number of offenders dealt with for supply offences (class A drugs) in Hartlepool is 290.
- Target of reducing the harm caused by illegal drugs (Drug Harm Index)
- Objective of substantial increase in the number of drug misusing offenders entering treatment through the Criminal Justice System

Safer Hartlepool Partnership key indicators are:

- To increase the number of problem drug users in treatment by 100% by 2008. From a baseline of 366, the target for 2007/08 has been set at 527.
- The percentage of problem drug users retained in treatment for 12 weeks or more to be increase from the 2004/05 baseline of 38% to 55% by 2007/08.

Safer Hartlepool Partnership Drugs Intervention Programme (DIP)

Performance Indicators:

- The proportion of adults arrested and charged with DIP trigger offences that test positive and undergo and assessment interviews should rise from a baseline of 52% in January 2005 to 50% by March 2006.
- The proportion of DIP clients who are either retained in treatment or achieve planned complete care plans should be 95% by March 2006.

Health Performance Indicators:

- Hartlepool PCT Quality PIs for 2004 included a measure for 'Drug misuse: shared care'. The Healthcare Commission allocated score was 2 out of 5 for this service. There were no PIs in 2005 to compare.
- The Healthcare Commission 2005 performance ratings for Tees and North East Yorkshire NHS Trust, include a PI for 'Drug misuse: 12 week treatment retention rate'. The trust was allocated a score of 4 out of 5

- Hartlepool PCT Local Delivery Plan (2004-05) refers to a target of reducing drug-related deaths by 20% by March 2004
- Hartlepool PCT Local Delivery Plan (2004-05) refers to a target of increasing the participation of problem drug users in drug treatment programmes by 55% in 2004, and by 100% in 2008.
- Hartlepool PCT Local Delivery Plan (2004-05) refers to a target of increasing year on year the proportion of drug users successfully completing treatment programmes

Hartlepool Housing Strategy (2005-2010) explains that the lack of supported accommodation and floating support is a real sticking point for those people with a substance dependency wishing to move on and achieve social inclusion, and recognises that further provision is vital for this end to be achievable and achieved.

National priorities for alcohol

Illegal drugs, largely to the exclusion of alcohol have until very recently heavily dominated the national agenda on substance misuse. However, the government is now seeking to redress the balance and in March 2004 the Prime Minister's Strategy Unit published the **Alcohol Harm Reduction Strategy for England**, which outlines the future strategy framework for addressing the harm caused by alcohol misuse. It covers the areas of education / communication; crime and disorder; supply and industry responsibility and identification and treatment. The section on treatment clearly identifies supported housing as an integral element of the national strategy.

'Supporting People Administering Authorities across England have been allocated a approximately £19.6m for 2004 / 05 to help vulnerable people with alcohol problems. Supporting People can provide the means to those with alcohol related problems to settle in a new home and sustain a tenancy or stay in one place long enough to benefit from training, counselling and other support to promote independence and stability'

The Alcohol Harm Reduction Strategy also notes that alcohol misuse affects a very high percentage of the population:

'Around a quarter of the population drink above the former weekly guidelines of 14 units for women and 21 units for men. 6.4m people drink up to 35 units a week (women) or 50 units a week (men). A further 1.8m, two thirds of them men, drink above these levels.'

The strategy also emphasises that services must work in strategic and operational partnerships to meet the needs of people who have combinations of needs including alcohol, drugs, Mental Health issues and housing:

- *'Around a third of psychiatric patients with a serious mental illness also have a substance misuse (i.e. drugs and/or alcohol) problem'*

- *Around half of rough sleepers are alcohol reliant and many other homeless people – such as those in hostels – have problems with alcohol;*
- *An estimated 25% of drug misusers also misuse alcohol; and*
- *Some young people have complex multiple needs.'*

The Strategy includes the following action points:

Fig 35 Alcohol Harm Reduction Strategy for England, 2004: Chapter 5, Identification and Treatment

Action	Lead responsibility	Date
The National Treatment Agency (NTA) will draw up a 'Models of Care Framework' for alcohol treatment services, drawing on the alcohol element of the existing Models of Care Framework. It would look to the Commission for Healthcare Audit and Inspection (CHAI) to monitor the quality of treatment services subject to the formulation of suitable criteria and CHAI's workload capacity	NTA	04/2004
From 02/04 remaining Drug Action Teams will be encouraged to become Drug and Alcohol Action Teams (or other local partnership arrangements) to assume greater responsibility in commissioning and delivering alcohol treatment services though their capacity to do so will have to be carefully monitored	HO	02/2004
From 02/04, the Department of Health will work with the Home Office, the department for Education and Skills, the Office of the deputy Prime Minister and the NTA to develop guidance within the Models of Care framework on integrated care pathways for people in vulnerable circumstances, such as people with mental illness, rough sleepers, drug users and some young people	DH	02/2004

Needs identified

Hartlepool's Neighbourhood Renewal Strategy (NRS, 2001-2011) observes that a large proportion of men and women who live in NRS areas consume alcohol above recommended levels

Strategic context and links

Cleveland Police Local Plan (2004/05).

Objective 2: fewer people's lives affected by anti-social behaviour and alcohol-related disorder, by:

- Focussing on public spaces challenging disorderly behaviour including drunkenness
- Working in a multi-agency approach to identify those involved in supplying children and young people with alcohol
- Identifying repeat offenders for alcohol-related crime and develop a referrals scheme to assist with the rehabilitation of offenders

Hartlepool PCT Local Delivery Plan (2005/6-2007/8) Priority One (improving the health of the population) action priorities include supporting sensible drinking

The Safer Hartlepool Partnership estimates that up to 70% of all violence against the person offences are related to alcohol consumption and occur between 7pm and 7am. These acts are concentrated in the two wards in the town centre (Review of performance in 2002-05). The new Crime Disorder and Drugs Strategy (2005-08) has a strategic objective of reducing alcohol-related social nuisance, disorder and violence linked to the night-time economy of the town centre area.

County Durham and Tees Valley Strategic Health Authority Local Strategic Framework for County Durham and Tees Valley lays out 10 topics PCTs should take into account when setting local targets. Alcohol misuse is one. It is advised that PCTs should:

- Have an alcohol strategy for people who are misusing alcohol to the point where it is affecting their health
- Ensure that services are available
- Pay particular attention to people who have a dual diagnosis of mental health problems and who misuse alcohol; and prisoners who have an alcohol problem

Accommodation and support

It is recognised that without accommodation, and help to access and manage it, many substance misusers will fail to manage and will relapse back into drug use. Significant numbers of substance misusers are homeless or are at risk of losing their homes because of debt, or breaches of tenancy including dealing from the house, burglary in the area, or anti-social behaviour.

Significant problems exist for those trying to access accommodation that has records of anti-social behaviour or debt. Without support, many landlords (private and social landlords) are unwilling to offer accommodation, so access to accommodation is often dependant on a support package and help with debt management being in place.

The scale of people with a Substance Misuse problem who also need a support service is particularly difficult to measure:

- Many substance misusers will not tell advice agencies or service providers that they have a substance misuse problem as they know that this may stop them accessing housing and other services

- There is a very significant over-lap between substance misusers, single homeless people, young people, mental illness and offenders and often this masks the extent of substance misuse

Detailed research on these needs has only just begun to expose the levels of previously unnoticed needs. Consequently Hartlepool, like many other areas has very under developed support services. At the time the Shadow Strategy was produced there were no support services in the borough. The Homelessness Strategy 2003 identified the difficulties of access to accommodation and support as a major concern

In considering the future support needs we also have to recognise that:

- There are people already at different stages in the existing housing and treatment systems, so development of new services and changes to operational practice needs to take account of their current needs and maintain stability. It will also mean new service users may be entering the support services at different stages of their addiction.
- Some substance misusers are already accessing support services bring with them challenges of complex problems, behavioural problems, health problems and often a legacy of financial difficulties and housing failure
- Addressing these needs will be limited by the capacity of existing services and the ability to fund changes to services and commission new ones
- Even where resources can be made available, the capacity to commission and develop them will be a limiting factor and therefore a staged development of the pathway will take some time.
- The numbers of substance misusers are growing rapidly at the moment so it is important to respond to these needs as quickly as possible
- Even with the growth in numbers of substance misuse the financial restrictions on the Supporting People budget mean that Hartlepool need to consider working in partnership with neighbouring authorities on the development of some services. However, it will still need to consider the development of bespoke services that fit with local circumstances
- Both public and private sector landlords will be reluctant to take risks with housing known substance misusers if they do not have confidence that there will be the right types of support and back-up for the service user

What did the Shadow Strategy identify as priorities?

There were no accommodation-related or floating support services for people with alcohol problems, though were discussions taking place about a

supported housing scheme for this group. There were worrying signs of increases in under-age drinking, and violent disorder linked to alcohol misuse. There were no accommodation-related or floating support services provided solely for drug users. The Shadow Strategy identified an urgent need for provision for both groups.

Hartlepool Drug Action Team had identified major concerns with the lack of accommodation provision for people with drug problems, and saw this as a priority for the DAT. Needs identified were:

Fig 36 DAT needs identified

For adults	
•	Emergency Direct Access housing – provision for at least 5 places for up to 3 nights
•	Supported Housing – for 12 places
•	Move-on accommodation and Floating Support for 15 places
For young people	
•	Direct Access Emergency Accommodation with a safe, 24-hour service available for those newly homeless – for at least 3 places
•	Supported Housing – 7 places for short-term (6 months) intensive support.
•	Supported Housing – longer support needs – 12 places
•	Move-on and Floating Support for 15 places

Action planned for 2003/4 included the following for this client group:

Fig 37 Action Plan

People with a Drug dependency	Two schemes for emergency access (separate adult and young persons schemes)	2 X £400,000 capital scheme revenue
People with a Drug dependency	Supported scheme for intensive and specialist support (adults) – joint project Health/Probation/Social Services/Neighbourhood Services	£450,000 capital revenue - £200 supporting people grant per unit per week
People with a drug dependency	2 schemes for longer term support (separate adult and young persons schemes)	2 x £0.5m capital £250 supporting people grant per unit per week

In addition, two other schemes documented as planned for 2003/4 would have met the needs of some people with substance misuse problems: a scheme of floating support for 10 young people with complex needs, and a scheme of supported accommodation for women with complex needs.

What progress has been made since 2002 - new developments/other initiatives which have met needs?

Avondene, a block of flats owned by a Housing Association, has been renovated and re-opened in November 2004 as 11 flats for adults (18 and above) who need 1st or 2nd stage supported accommodation. Referrals generally come from the Housing Advice Team and Scott Grange, a supported housing scheme for people at risk of offending, many of whom are likely to have a degree of problem with substance misuse. Both schemes are operated by Stonham Housing Association.

A 10 bed scheme for young people with complex needs (including substance misuse) is to open towards the end of 2005 or early 2006. 6 flats are fully supported and 4 are either fully supported or semi-independent. A multi-agency approach will entail services working into the building and providing outreach services from the building, as well as working together.

Funding is currently being sought for a similar scheme for adults with low levels of complex needs. No Supporting People revenue support has yet been identified, but a Housing Association has bid for capital funding in the 2006-7 funding round.

The Dordrecht scheme and Stonham's Community Support scheme provide floating support for offenders (funded by NDC), many of whom have drug and/or alcohol problems, and have been expanded over the years since the Shadow Strategy. Together, these schemes support around 20 people each. Endeavour HA offer a floating support service to 10/12 private rented tenants (currently being funded through NRF). Whilst not specifically for people with a drug/alcohol problem it has proved very successful in accessing social housing for clients – including the Eamont Terrace scheme.

A number of drop-ins which help to support substance misusers have been developed in Hartlepool. Advance, funded through the Primary Care Trust, Safer Hartlepool Partnership, and the Neighbourhood Renewal Fund, provides outreach support to people living in the community and tackling heroin use, as well as physical and educational activities for this group. This complements other formal and informal counselling and support provision, and helps to support both those currently staying in supported housing, and those moving on to their own tenancies, as well as people sleeping rough.

County Durham and Tees Valley Cross Authority Statement (2004-05) notes that only Durham has Supporting People supported household units for people with alcohol problems (8 units provided by Norcare). Although not a designated cross-authority service, this is described as appropriate for the cross-authority pattern of access to services

How have needs for this client group changed since 2002?

Heroin use is remaining steady amongst adults in Hartlepool, but has reduced substantially amongst under-18s, who now tend to be using cannabis and alcohol to significant levels. Numbers of adults in treatment have increased, as have the rates of retention within treatment. Other developments helping to support users include mentoring, improvements in services, and additional staff within treatment services.

Agencies note that needs of this group have become more complex, with more people having a range of problems including substance misuse, offending, mental health, child protection, and domestic violence. Alcohol problems appear to have become more common, though it is difficult to assess this accurately as figures on alcohol use have not been collected until recently.

There has been some improvement in securing mainstream permanent housing for this group, with a series of meetings between Housing Hartlepool and service users and agencies. Housing Hartlepool have given an assurance that each individual's needs will be assessed (risk assessments carried out and housing plans introduced), There has been little change in the response of other Housing Associations to the needs of this group for permanent accommodation, whilst links and working arrangements between supported housing providers and drug and alcohol treatment agencies are seen to have strengthened over the last few years. Support planning has assisted supported housing agencies to identify needs and which other agencies may be called upon to provide support.

The official Rough Sleeper Count carried out by an independent consultant did not find any rough sleepers in the town and they did consult with each of these agencies to gather background information and potential sites that may be used by rough sleepers. Whilst there are no rough sleepers in the town there are likely to be a number (possibly 40 at any one time) who are 'sofa surfing' or squatting.

The supply of social housing stock has been reduced over the last two years through the right to buy. The private rented sector has been affected by the 'low demand' issue – increased numbers of poorly managed and maintained homes. Strong efforts by the Council have improved the management and maintenance of private rented homes and the regeneration schemes will remove poor quality homes. The Council is keen to encourage and help good landlords and to take action against landlords who fail to maintain and manage their properties adequately. It is anticipated that new legislation allowing the registration of landlords will be introduced during 2006.

Other issues raised during the consultation process

Level and type of support available

Scott Grange and Avondene are the main sources of supported housing for this group at present. Service users commented that although link working exists in both settings, there is insufficient help given within the schemes to link residents into treatment or into other activities which would help to reinforce treatment. Activities arranged by Dordrecht workers are advertised to Stonham's residents, but there is currently no group work or outreach work from drug or alcohol services into either provision.

There is a need for greater connection between drug and alcohol workers and supported housing staff in these schemes, and for collaboration between the DAT and Stonham over the development of services such as substance misuse outreach workers, in-house group work (both drug and alcohol), and daytime activities which will absorb the time and energy of residents, and will help to ensure that treatment interventions have the best chance of success. These developments would also need to be supported by improved staffing resources at the 2 schemes, so that there is staff capacity to develop effective links with other agencies, and by additional training on work to tackle drug and alcohol problems. In addition, strategies need to be developed for ensuring that link work sessions and activities are not seen as optional by residents with drug and alcohol misuse problems.

Connections between Supporting People and other strategic groups for this client group

Links between SP and DAT are currently fairly informal. The DAT has a strong strategic input through the Homelessness Strategy. The DAT and the Housing Advice Team are currently encouraging social housing providers to offer accommodation to people with an offending background.

Whilst much progress on achieving additional supported accommodation has been made – Avondene coming 'on-line', young persons scheme currently being built and a bid submitted to the Housing Corporation for an adults scheme, more is needed.

Agreements to support move-on accommodation

The joint allocations policy gives an outright priority for move-on from supported housing when the support staff confirm in writing to the Housing Advice Section that the resident is ready to move on to independent living, this covers all social housing stock as nominations to other RSL's are made from the joint Housing Register with Housing Hartlepool. The issue here is overall reduction in availability of accommodation.

Continuity of input from other agencies

Once people are placed in supported housing, it is essential that links with other agencies – such as Social Services, Probation, and YOS – are maintained. This is particularly crucial where the placement is into temporary accommodation, so that further work is needed to secure permanent housing, and where the support of that other agency is seen as necessary to complement a housing support package.

What are seen as the priorities for the next 5 years?

The key priorities are seen to be:

- **A range of provision**, including
 - Additional supported housing for those who are in treatment
 - Provision for couples and for those with children, including women fleeing violence who also have a drug or alcohol problem

(this scheme will come 'online' during 2006!)

Key features of any new provision should be strong security, strong and effective links with treatment services, built-in activities (such as those at 404 Marton Road, or at First Step, both in Middlesbrough), and at least some staff with training in working in drugs and alcohol employed within these schemes.

- **Robust specialist floating support** – including help for those who are aiming to move into supported housing, and providing an incentive to those who want to be involved with the Dordrecht and Drug Interventions Programme schemes
- **Freeing up access into mainstream housing** including that provided by Housing Hartlepool and other Housing Associations, and the better quality private rented sector stock in the town, with robust move-on agreements between supported housing and social housing providers
- **Developing better links at operational and strategic level** including arranging for relief cover, undertaking joint commissioning, and developing agreements between support providers and other agencies for the continuation of input once supported housing has been identified.

Offenders or People at Risk of Offending

Crime reduction is a key objective for the current Government and reducing re-offending is one of the primary aims of the National Offender Management Service (NOMS).

The national 'What works?' Strategy is being implemented locally by the Probation Service. Accommodation issues are central to this. The Probation Housing Strategy aims are to:

- Encourage offenders to be good citizens
- Make a difference in the lifestyles of homeless offenders
- Provide a quality housing support service – giving support, advocacy and planned transition
- Support private landlords
- Have a good dialogue with Local Authority Housing Departments

There is likely to be considerable overlap between this client group and others within the SP programme. Issues such as mental illness, homelessness and substance misuse often feature individually or in various combinations.

For example, in 2001/02, 85 referrals were made to the Hartlepool Probation Housing Officer. Of these, 39 were homeless, 40 had identified risk factors (multiple factors in some cases), 35 had heroin problems, 2 had alcohol problems, 8 had mental health problems, 6 had a history of violence and 2 were classed as high-risk offenders.

The LSF for County Durham and Tees Valley reports that 63% of sentenced male prisoners and 39% of sentenced female prisoners have experienced problems with alcohol misuse.

The Neighbourhood Renewal Strategy (NRS, 2001-2011) observes that the majority of offenders reside in NRS areas. The overall arrest rate in Stranton and Dyke House wards are twice the Cleveland average

The Youth Justice Plan (2005-06) reports that Hartlepool YOS is dealing with low numbers in relation to remands/custody. Custodial sentences were given to 10 young people during the year 2004/05. Only one BME young person has been referred to the YOS in the last 5 years.

Cleveland Police Local Plan (2004/05). Objective 4: Narrow the justice gap, by developing a prolific and other priority offenders (POPOs) strategy, which will

- Identify POPOs entering the judicial process and provide a premium response to investigation and prosecution (where appropriate)
- Work with partner agencies to target and monitor the most prolific offenders (top 20-30 in each district)
- Link into Drugs Interventions Programmes and support the reduction of drugs-related prolific offences by diverting offenders to treatment, rehabilitation and support

County Durham and Tees Valley Strategic Health Authority Local Strategic Framework (LSF) for County Durham and Tees Valley lays out 10 topics PCTs should take into account when setting local targets. Alcohol misuse is one and this includes specific reference to prisoners who misuse alcohol. This is because PCTs are assuming responsibility for prison mental health services.

Hartlepool Borough Council's Race and Diversity Scheme (2005-08) Service Diversity Action Plan for 2005/06 includes reference to plans to complete a Race Audit and draw up a resulting action plan within Youth Offending Services

The three partnerships covering drugs, crime and disorder and youth offending merged in 2004 to establish the Safer Hartlepool Partnership. This is one of seven themed Partnerships reporting to the Hartlepool Partnership (the LSP).

Needs Identified

Provision for this group was above the typical supply, according to the ODPM Supporting People supply table. This did not however appear to accurately reflect the need for this type of accommodation, where a need for more supported accommodation and support had been identified, in addition to an urgent need for accommodation for women. Floating support provision was at a good level. There was no provision for mentally-disordered offenders.

It was noted that the current provision for male ex-offenders, Scott Grange, was very much over-subscribed, and that the Probation Service was working with the Supporting People team to identify the scale of need, with a view to extending services for male offenders

Staff from the Probation Service report that little has changed in the area, with offending rates not changing a great deal. In the first 7 months of 2005-6, 16 offenders (giving an estimated 27 in a full year) were homeless with no accommodation to go to at all, compared with 39 in the year 2001-2.

There continues to be issues around access to housing and continued beliefs that there is an exclusion policy for offenders. This is clearly an information issue and will need to be addressed

Other issues raised during the consultation process

Move-on agreements

Following the success of the HBC funded pilot scheme (with support provided through SP by the Housing Advice Team) Housing Hartlepool are now providing 40 furnished tenancies, some of which will be allocated to people with support needs and have a support package in place. This will include properties to be allocated to Stonham, for offenders who are ready to move on and Stonham is able to provide floating support. The arrangement will depend on how confident that Stonham are that the person will succeed, which presents some difficulties for them.

Connections between Supporting People and other strategic groups for this client group

The Probation Service is represented at both the commissioning level and Strategy Partnership Board. There appear to be good links between the Supporting People Commissioning Body and the Safer Hartlepool Partnership, and new schemes have been developed, albeit not at the level required to meet need. There are as yet insufficient links between the Homelessness Forum and strategic planning forums on the one hand and the Supporting People commissioning structures on the other.

Conclusions

Currently the needs of this group are not being fully addressed. They present challenges for planners and housing providers as there are undoubtedly risks in providing access to permanent accommodation. However, there are

probably greater risks to the wider community in not addressing these problems.

The needs of this group are complex and there is a significant over-lap with other client groups which raises issues about the ability of a generic support service being able to address their range of needs.

Access is needed to both public and private sector accommodation and support is particularly required for young offenders.

Priorities for the next 5 years

- ***Additional access to mainstream housing*** for offenders, through formal agreements with a range of housing providers
- ***Floating support*** alongside this increased access to permanent housing and to ensure tenancies are sustainable.
- ***Supported housing provision and access to permanent housing*** for homeless women offenders, including temporary accommodation targeted at those likely to or already working in the sex industry
- ***Additional semi-supported housing*** for all offenders, but with a priority for those who are recovering from drug user and moving forward on the recovery pathway
- ***Continuing actions to address the provision of rented sector stock in Hartlepool***, such as poor management and maintenance.

Women at risk of Domestic Violence

Domestic violence accounts for nearly a quarter of violent crimes in England and Wales. This is estimated at 761,000 incidents in 1999 (British Crime Survey 2000). Domestic violence can have a severe and profound effect on mental health leading to depression and sometimes suicide (BMA 1998). The government has placed a strong emphasis on tackling this problem and this is reflected in a number of strands of government policy include Crime Prevention, the Justice System, Homelessness guidance and Supporting People

Key objectives include: increasing the full range of accommodation options, outreach and resettlement services, and better advice and information; helping victims who have ended or left a violent relationship rebuild their lives; and giving support to children and young people affected by domestic violence.

The Government is committed to meeting gaps in provision and improving standards of accommodation, and, where there is a demonstrated local need,

will consider increasing refuge provision further. To this end, in April 2003 it announced a capital investment programme, managed through the Housing Corporation, to build and develop refuge accommodation across England. The money will be used by Registered Social Landlords, in partnerships with local refuge providers and local authorities, to provide 273 units of accommodation in all regions of England. The Government has also committed £7 million in each of the following two years towards similar projects, which will also be administered through the Housing Corporation.

The extent of domestic violence in Hartlepool

The international Centre for the Study of Violence and Abuse (ICVA) study estimated that as many as 1 in 7 women experienced at least one incidence of physical domestic violence in the last year (2000-01). It was also noted that if other forms of domestic violence were taken into account, this figure would be significantly higher. Indeed, a related piece of work on routine enquiries about domestic violence in General Practices discovered evidence to suggest that the prevalence rate may be as high as 1 in 4

Fig 38 Cleveland Police Local Plan (2004/05) Performance indicators:

The percentage of domestic violence incidents with the power of arrest where an arrest was made relating to the incident

Performance 2003-04	Similar Force comparison 03-04	Performance 2004-05	Target 2005-06
67.4%	69%	72.13%	80.85%

Of the above, the percentage which involved partner on partner violence

Performance 2003-04	Similar Force comparison 03-04	Performance 2004-05	Target 2005-06
70.57%	75.9%	77.27%	69.01%

The above tables suggest a lower than average likelihood that the police will arrest a suspected or reported perpetrator of domestic violence

The percentage of domestic violence incidents that involved victims of a domestic violence incident in the previous 12 months

Performance 2003-04	Similar Force comparison 03-04	Performance 2004-05	Target 2005-06
63.37%	39.27%	60.71%	40%

These scores clearly show that Hartlepool has a significant problem with repeat victimisation

Safer Hartlepool Partnership Crime Disorder and Drugs Strategy 2005-08 performance indicator for a reduction in the percentage of domestic violence repeat victims from a baseline of 61% in 2004/05 to 40% in 2007/08.

Safer Hartlepool Partnership Crime Disorder and Drugs Strategy (2005-08) identifies Domestic Violence as a strategic priority. An audit in 2004 showed a gradual increase over the past 3 years in the number of repeated incidents and arrests. Although this could be a positive outcome of a successful campaign to raise public awareness, it indicates that repeat victimisation is still a 'significant problem'

The Homelessness Review highlighted that domestic violence and relationship breakdown are significant factors leading to homelessness. It committed the council and its partners to continue to support Hartlepool's Women's Aid, in their work to provide emergency accommodation and advice and support services. The emergency accommodation provided by Women's Aid has been upgraded to self contained units and will meet the need for temporary accommodation for women fleeing violence. However there was seen to be a need to develop additional outreach work and floating support services.

Current supply

The refuge is a designated cross-authority service (County Durham and Tees Valley Cross Authority Statement, 2004-05). There is a national Best Value Performance Indicator (BVPI 176) recommending that each Local Authority has one refuge place per 10,000 population. Hartlepool refuge has 6 units of self-contained accommodation, which at 0.16 per 1,000 is the highest provision per head of population in the Cross-Authority area.

Hartlepool Refuge is part of North Tees Women's Aid and is owned by Endeavour Housing Association. The refuge changed from communal accommodation to self-contained units and re-opened in December 2003. The new refuge comprises of 6 self-contained units (one is wheelchair accessible; one is a unit for single person, whilst the rest have two bedrooms, the largest of which can take up to 6 children, and there is one move-on unit with a communal lounge area. Each unit has up-to-date kitchen & bathroom facilities, and they are described as being 'like home' by the residents. There is also a staff office, a large, well-equipped family room (play area); a training/teenagers room (with computer, TV, play station); a laundry room; and an outside play area. The refuge and related services are considered a model of good practice by others working in this field.

The change from communal accommodation to self-contained units has had some marked consequences. The average number of women seen prior to the changeover was up to 320. The number of women seen since is roughly half and the length of stay has increased on average from 11 days to 3 months. This is a positive step, shifting from crisis management (where the women usually returned to an abusive partner) to focussing on the whole issue.. This increases the chances that the women will leave abusive partners and find lasting and suitable move-on accommodation reducing the demand for accommodation and support services. Furthermore, as a result, the refuge has been able to shift resources from supporting women within the refuge to supporting more women outside, either those who have accessed

the refuge and moved on, or people who have not stayed at this refuge and require support to enable them to maintain their independence.

Assessing future needs

There is a national acknowledgement that for many reasons the full extent of domestic violence is not being fully measured. However, with greater awareness more victims are coming forward to seek assistance. Therefore nationally, the trend is that numbers are growing and this is true also of Hartlepool:

- Housing and housing-related support is seen as a huge priority for women experiencing domestic violence whom wish to leave the violent relationship.
- There is some evidence that women experiencing domestic violence in Hartlepool may not leave because they do not want to go to a refuge. Currently there is no alternative temporary safe housing available
- Many who experience domestic violence and approach the Police do not seek support but either return to the violent partner or seek a solution via a solicitor.
- However, many do need support that goes beyond the refuge based services to floating support.
- As the trend to report cases of domestic violence increases so the need for support services will also increase

The refuge identifies that there have been more referrals and calls for their help than they can meet. Police statistics recorded 2566 incidents of domestic violence during 2004; of these, 324 women were referred to the refuge and 58 women and 120 children were accommodated. 217 women were supported through the outreach service.

There is a continued and increasing need for outreach support for women who do not access the refuge movement, and also for women with drug or alcohol problems. Although the refuge is able to spend more time and do more intense work with women as they stay longer within the supported housing, it is not possible to accommodate women with chaotic lifestyles within this setting. It is possible that some of this provision could be offered through outreach support, but in addition it is identified that supported housing with appropriate staffing levels and training is needed in Hartlepool.

Conclusions

The numbers of victims of domestic violence are growing and while the need for a refuge will remain for the foreseeable future there is evidence that other additional service solutions are now also required. These include:

- An increase in floating support services to aid the transition from the refuge to permanent accommodation and to support those who have chosen to remain in their home or return to it

Priorities

- Additional outreach provision
- Supported housing provision with 24 hour staffing for women fleeing domestic violence who have drug or alcohol problems

People with HIV/Aids

In the UK at the end of 2002 approximately 49,500 people were living with HIV, about a third of who were undiagnosed. Since the epidemic began in the early 1980s about 15,000 deaths in HIV infected individuals are known to have occurred in the UK. Currently the number of people living with diagnosed HIV is rising each year, due to increased numbers of new diagnoses and decreasing deaths due to antiretroviral therapies. The national agenda has focused on minimising the spread of the HIV virus, whilst recognising the need for health and social care services for people already infected / affected.

The DoH report '*Better prevention Better services Better sexual health, The national strategy for sexual health and HIV*' (1991) emphasises that social care and support services have a central role in promoting quality of life experienced by people with HIV:

'Treatment and health care for people living with HIV are obviously essential, but their overall quality of life cannot be neglected. Social care has its part to play, by:

- *helping patients adhere to drug regimes;*
- *helping access to education, employment and leisure facilities;*
- *ensuring people have their needs assessed and met for welfare, benefits, housing, advocacy, interpretation, peer support, and other practical support for life in the community;*
- *supporting carers and families; and making sure that people living with HIV can benefit from wider initiatives that promote social inclusion.'*

National statistics: The following are the key points, summarised in the Health Protection Agency (HPA) report 'Reviewing the Focus: HIV and other Sexually Transmitted Infections in the UK in 2002. (Updated report Nov 2003):

- HIV predominantly affects younger adults, 76% are aged 15-39 years at diagnosis
- The infection is still incurable despite the introduction of new treatments
- New treatments have caused a sustained decline in HIV associated deaths, which, with a rise in the number of new diagnoses, has resulted in a steep increase in the number of people requiring long-term treatment
- Sex between men remains the group in the UK at highest risk of acquiring HIV with evidence that transmission is continuing at a substantial rate.

- 71% of heterosexually acquired HIV infections diagnosed in the UK in 2000/2001 were in people from Africa, or were associated with exposure there.
- Although the potential still exists for HIV transmission through injecting drug use there is no evidence of significant current HIV spread amongst IDUs in the UK.
- Despite evidence that the proportion of maternal HIV infections detected in pregnancy has increased (particularly in London) preventable HIV transmissions from mother to child are still occurring in women whose HIV infection is undetected.
- London, Brighton and Manchester are the cities in the UK with the largest HIV infected populations

The SP Shadow Strategy reported that Hartlepool had no accommodation-related support services that focus solely on people with HIV/Aids, but that the need for providing such services would be assessed and cross-authority provision would be considered. Members of this client group, if experiencing accommodation-related problems were seen as being able to access other general services, such as floating support and hostels commissioned by Supporting People.

Durham and Tees Valley Cross Authority Statement (2004/05) revealed that there are no Supporting People supported housing units within the Durham and Tees Valley area for people with HIV/AIDS.

Currently only one person is being supported by Social Services in Hartlepool

Conclusions

The evidence available suggests that there are no current needs for support within the borough

Homeless Families and single people with support needs

The Homelessness Act 2002 was passed at the end of 2002. Much of its content had been familiar for some time, since it built on the Homes Bill 2001. The Act heralded a major shift in the way that homelessness was to be dealt with at Government and local level. The Government aimed to build services which will stop people falling through the holes which lead to having nowhere decent, or nowhere at all, to live, as well as strengthening the safety net for those who become homeless.

The Act is accompanied by "More Than a Roof - a report into tackling homelessness", and "Homelessness Strategies: A Good Practice Handbook", both published in March 2002 by the then DTLR. The first report set out the significant change in the Government's approach to tackling homelessness: the emphasis was now to be on preventing rather than merely responding to incidents of homelessness. The overall purpose of the Government's strategy

is to ensure that local authorities address homelessness strategically, by connecting the range of services which can have an impact on reducing and preventing homelessness into a co-ordinated approach. The Government expected local authorities' actions to be much more evidence-based, using this new knowledge about the causes and incidence of homelessness to lead to action to address the problem in future. Through analysis of why and how people become homeless there is emerging new ways to prevent and reduce its incidence, and a deeper understanding of what would help people to be able to stay in their own homes.

To start this process, local authorities were asked, for the first time, to conduct reviews of their services and of the other agencies (statutory and independent) which help and advise homeless people in their area. They were required to work with other agencies in conducting the reviews and developing their strategies, and to ensure that homeless people were consulted during the process.

To support local authorities in these tasks, the Rough Sleeper Unit had been absorbed into a new Homelessness Directorate, which also takes in the Bed & Breakfast Unit, the whole Directorate having an increased budget for implementation of the Act and prevention work, and being given a much greater status. This was further developed in October when Supporting People was also included in the Directorate

A key element of the national policy is the ending of the use of B&B for homeless families. As well as having an impact on the work of Homeless units it will also add pressure to that for provide floating support services to aid early re-settlement

The development of Homelessness Strategies should link in substantially to Supporting People strategies, with many needs likely to be identified through the review of homelessness provision.

The Shadow Strategy noted the rise in homelessness that had been recorded between 1998 and 2001.

Two new build schemes were identified in the Shadow Strategy as priorities, one for young people with complex needs (currently being built) and one for adults with complex needs (funding application currently being considered by the Housing Corporation). 'Floating support' was also identified as a priority.

The Homelessness Review, produced in 2003, confirmed that there is an urgent need for supported accommodation within Hartlepool to provide a 'stepping stone' to independent living. The Strategy committed the Council and its partners to encourage and support new schemes to provide supported accommodation, especially schemes aimed at young people, people with problems of substance misuse, ex-offenders and women with complex needs. The Review identified the need for all levels of supported accommodation

including assistance to move on to independent living when it is judged that the person can successfully manage their own tenancy.

The Homelessness Strategy, produced subsequently in 2003, identified the following as priorities for action:

Priority 1 Provision of high/medium level supported accommodation for young people (16-25) including those with substance misuse problems or offending behaviour.

Priority 2 Provision of high/medium level supported accommodation people over 25 with substance misuse problems or offending behaviour.

Priority 3 Provision of high level supported accommodation for women with complex needs, including mental health problems.

Priority 4 Provision of high level supported accommodation for men with complex needs, including mental health problems.

Needs Identified

By Spring 2006, the new scheme for young people with complex needs will be complete, and this will add to the existing schemes of St Paul's, Scott Grange, and Avondene (see section on substance misuse for more detail).

Homeless families are accommodated when necessary in Bed & Breakfast, and this is commonly in Middlesbrough or at 50 The Front in Seaton Carew. The use of B&B is at a minimum.

Since the Shadow Strategy was produced in 2002, the stock of temporary supported accommodation for homeless families and single people will have been added to by two facilities, the York Road scheme for young people with complex needs, and Avondene. There is limited temporary supported accommodation for homeless families and turn over is slow due to a number of factors including the shortage of suitable 'move-on' accommodation and support.

Several floating support services now work with homeless households. Since early 2003, the Council's Housing Advice Service works with around 17 households at a time, focusing on (but not exclusively) Housing Hartlepool tenants who would otherwise probably not be able to access or sustain their tenancies ?? Furnished tenancies are available for supported tenants. The table below reports the figures for homeless applications and acceptances for the full year 03-04, followed by each quarter and the full year for 04-05. This shows that, in line with Government policy direction, homeless applications (decisions) and acceptances in Hartlepool are reducing with successful actions aimed at preventing homelessness, including the active involvement of the Tenancy Relations Officer. However, although homeless applications have reduced by 10% over the last year, and acceptances reduced by 30% between September 04 and March 05, the numbers waiting at home ("Homeless at home") for re-housing are not reducing at the same rate. This tends to put pressure on temporary accommodation, as those waiting at home

get to the end of the patience of family or friends, and seek temporary accommodation through the council.

Big 39 Statutory homelessness: 03-04 and 04-05

	Total acceptances	No per 1000 households	Total decisions	Intentionally homeless	Not in priority need	Not homeless	Homeless at home
Total 03-04	324	8.8	932	37	373	198	0
Q1 Apr – June 04	99	2.6	277	12	107	61	0
Q2 July – Sept 04	90	2.5	248	11	81	66	95
Q3 Oct- Dec 04	53	1.4	161	12	51	45	82
Q4 Jan – Mar 05	63	1.7	157	7	42	45	71
Total 04-05	305	8.2	843	42	281	217	248

Providers and the homeless service report that needs amongst homeless clients in general have become more complex, with more homeless people across all client groups likely to have an involvement with drugs or serious levels of alcohol use. Other changes have been the difficulty of accessing rented housing, with a dramatic reduction in the number of properties available to let in either the social rented sector or through accredited landlords in the private rented sector.

The Shadow Strategy reported that the recorded rough sleeper count was 0, and this figure was confirmed by the official rough sleeper count carried out by an independent consultant in 2004. The Centrepoint monitoring and other counts gave figures for people approaching other agencies than the Council, although these are likely, however, to be 'sofa-surfers' rather than 'rough sleepers'

County Durham and Tees Valley Cross Authority Group (CAG Statement, 2004-05) identifies levels of unmet needs amongst ex-offender, young people with complex needs and people with complex needs including mental health problems. A profile of homelessness typically includes some or all of these client groups.

The Housing Strategy (2006-2011) notes that the reduction in the supply of social rented housing experienced over the previous 12 to 18 months has been 'particularly acute with regard to general needs family type accommodation'.

Hartlepool Housing Strategy (2005-10) reports on consultations with resident representative groups, where it was pointed out that the needs of all homeless people should be addressed, not just those who are in priority need

The Housing Strategy (2005-2010) outlines a need for funding from Supporting People to continue the private sector floating support scheme (through Endeavour Housing) following the end of the current funding stream in March 2006. This scheme is described as being 'very successful'.

ODPM have recognised the services offered by the Housing Advice Team by making the Council it's NE Regional Champions for 2005. Major factors in their decision were the Council's approach to young people's homelessness, the early achievement of the Government's targets for ending the use of B&B and the significant steps it has taken towards homelessness prevention.

Conclusions

Given this extent of evidence, there is a compelling argument for developing additional resources providing temporary supported accommodation for both homeless families and single people in Hartlepool.

This is recognised in the Housing Strategy which identifies funding for the provision of move-on accommodation and floating support services as a priority. In order to fund additional services, existing contracts will need to be reviewed and savings identified

Priorities

- Temporary supported accommodation to include:
 - direct access for young people (as discussed above)
 - emergency accommodation for homeless families and single people
- Floating support for all groups

Refugees

The National Asylum Support Service (NASS) currently operate the asylum seekers system on behalf of the Government and deal with much of the dispersal arrangements. They are the main source of statistical information.

The distinction between Asylum Seekers and those "given leave to stay" and Refugees is often not clear:

- Asylum Seekers have very limited right to support services including while their case to be allowed to stay is considered.
- Those given "leave to stay" or more recently "humanitarian protection" can stay for between three and four years depending on status. They can then apply for full citizenship

- However, once someone has been given the right to stay he or she can access the full range of services but also must leave NASS funded accommodation and begin to make their own way.
- Refugee is defined under the 1951 United Nations Convention. As part of the decision-making process the Home Office may decide that someone meets the definition of a refugee and therefore has the right to stay. It is also a general and colloquial term used to describe all of those who are Asylum Seekers and those who have been given the right to stay. It is a matter for each individual as to when or if they decide to stop describing themselves as refugees

Not every-one who becomes an Asylum Seeker status is eventually given the right to stay and of those that do not all will wish to remain in the area that they have been dispersed to (most asylum seekers currently wish to move away from the area. It is at this stage that it becomes difficult to find accurate information on numbers as formal links with NASS are cut.

In 2002, Hartlepool Unitary Authority offered accommodation and support for up to 25 families seeking asylum. Once accepted as refugees they are placed directly into general needs accommodation. Due to changes in the contract a private company now provides accommodation in the town.

Asylum Seeking Communities in North East England Quarterly Statistics (March 2004) found 4,942 Asylum seekers in the North East. This is a slight decrease on the last quarter (December 2003). The main nationalities are Iranian (11.3%); Iraqi (10.4%) and Afghan (6.2%). Newcastle has the greatest number of asylum seekers (n=1,605), 32% of the total number of asylum seekers in the North East. By comparison, Hartlepool has only 40 asylum seekers (the second lowest in the region after Darlington). Only 2 are in receipt of subsistence-only support from NASS. The remaining 38 make up 17 households, who are housed in general needs accommodation.

Home Office statistics published in 2001 indicated that about two thirds of Asylum Seekers were under 35 years old and the places of origin are growing and changing as international circumstances change.

Needs Identified

The impact of the numbers of asylum seekers is accumulative but there is very little information available nationally or locally on the long-term support needs of this group. It is known that some will require little support after they have gained established accommodation. Many asylum seekers are well educated and bring much needed skills. However, some will have continuing problems of adjustment and others will have health and or social problems. The County Durham and Tees Valley Cross Authority Group (CAG Statement, 2004-05) acknowledges that only Middlesbrough has Supporting People supported household units for refugees. This might be a reflection of the higher number of asylum seekers dispersed to Middlesbrough, which are

subsequently given refugee status compared to the other local authority areas.

The Supporting People Shadow Strategy (2002) explained that at that time there was no supported accommodation provision for refugees and no plans to develop any.

Priorities

- The main need identified is to determine any future needs of asylum seekers and refugees.
- Preventative services which would prevent future homelessness amongst this group.
- The need to think more about culturally sensitive services rather than culturally specific

Young people including young offenders, young people leaving the “Looked After” system, and other young people at risk

Introduction

This section encompasses young homeless people, rough sleepers, care leavers and teenage pregnancies and young offenders. The first two are included within an element on young people while the later two have been given specific attention within subsequent elements of this section.

The purpose of this section is to focus on those young people who are not covered by other sections, but at the outset we have not recognised that the labels placed on needs for planning purposes may actually hinder effective planning. The reality is that young people are not a homogeneous group and individual needs and the environment in which they live make flexibility in service delivery a key issue even when considering a narrow group falling under the heading of “young people”.

There are a number of key Acts and government policies that affect this client group:

- Homelessness Act 2002
- Children Act 1989
- Children (Leaving Care Act) 2002
- Supporting People
- Housing Corporation Circular (*Circular 0704: Tenancy management: eligibility and evictions*)

It is not our intention here to review the content of these documents but to demonstrate the range of contextual guidance and requirements that surround

these client groups. However, it is important that we do comment on some areas of national policy.

- The introduction of the Homelessness Act 2002 placed a duty on local housing authorities towards homeless 16 and 17 year olds and people leaving institutions in assessing and finding them suitable accommodation
- The Children (Leaving Care) Act 2000 places a responsibility on Social Services to provide accommodation and financial and practical support for most 16 or 17 year old care leavers (relevant children)
- All 18-20 year olds (other than relevant students) who are former relevant children under the Children (Leaving Care) Act 2000 must be accepted as priority need
- Housing Corporation Circular (*Circular 0704: Tenancy management eligibility and evictions*), issued in July 2004, reminded Housing Associations of their obligations to help local housing authorities to discharge their homeless responsibilities, and to help to meet needs for those on the waiting list.
- Supporting People has responsibility for identifying housing related support needs, planning ways of addressing those needs and ensuring that the services are of good quality

We can also add to this list the Government's over-arching policies of prevention and addressing social exclusion. The Government's expectation is that the needs of vulnerable young people will be addressed through a partnership approach.

Some young people are leaving care with a mix of very difficult problems, including challenging behaviour, mental health, arson, personality disorders, and drugs. About 10 young people had been difficult to house so far this year and are in need of more support than is available

Accommodation failure is not just a problem for 16/17 years olds, but is a general problem for young people and can create major problems for the individual. It could lead to homelessness and exclusion from social rented accommodation. It is also likely to lead to debts and loss of personal belongings. In addition it may force the individual to move away from what support mechanisms are available to seek accommodation, adding to feelings of inadequacy that may make it harder to succeed in the future.

Accommodation failure is a major concern of all housing providers, who will be reluctant to house anyone they consider unlikely to sustain their accommodation. Even one serious episode of accommodation failure has the potential to blight the housing prospects of an individual for a long time. The avoidance of accommodation failure is therefore as important as obtaining accommodation in the first place. However, if there is a failure then there must be a way to retrieve the situation that will provide confidence to the housing provider that the situation will not re-occur. We will address the issue of types

of support and access to accommodation later in this section. There is one specific issue to address here, and that is how tenancy failure is dealt with.

At the moment evidence suggests that generally tenancy failure resulting from an eviction, abandonment or a legacy of rent arrears will lead to exclusion forcing the individual to seek alternatives. In real terms this means seeking private rented accommodation, bed and breakfast, or staying with friends and relatives. For some it will mean rough sleeping and all too frequently will include all four, with little prospect of the cycle being broken. There is plenty of evidence of the personal consequences of this life style, but there are also costs to the community in terms of crime and increased health care costs. It also can have an impact on supported accommodation when clients are unable to move on to other accommodation. This can have two effects; it can reverse the progress made during the period of support and secondly stop someone else benefiting from the support.

Finding a way of breaking this cycle is in everybody's interest. There are a number of schemes funded through Supporting People in other parts of the country that could address this problem. The aim is to provide stable accommodation with intensive support. During the period in this accommodation the individual must demonstrate that they can maintain a tenancy, and address such issues as paying off at least part of any arrears. The housing provider will be involved in this process and will receive regular progress reports. Should there be no problems, at the end of an agreed period, a permanent tenancy should be guaranteed. It is also not unusual to find the support continuing after a move to a permanent tenancy to ensure a successful transition.

The Youth Justice Plan (2005-06) reports that changes will give greater strategic prominence to the youth offending agenda in Hartlepool and help to engage partner agencies in developing a prevention focus

The Youth Offending Service (YOS) is currently managed from the local authority Community Services Department. The local authority is in the process of establishing a Children's Services Department. It has been decided that the YOS will remain within the management responsibility of Community Services for the present but will be included in any longer term plans to establish a Children's Trust.

Needs Identified

The Youth Justice Plan (2005-06) reports that Hartlepool YOS is dealing with low numbers in relation to remands/custody. Custodial sentences were given to 10 young people during the year 2004/05. Only one BME young person has been referred to the YOS in the last 5 years.

Hartlepool Borough Council's Race and Diversity Scheme (2005-08) Service Diversity Action Plan for 2005/06 includes reference to plans to complete a Race Audit and draw up a resulting action plan within Youth Offending Services

In relation to preventing the use of custody for young offenders, the following information was provided in Hartlepool's Youth Justice Plan (2005-06):

- During 2004/05 remands were slightly above the target of 30% with an outcome of 31% however this represented only 5 young people being placed on remand in custody out of a total of only 16 subject to remand, bail supervision (including ISSP) or remand to local authority accommodation
- The target for 2005/06 is 24.2% for remands or no more than 8 young people and 4.5% for custody, which equates to 11 young people
- YOS court officers will continue to be pro-active in the courts putting forward support packages for young people to remain in the community where this is feasible. The YOS manager meets regularly with the Chair of the Youth Court Panel to discuss any issues and attends the Youth Court Magistrates meeting quarterly to report on YOS issues and the YOS performance measures in relation to remands and custody
- Hartlepool YOS continues to perform well against early intervention targets achieving an outcome of 92% against a target of 80% for issuing final warnings (Youth Justice Plan 2005-06)

In relation to supporting young people in engaging in education training and employment, the following information was provided in Hartlepool's Youth Justice Plan (2005-06):

- Resettlement and Aftercare Provision (RAP) and Substance Misuse funding have also come to the YOS during the year (2004). This will help to provide additional support to those young people returning to the community from custody and those on community orders
- It is intended that the Strategy in South Tees YOS will be rolled out across the Tees Valley sub-region

In relation to supporting access to substance misuse services, the following information was provided in Hartlepool's Youth Justice Plan (2005-06):

- The assessment delivered within 10 days has not met the target, whilst assessments have been offered within the 10 days the young person has failed/refused to attend the appointment.
- This will be addressed through ongoing work with the Hartlepool Young Peoples Drug Team and the RAP/Substance Misuse workers to support and encourage young people to attend assessments. There are also plans for the Development Worker to develop a peer mentoring scheme.

In relation to supporting access to appropriate accommodation, the following information was provided in Hartlepool's Youth Justice Plan (2005-06):

- A multi-agency funded Homeless Strategy Officer was appointed during the year with the remit of increasing the type and choice of accommodation available to young people.
- Placement with remand carers is used when appropriate accommodation is not available or additional support is required before a young person can move on to independent living

In relation to supporting resettlement into the community, the following information was provided in Hartlepool's Youth Justice Plan (2005-06):

- A bid for funding has been successful and the YOS has been awarded a Community Substance Misuse Grant. This will be used to employ Resettlement and Aftercare Provision (RAP) workers, who will engage young people whilst in custody and offer voluntary support for up to 6 months after the end of an Order.
 - The Development Worker will establish a peer mentoring scheme also
- Agencies throughout Hartlepool had identified the severe shortage of emergency access accommodation for young people, and the lack of a support network that could be accessed 24 hours a day. The main emergency accommodation currently available was in the private sector, and most of this was described as of poor quality, inappropriate and in some instances dangerous to vulnerable young people.

Recent Centrepoin t research had identified difficulties in accessing and sustaining accommodation for young people with chaotic lifestyles. This was seen as especially true for drug and alcohol users, as these difficulties usually meant that they had to seek accommodation outside the area, away from their support networks. Young people with a chaotic lifestyle were seen to have been marginalised and excluded from much accommodation and support.

The accommodation recommendations of Centrepoin t's research were:

- Development of a range of accommodation, with a degree of flexibility for young people who fail at the first attempt, to include an emergency access project with 24-hour staff support
- A Foyer-style development
- Floating support projects with the ability to respond to crisis and other issues outside office hours
- Provision of move-on accommodation, including small second stage accommodation

The Shadow Strategy identified that the provision of accommodation for young people leaving care was limited, and that more provision across the spectrum of fully supported to fully independent was required, although there were comparatively low numbers of children being looked after and of these a high proportion were well supported in foster care or appropriately adopted.

It also noted the need for provision for:

- Families with children in need
- Bail support – supported accommodation for young people bailed by the police or courts
- Accommodation for young people aged 16 and 17 who are unable or unwilling to live at home
- Drug treatment resources for young people, both high intensity programmes and longer term support

The Shadow Strategy identified as priorities two 10 unit floating support schemes, one for young people with complex needs, and one for young people leaving care, and an emergency access supported housing scheme for young people.

Supported Accommodation

No new supported provision has been developed for young people in Hartlepool, but a 10 bed scheme for young people aged 16-25 is currently being built at York Road and will open in Spring 2006. This will be managed by Stonham, and will provide 6 supported and 4 semi-supported units for young people with complex needs including drug or alcohol misuse. The scheme will not provide emergency accommodation, but is to be developed as a multi-agency response, with services from a range of agencies working into the scheme and providing outreach services with this as a base.

A Homelessness Strategy Officer for 16-25s was appointed through the Homelessness Review and Strategy, originally working as part of Connexions and now employed within the homelessness service. This person provides housing advice, helps to find accommodation for young people and helps to identify issues concerned with young homelessness.

New floating support units have been developed by Tees Valley for young people leaving care, through the St Paul's project, and a support service currently funded by NRF and managed by Endeavour HA for people living in the private rented sector supports a number of young people.

DISC is currently working on a very short term basis with a few young people who are on ISSP orders (Intensive Support and Supervision) and who have been in St Paul's, a 5 bed supported housing scheme primarily for young people leaving care. The Youth Offending Service has been able to secure a few flats for young people under 18 but struggled to obtain continued support when the statutory relationship with the YOS came to an end. A further development with a private landlord did not materialise as the landlord required payment from the YOS of £150 a week, as opposed to the £65 assessed as eligible for Housing Benefit.

There are currently plans to develop a multi-agency planning panel which will agree who is to supply which elements of a support package for young people requiring accommodation and support. It will be essential that housing providers are part of this panel, since without the possibility of permanent accommodation being offered, this development has little chance of making a difference within the town.

Specialist services V Generic

The comments made about supported accommodation meeting a wide range of needs also applies to floating support. Many areas have commissioned "generic" floating support services that purport to support a wide range of needs. ODPM has expressed some concerns about these types of services and in particular their real value in addressing needs. There is general support in Hartlepool for the view that specialist services are essential, but that there

needs to be recognition that the extent of overlap between needs will require a flexible approach within services, and also across services.

A number of people believe that there is a strong case for developing mechanisms where expertise can be shared across different support services so that different needs can be fully addressed. The issue of co-operation at a local level emerged within the Provider workshop and a more general point will be made later. For Supporting People, there is an important issue to consider here as they negotiate contracts. The flexibility in sharing expertise although desirable will cost money. However, many people do not have straightforward needs so the sharing of expertise becomes crucial to a successful outcome

Flexibility

We have already talked about the need to design services that fit needs and that point does not need to be repeated. Another issue is the length of time that a support service can be provided for. The two-year limit emerged as a means of generally identifying services that should be excluded from charging. The issue that the ODPM were addressing was the administrative problems that could be caused in attempting to levy charges on what are generally high turnover services for people who may not have settled accommodation. Our understanding therefore of the situation is that provided the service generally meets these criteria, then extending the service beyond two years for a particular individual should not present a problem. This may occur in a number of circumstances, for example, where an illness or addiction re-occurs. It may also be desirable to maintain some contact with a service user as a means of tapering off the support service to aid the transition to full independence.

There appears to be a strong case for developing mechanisms where expertise can be shared across different support services so that different needs can be fully addressed. There is an SP contract issue here, the flexibility offered in sharing expertise, although desirable, has a cost implication. However, many people do not have straightforward needs so the sharing of expertise becomes crucial to a successful outcome, value for money is not about cheapness but offering the appropriate service reasonably.

Flexibility

Flexibility of services and the length of time they are available are both important issues. The two-year limit emerged as a means of generally identifying services that should be excluded from charging. The issue that the ODPM were addressing was the administrative problems that could be caused in attempting to levy charges on what are generally high turnover services for people who may not have settled accommodation. Provided the service generally meets these criteria, then extending the service beyond two years for a particular individual is a viable option. This may occur in a number of circumstances, for example, where an illness or addiction re-occurs. It may also be desirable to maintain some contact with a service user as a

means of tapering off the support service to aid the transition to full independence.

This last point may be more of an issue for supported accommodation where there is not only a change in support but in accommodation and location. Support is needed to ensure there is an effective transition. SP contracts should encourage this. There is a strong argument for ensuring that in fact all people leaving supported accommodation receive floating support. At a minimum all young people below 25 should continue to receive support after leaving supported accommodation. This group is most at risk of tenancy failure, so the ongoing support will reduce the risk of the work being done in the supported accommodation being wasted. It should also help show housing providers that the provision of move-on accommodation is a low risk.

Planning and delivering services

- There are stronger connections between groups on some issues relating to young people, such as young offenders and young people leaving care. It is important that all agencies working with young people are able to influence the direction to be taken by Supporting People.
- A continuing input from other agencies was seen as a critical need, particularly by service users. For young people who have little or no contact with their families or foster families, the continued involvement of a social worker or other support worker is important.

Conclusions

Homelessness amongst 16-18 year olds is seen as still being a critical need. St Paul's report that their service is significantly over-subscribed, with referrals from outside and within Hartlepool outstripping demand.

Young people leaving the "Looked After" system have a greater mix of complex needs than was the case when the Shadow Strategy was produced. At the same time, the supply of Social Services accommodation for Looked After children has been reduced, and Social Services report considerable difficulties trying to obtain accommodation for young people, either for those coming from care or for those leaving home.

For over 18s trying to access all forms of supported housing, there are more individuals with offending histories and with drug and/or alcohol problems, and more with a mix of complex needs.

There has been no change in supported housing provision but agencies report greater difficulties for young people trying to access mainstream social housing provision. This can mean longer stays in temporary accommodation, and sometimes means that work on preparation for independence has to be restarted.

Private rented stock is difficult to access to anyone under 25 due to the single room rate rules for Housing Benefit including under 18s. It has proved

increasingly difficult to obtain private rented sector accommodation, and to be able to pull together a bond, and either guarantors or references.

The combination of these factors has resulted in a number of young people being unable to access permanent accommodation and being offered temporary accommodation outside Hartlepool

Priorities

- **A foyer-type scheme**, probably dispersed – to complement the direct access emergency provision
- **Additional advice and floating support services** needed for all young people, but particularly for those drug/alcohol and other needs
- Service users added that **accommodation needs ideally to be both town centre and in outlying areas**, and that more accommodation like ST Paul's is needed.

Teenage pregnancy

Introduction

The UK has the highest rate of teenage pregnancies in Western Europe. In 2001, in England and Wales there were 42.5 conceptions per 1,000 women aged 15–17 (this was however, the lowest figure since 1995). There has been a 10% decrease since 1998 nationally.

The national initiative to reduce teenage pregnancies was linked to the need for support and accommodation at an early stage. Authorities were asked to work towards ensuring that teenagers who needed their own accommodation were able to access supported options. The debate about what type of supported accommodation has been conducted in many parts of the country, with a range of options being developed, including foyers, which can accommodate teenage parents.

ODPM have placed a particular emphasis on this client group within their guidance on Supporting People, highlighting it as a priority area for investment. The key national target that impacts most on Supporting People was that all lone parents aged under 18, who are not living with a partner, or with their family, should be placed in housing with support.

1998 baseline measures revealed that the North East region had the highest teenage pregnancy rate in England, with Hartlepool the highest in the region.

The Neighbourhood Renewal Strategy (NRS, 2001-2011) observes that the highest rate of teenage conceptions is in Dyke House, Jackson and Owton wards, and the New Deal for Communities (NDC) areas.

Policy Direction

Joint Department of Health and Department for Education and Skills Public Service Agreement target and also PSA target for local government

- To reduce the under 18 conception rate by 50% by 2010, with an interim target of a 15% reduction by 2004.
- To reduce the inequality in rates between the fifth of wards with the highest under 18 conception rate, and the average ward rate, by at least 25% by 2010
- From 2003 all lone parents aged under 18 who are not living with a partner or with their family should be placed in housing with support
- To achieve reductions in the risk of long term social exclusion for teenage parents and their children

The Strategic vision for Hartlepool Teenage Pregnancy Strategy is:

'By 2010 the young people of Hartlepool will have access to high quality, accessible and acceptable services which reflect their needs and preferences in terms of:

- *Sex and relationship education*
- *Contraception and sexual health services*
- *Integrated support for young parents*

These services will be developed with the involvement of young people and with the aim of reducing stigma and disadvantage for the communities of Hartlepool.'

In 2001, the strategic priorities for support for teenage parents were:

- The development of a supported housing scheme
- The integration of pregnant mothers and young parents into school
- Assisting pregnant mothers and young parents in accessing training, further education and work opportunities
- Making childcare more accessible
- Ensuring adequate support from primary health care workers which was acceptable to young people
- Exploring the use of the voluntary sector in supporting young parents
- Developing parenting skills provision

Needs Identified

In 2002, a bid to provide a scheme for up to 6 young mothers was successful. The supported housing scheme for young parents, Anna Court, opened in July 2004. It provides 6 two bed-roomed flats with 24 hour support.

Research for Hartlepool's Teenage Pregnancy Partnership (2003, see below) found the following feedback from teenage parents about housing:

- The largest proportions of teenage parents choose to stay with their family, as that is where they get the most support
- 1 out of 9 respondents moved around a lot
- 2 out of 9 mentioned a need for housing but did not know about any services available

- 1 out of 9 had a bad experience with the Council's housing services
- 5 out of 9 had positive experiences of the Council's housing services

Alongside the support Anna Court provides for the 6 residents, an outreach worker works with a number of young mothers who have moved on from the scheme, or who have moved directly into their own accommodation. Although the accommodation is quite small, it is added to by a separate suite of communal facilities – a sitting room, kitchen, laundry, and office – and there is a large garden complete with play equipment. Residents noted that the support provided has helped to reassure them as they got nearer to having their babies, and to build up skills in independence – cooking, cleaning, shopping and budgeting, and managing a home and a child on their own. There has been no major change in the type of need, however the level of need continues to be high. Additionally there is a need to support young couples with children

Hartlepool's Teenage Pregnancy Partnership Board commissioned a needs analysis, the results of which were published in 2003. 39 people, including 27 teenage mothers and 6 teenage fathers, were interviewed by their peers with help from a researcher.

The research made the following recommendations :

- Extend Sure Start service to all teenage parents
- More information and access to childcare
- More information about other support services that can be accessed, e.g. B76, Connexions
- More support for the wider family
- More recognition and support for teenage fathers
- More advice and information about housing options

Provider and Service user views

Both staff and residents emphasised the importance of the links made to training and education. A range of courses is available to be organised at the scheme, or for service users to attend in other places, and both options were valued. Courses may help to develop independence skills - for example through learning about first aid – or help the participant to identify what skills they need to develop in order to be available for work. A further benefit is making contact with other people living in similar situations, and learning how to make use of outside resources and facilities.

Move-on

There are some problems accessing accommodation in the right areas or at the point where the service user is ready to move on to be independent. As with other groups, long waiting times can mean that frustration builds and that some preparation for independence has to be redone

Conclusions

There is some evidence of unmet needs for this client group but move on accommodation is also a concern. Hartlepool Housing Strategy (2005-2010)

identifies a need for move on accommodation for those who are ready to leave Anna Court

Priorities

- An additional 6 bed scheme for single teenage parents , and support for teenage couples
- Additional floating support provision
- Increased availability of move on accommodation

Travellers

There is very little information at either a national or local level concerning this client group and its support needs. Nationally very few areas provide purpose designed services for this group, and this is reflected locally, where there are also no specific support services.

This client group definition includes traditional Romanichals as well as other groups of people living alternative travelling lifestyles.

It is not a surprise to find that very little information on support needs for this client group as their lifestyle usually precludes contact with most forms of support services.

The Housing Strategy (2005-2010) reports that Hartlepool has never been a popular area for substantial numbers of gypsies and travellers, possibly because it is not on a main travelling route. Hartlepool has twice been exempted from providing a site due to the low numbers resorting to the area (1970 and 1986). Over the 6 years between 1999 and 2004, recorded encampments produce an average of 3 encampments a year, with 8 vans in each, staying for up to 3 weeks at a time. There have been no records of calls for housing support from these encampments, although occasionally there are requests for mainstream accommodation for short periods of time.

There have been no new developments for this group. It is possible that in future the Government will require all local authorities to make provision of designated sites for travellers, but there is little evidence of need being identified for supported housing or floating support.

The decision not to provide an official site is to be reviewed annually

Appendix 7: Risk Analysis

HARTLEPOOL SUPPORTING PEOPLE RISK REGISTER

Ref no.	Date identified	Risks under area headings	Consequence of risk occurring	Score	Actions to manage risk	Risk owner
		<p>SP STRATEGY</p> <p>The SP partners fail to agree a strategy, or the strategy is of poor quality</p>	<p>An adequate 5-year strategy will not be in place to help put the SP vision and objectives into practice.</p> <p>Programme resources may be allocated inappropriately.</p> <p>Service provision may not address real needs</p>	<p>Probability – Low</p> <p>Impact - High</p>	<ul style="list-style-type: none"> • Undertake an assessment of the causes of disagreement • Consider using an objective facilitator/mediator • Hold a special 'refocusing' commissioning body meeting • Develop a plan that will address these issues identified • Ensure an agreed preparation plan is in place 	
		The SP's strategy fails to make the appropriate links with other strategies, or other strategies fail to take account of SP	<p>Programmed resources may be allocated inappropriately.</p> <p>Service provision may not address real needs</p>	<p>Probability - Medium</p> <p>Impact - Medium</p>	<ul style="list-style-type: none"> • Conduct an early review of the strategy • Produce supplementary material on links to the strategies in question, as part of the review report 	
		The needs mapping project does not yield the hard information required	Service reviews and other commissioning decisions continue to take place in a vacuum	<p>Probability – High to Medium</p> <p>Impact - Medium</p>	<ul style="list-style-type: none"> • Ensure robust project management of needs mapping project • Ensure qualitative data and stakeholder/user views are collated, in order to complement 	

Ref no.	Date identified	Risks under area headings	Consequence of risk occurring	Score	Actions to manage risk	Risk owner
					<p>hard information</p> <ul style="list-style-type: none"> • Ensure that all other related strategies are reviewed to see where SP can contribute 	
		SP Partnership/ decision making bodies fall apart	<p>5 year strategy not agreed</p> <p>AA/SP Team forced to run the programme unilaterally</p> <p>Review/commissioning decisions are undermined when inactive partners object</p>	<p>Probability – Low</p> <p>Impact - High</p>	<ul style="list-style-type: none"> • Ensure regular CB and PB meetings • Monitor attendance at CB and PB • Ensure there are named deputies for all attendees • Alert senior management if attendance is patchy (say 2 meetings missed) • Ensure accountable officer is aware of contingency arrangements • Ensure that minimum requirements for participation in the short term are secured where possible 	
		A key SP Partner ceases to engage	<p>CB and/or PB not quorate for decision making</p> <p>Review/commissioning decisions are undermined when inactive partner objects</p> <p>5 year strategy has major gaps</p>	<p>Probability – Medium</p> <p>Impact – Medium to High</p>	<ul style="list-style-type: none"> • Ensure that all partners are consistently represented at CB and PB • Ensure there are named deputies for all attendees • Alert senior management if attendance is patchy (say 2 meetings missed) 	
		Cross Authority arrangements	Services with CA access are deemed	Probability – High	<ul style="list-style-type: none"> • Ensure that client record 	

Ref no.	Date identified	Risks under area headings	Consequences of risk occurring	Score	Actions to manage risk	Risk owner
		ineffective	strategically irrelevant by Hartlepool Other AAs bar services from taking Hartlepool clients	Impact - Medium	information is reviewed for import/export of service users <ul style="list-style-type: none"> • Ensure CAG meetings are attended and that CA access is discussed 	
		SP OPERATIONS SP Team experiences key or several vacancies	Key national and local requirements cannot be delivered.	Probability - Medium Impact – Medium, becoming high if extended	<ul style="list-style-type: none"> • Agree and implement pro-active HR strategy for Supporting People. • Consider further use of existing posts outside the SP team e.g. more generic contracts manages 	
		FINANCIAL MANAGEMENT Future SP budgets may drastically reduce Lack of certainty around future budgets undermines forecasting	Funding of some existing services becomes unsustainable. Review and commissioning decisions are undermined by the uncertainty Uncertainty leads to unnecessary cuts Budget becomes over committed	Probability – Medium Impact - High Probability – Medium Impact - Medium	<ul style="list-style-type: none"> • Ensure that partners have agreed decommissioning arrangements, even for strategically relevant good VFM services • Ensure that interim decisions on strategic relevance take account of the availability of future funding • Ensure sufficient “what if?” scenarios are modeled prior to the 5 year strategy being produced • Ensure that both growth and cuts scenarios are modeled • Determine the 	

Ref no.	Date identified	Risks under area headings	Consequence of risk occurring	Score	Actions to manage risk	Risk owner
					"risk appetite" of partners (and the wider AA) so that the right amount of "over-programming" can be built in	
		Outturn expenditure shows wide variation from Financial forecasts (over/underspends)		Probability – Medium Impact - Medium	<ul style="list-style-type: none"> Ensure that regular financial reports to the BB/PB provide a full analysis of any variance Consider the use of a contingency fund 	
		CONTRACTS, SERVICE REVIEWS AND ACCREDITATION Some contract details still incorrect	<p>Payment errors occur, undermining forecasts if extensive</p> <p>Supply mapping, performance monitoring and reviews are based on incorrect information</p>	Probability – Medium Impact – Low to Medium	<ul style="list-style-type: none"> Reconcile contacts and payment details to performance returns Carry out any contract variations required 	
		Provider seriously defaults requiring immediate action	<p>Loss of SP monies while action is taken</p> <p>Service users may face considerable uncertainty</p> <p>Provider may mount publicity campaign or legal challenge</p>	Probability – Low Impact – High	<ul style="list-style-type: none"> Ensure that contingencies on alternative providers are in place (see below) Ensure that all default notices are issued in a timely and proper manner as per the SP contract 	
		Reviews behind schedule or not of sufficient quality (e.g. VFM element not properly dealt with)	<p>Reviews are rushed or improperly carried out, leading to poor decisions</p> <p>Reviews take place in a financial vacuum</p> <p>Providers appeal with regulatory and even issue legal challenges</p>	Probability – Medium Impact – Medium	<ul style="list-style-type: none"> Ensure the review function is fully staffed or outsourced Commission VFM methodology and train review staff Ensure the 	

Ref no.	Date identified	Risks under area headings	Consequence of risk occurring	Score	Actions to manage risk	Risk owner
					<p>review process is fully "processed mapped" and time tabled for providers and decision makers</p> <ul style="list-style-type: none"> • Standardise review reports to CB/PB, all delegations etc • Ensure the legal status of contracts and review decisions are clear and robust 	
		Provider disputes the outcome of a non-accreditation	<p>Provider Appeals</p> <p>Provider</p>	<p>Probability – Medium</p> <p>Impact – Low</p>	<ul style="list-style-type: none"> • Ensure the legal status of contracts and accreditation decisions are clear and robust • Ensure contingency arrangements for short term contracting with non-accredited agencies 	
		<p>SERVICE PROVIDERS</p> <p>Major provider of accommodation and/or support collapses/loses contract</p>	<p>Users may be at risk of homelessness, as well as loss of essential support</p> <p>Transfer of properties and/or support contracts to another provider may be required</p> <p>Provision of alternative housing and/or support through another provider may need to be achieved at short notice and could</p>	<p>Probability – Low/Medium</p> <p>Impact – High/Medium</p>	<ul style="list-style-type: none"> • Ensure that a range of providers is operating in the borough • Ensure that at least one of these providers is able and willing to take on a transfer of undertakings • Set up contingency plans by 	

Ref no.	Date identified	Risks under area headings	Consequence of risk occurring	Score	Actions to manage risk	Risk owner
			result in substantial costs.		<ul style="list-style-type: none"> Identifying other providers/agencies who can offer transitional support services and management at immediate notice if required Lias e with HC if the provider is an RSL or operating in RSL property 	
		Medium to small provider collapses or loses contract	<p>Transfer of support contracts to another provider will be required</p> <p>Provision of alternative support through another provider may need to be achieved at short notice and could result in substantial costs</p>	<p>Probability – High</p> <p>Impact – Medium/Low</p>	<ul style="list-style-type: none"> Ensure that a range of providers is operating in the borough Ensure that at least one of these providers is able and willing to take on a transfer of undertakings Set up contingency plans by identifying other providers/agencies who can offer transitional support services and management at immediate notice if required 	
		Reduced staffing levels/cover arrangements post review put provider staff at risk	<p>Incidents, including violence, at projects</p> <p>Negative publicity</p> <p>Loss of competent staff</p> <p>Service may become unsustainable</p>	<p>Probability – Low</p> <p>Impact - High</p>	<ul style="list-style-type: none"> Ensure providers signed up to post review action plans Use QAF to ensure that safety issues are addressed Consider early second review 	

Ref no.	Date identified	Risks under area headings	Consequence of risk occurring	Score	Actions to manage risk	Risk owner
					<p>where new arrangements are too risky</p> <ul style="list-style-type: none"> • Ensure services have clear aims and objectives and that expectations are managed • Ensure contingency plans with other providers are in place 	
		Provider forum not in place/not functioning/not representing all sectors	<p>Lack of provider involvement in strategy development</p> <p>Lack of feedback from providers on impact of SP (including impact on SUs)</p> <p>Providers lose confidence in SP implementation</p> <p>Misunderstandings around implementation cause friction and inefficiency</p>	<p>Probability – Medium</p> <p>Impact - Medium</p>	<ul style="list-style-type: none"> • Ensure provider forum is facilitated • Monitor regularity of and attendance at meetings • Ensure all sectors are invited • Ensure appropriate representation on PB 	
		SERVICE USERS Service users not involved in Inclusive or other relevant forums	<p>Absence of SU influence over strategy</p> <p>Services do not meet SUs' reasonable expectations</p>	<p>Probability – High</p> <p>Impact - Medium</p>	<ul style="list-style-type: none"> • Ensure IF or other forums are facilitated • Monitor regularity of and attendance at meeting • Ensure appropriate representation on PB 	
		Service user views not fed back by Provider Forum	Absence of SU influence over strategy		<ul style="list-style-type: none"> • Make SU feedback a standard agenda item 	

Ref no.	Date identified	Risks under area headings	Consequences of risk occurring	Score	Actions to manage risk	Risk owner
					<ul style="list-style-type: none"> at the PF and a standard feedback item to PB Commission direct work with SUs where required 	
		Reviews show that levels of SUI in services are low	<p>Absence of SU influence over SP services</p> <p>Little or no brand awareness of SP amongst users</p>	<p>Probability – High</p> <p>Impact - Medium</p>	<ul style="list-style-type: none"> Map provider's SUI initiatives Use Service Reviews and QAF to ensure improvements in SUI 	
		Significant numbers of potential clients unable to access services	<p>Increased admissions to long stay and other institutions</p> <p>Danger to isolated vulnerable people from the wider public</p> <p>Increased incidence of mental and other health problems</p>	<p>Probability – Medium</p> <p>Impact - High</p>	<ul style="list-style-type: none"> Ensure ongoing needs mapping quantifies refusals Ensure commissioning arrangements are flexible enough to respond quickly 	
		Reduced staffing levels/c over arrangements post review put service users at risk	<p>Incidents, including violence, at projects</p> <p>Negative publicity</p> <p>Service may become unsustainable</p>	<p>Probability – Low</p> <p>Impact - High</p>	<ul style="list-style-type: none"> Ensure providers signed up to post review action plans Use QAF to ensure that safety issues are addressed Consider early second review where new arrangements are too risky Ensure services have clear aims and objectives and that expectations are managed Ensure contingency plans with other providers are in place 	

Ref no.	Date identified	Risks under area headings	Consequences of risk occurring	Score	Actions to manage risk	Risk owner
		<p>WIDER PUBLIC</p> <p>Significant numbers of potential clients unable to access services</p>	<p>Increased admissions to long stay and other institutions, causing pressure on services</p> <p>Danger to public from dangerous individuals</p> <p>Increased incidence of crime and ASB</p>	<p>Probability – Medium</p> <p>Impact - High</p>	<ul style="list-style-type: none"> • Ensure ongoing needs mapping quantifies refusals • Ensure commissioning arrangements are flexible enough to respond quickly • Ensure there are clear links to strategies such as crime and Disorder, Drugs, ASB etc • Work with PR on a communications strategy 	
		Key services close	<p>Increased admissions to long stay and other institutions, causing pressure on services</p> <p>Danger to public from dangerous individuals</p> <p>Increased incidence of crime and ASB</p>		<ul style="list-style-type: none"> • Ensure commissioning arrangements are flexible enough to respond quickly • Ensure there are clear links to strategies such as crime and Disorder, Drugs, ASB etc • Work with PR on a communications strategy 	

Appendix 8: Annual Plan

Annual Plan- Detailed activities against strategic priorities

Set out below are the activities planned for supporting People in Hartlepool over the next year. Each of the activities relates to the strategic priorities identified in Section 3 of the 5-year strategy.

Objective 1: Ensure appropriate planning and management of SP Team

Action	Timescale	Responsibility	Achieved
Review current staffing structure in the SP team and develop options for further integration in Council structures	September 2006	CMT	
All risks identified on risk register are appropriately risk assessed and have risk action plans. New risks are identified and assessed	February 2007	SP team	
Plan "Adverse Publicity" strategy	March 2007	SP team	
Review and if necessary amend Council H&S plan / procedures for SP team linked to risk of violence / harm whilst undertaking validation visits	July 2006	SP team	
Identify all key priorities from 5 year strategy and ensure action plan in place to deliver within agreed timetable	July 2006	SP Team	
Ensure that frontline customer service staff are aware of the SP programme and the services it can offer.	On-going	SP Team	
Update HBC websites to provide relevant information on Supporting People with accessible sign posting.	Ongoing	SP Team	
Identify efficiency savings using the Gershon principles as part of the corporate commitment to overall efficiency. Keep a record detailing the savings achieved.	ongoing	SP Manager/CB	

Objective 2: Effective management of the SP contracts & provider involvement in the SP programme

Action	Timescale	Responsibility	Achieved
Ensure accurate payments to providers made on 4-weekly basis	Ongoing	SP Team	
Review Eligibility Criteria against SP objectives and VFM agenda	VFM – August 2006	SP Team/PB/CB	
Develop capability and capacity of local provider market to deliver strategic objectives: <ul style="list-style-type: none"> • Conduct an overall assessment of Supporting People services • Attract “new providers” that can add value to the market. • Utilise preferred partnering arrangements as they emerge. • Re-tender existing services that do not meet tests of competitiveness or QAF within agreed time scales. • Continue to offer training and development opportunities to existing provider 	On going	SP Team/ PB/CB	
Financial Management: <ul style="list-style-type: none"> • Regularly reports on financial position (quarterly) • Financial projections • Develop budget for 2006/7 	On-going	SP Team	
Ensure that all providers complete client record returns	On-going	SP Team	
Ensure that all providers complete QAF returns	On-going	SP Team	

Objective 3: Effective management of the 5-year strategy and development of new services/ service change

Action	Timescale	Responsibility	Achieved
Implement, develop and review the 5-year strategy, maintaining links with other strategies supporting vulnerable people.	March 07	CB	
Commission research to cover gaps in needs data that were identified in the 5-year strategy i.e. BME & sensory impairment: <ul style="list-style-type: none"> Commission additional work as required 	On going	SP Team/PB	
Address the issue of accessibility: <ul style="list-style-type: none"> Provision of move on accommodation Access to permanent accommodation for those previously excluded Discuss with housing providers barriers to access 	On going	SP Team/PB/CB	
On-going risk analysis of critical issues using corporate procedures and SP programme specific measures	On-going	SP team/PB/CB	
SLOOP report (now Older Persons' Housing Strategy) to be reviewed:	March 2008	SP team/PB/CB	
Identify opportunities to re-model existing services through the review programme to meet the needs of those living in the wider community: <ul style="list-style-type: none"> Out-reach services from supported accommodation Shifting services from accommodation based to floating support 	March 07	SP team/PB/CB	
Work with the commissioners of statutory services to agree eligibility and funding criteria for people with mixed care and support needs	Ongoing	SP team/PB	
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 the North East and the scope of provision required.	Ongoing	SP teamLead	
Manage the SP budget and predict the level of savings / resources available for investment in new services	Ongoing	SP teamLead	

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

Action	Timescale	Responsibility	Achieved
Provide Milestone Returns to DCLG on quarterly basis	Quarterly	SP Team	
Provide all key PI information to DCLG on quarterly basis	Quarterly	SP Team	
Undertake accreditation of all provider organisations as part of the Supporting People programme.	Ongoing	SP Team/CB	

Objective 5: Ensure the effective functioning of the decision-making structure

Action	Timescale	Responsibility	Achieved
Ensuring delivery of the programme is one of partnership, inclusiveness, diversity, and accountability: <ul style="list-style-type: none">• Development of joint commissioning protocols and arrangements• Regular meetings with all partners/stakeholders to share risk.• Broader distribution of information on issues such as the strategy and needs analysis	March 06	CB	
Develop the role of the elected Member	Sept 06	CB	

Objective 6: Ensure the effective involvement of service users

Action	Timescale	Responsibility	Achieved
Develop a framework for action to ensure we identify the appropriate housing related support needs of BME households	Sept 07	SP LEAD/PB	
Develop a new consultation plan identifying the steps to achieving effective consultation taking account of the various existing and developing mechanism in Hartlepool.	Sept 07	SP Team	

Appendix 9: Across the board cuts

Across the board cuts

When AA's seek to find savings, the ODPM recommends that they should not make across the board, blanket cuts to services.

The Independent Review, and subsequent work by the Audit Commission and Matrix all show that there is substantial opportunity for AA's to work with providers to make efficiency savings, but it is very unlikely that these savings will be spread evenly across an AA's services.

We anticipate that best practice would be for AA's to identify those services that they consider offer the most potential for efficiency savings through the review process. This should therefore take into account both value for money considerations, as well as strategic relevance and quality. Decisions should, therefore, be taken on a case-by-case basis in consultation with providers.

In order to make this process easier, we acknowledge that some AA's may decide to have guideline costs per hour for the provision of housing related support, or to suggest maximum hours per week of housing related support for different levels of need. These should be guideline and should be used on a case-by-case basis, as there will inevitably be some exceptions to any framework like this. However, the ODPM appreciates that there will often be generally accepted levels on the amount of housing related support that either an individual (with a particular level of need) should receive per week, or that a worker can deliver in one week.

It must be remembered that the money paid to providers by AA's does not represent their full costs and should not be expected to meet all the running and operational costs of the organisation. In addition, if a part of a service is found to be delivering non-housing related support that is good quality and relevant, but is currently funded through SP grant, the AA should work to transfer the costs of these to the appropriate funding stream. Supporting People funding should be used alongside other funding streams to make up the full package of services delivered to vulnerable people.

ODPM would also like to remind AA's that paragraph 5(1) in the grant conditions for non-excellent authorities says that authorities should use their best endeavours to ensure that every service funded on the qualifying date, continues to be funded on existing terms from 1 April 2003 until the end of the interim period. In addition, we would recommend that AA's and providers check the wording of their contracts in relation to the contract price.



Hartlepool Borough Council

Supporting People

Charging & Subsidy Policy

This Policy is currently under review

Charging & Subsidy Policy

Introduction

This policy has been produced in line with government guidance and associated papers to include: -

- Department of Health's 'Fairer charging policies for Home Care and other non residential Social Services for Adults.'
- ODPM's 'Administrative guidance'
- ODPM's 'Charging and means testing for support services (Policy and Administration arrangements)'
- ODPM's Interim financial package
- Marchhaven Consulting's Guidance on 'Charging Supporting People service users'
- ODPM's 'Charging workbook'

The Policy's Aim

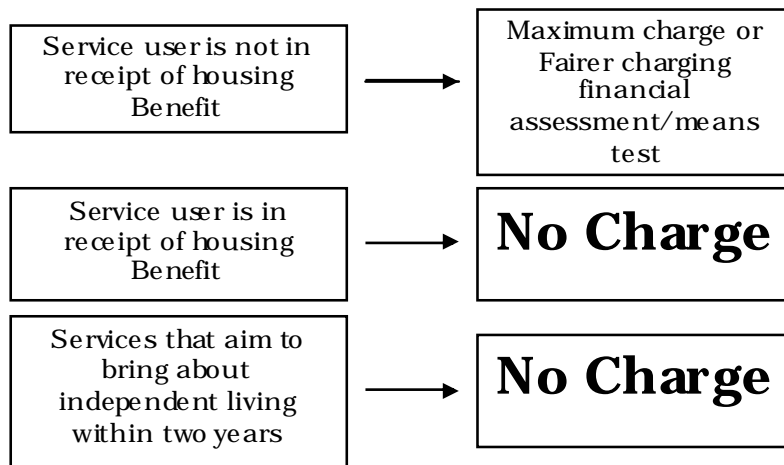
The aim of this policy is to ensure that: -

- Service users feel that it is fair and understandable.
- It is as administratively simple and legible for all concerned parties.
- Risk is balanced appropriately between providers and commissioners.
- It is consistent with other charging and income assessment policies locally.

Charging Policy Summary

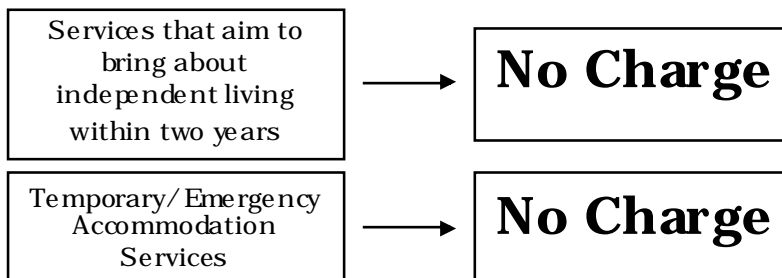
Long Term services to include: -

- Sheltered Housing for the elderly.
- Extra Care Housing.
- Permanent/Long term supported housing.



Short Term/Emergency services to include: -

- Women's refuges.
- Homeless hostels.
- Temporary Probation accommodation.
- Temporary accommodation for young persons.
- Short term (less than two years) floating support services.
- Hospital Discharge



Charges for Existing Service Users

Service users that pay

Service users that are not in receipt of housing benefit, but currently pay for support, will not have these charges increased from April 2003. (Other than in-line with inflation)

Sheltered Housing and Extra Care Facilities.

Existing Tenants

- ODPM recommends that authorities freeze support charges for this group of tenants. There is no intention to increase the support charges for this group without consultation with tenants at service review.

New tenants after April 2003

- This group of tenants will be liable to support charges that reflect the cost of the service. Providing these tenants are entitled to housing benefit, full or partial, they will receive the service for free. If this group is not pass-ported through housing benefit, they have the option to partake in the 'fairer charging' financial assessment/means test.

Financial Assessment

- One financial Assessment will be carried out to cover both support charges and home/personal care charges. The assessment will include: -
 - Questions on the type of services the tenant uses.
 - Capital and income details.
 - Extra costs of disabilities.
 - Housing costs.
 - Authorisation for the sharing of information between relevant agencies.

Ability to pay will be reassessed annually, or when there is a substantial change in financial circumstances.

Effect on user income Levels

Users claiming Income Support or Job Seekers allowance or invalidity Benefit, will be exempt from charging.

Those who will need a 'fairer charging' assessment and are not covered by other exemptions can be assured that the council will not: -

- Reduce the users net income below the basic level of Income support plus 25%.
- Result in the user being left without the means to pay for any other necessary care or support or for other cost arising from their disability.
- Earnings will not be taken into account.

Change of circumstances

Service users and their providers will be required to inform appropriate agencies of any change in circumstances e.g. terminations, lettings or changes in the service received. They will be liable for failure to do so.

Services, which are not charged for

After-care services provided under section 117 of the mental health act 1983 may not be charged for under section 17 of the HASSASSA Act 1983.

Providing advice about the availability of services for assessment. Sufferers of Creutzfeldt Jacobs Disease (CJD) will not be charged under this policy.

Roles and responsibilities

The Supporting People (SP) Team will: -

- Advise providers whether services are 'chargeable' or 'exempt' in line with the interim contract establishment process.
- Be responsible for overseeing the applications process and ensure that correct authorisations for the user are in place.
- Liase with housing benefit to agree a process for the exchange of information.
- Ensure that the user is aware that notification of change of circumstances is their responsibility.
- Send notifications of subsidy to: -
 - The user.
 - The provider.
 - The payments section.
- Ensure that payments processes are in place for the subsidy.
- Action information received from Housing Benefit.
- Action Information received from Fairer Charging.
- Action information received from users.
- Ensure any 'changes' are notified to relevant parties.

Fairer Charging (FC) Section will: -

- Carry out the financial assessment under the agreed policy and notify the SP team of the outcome.
- If necessary delegate to providers to carry out the assessment
- Employ additional staff with a financial contribution from the SP implementation grant – under review.

Housing Benefit (HB) section will: -

- Process HB applications and informing individuals of the outcome.
- Pay HB to either the claimant or their Landlord.
- Inform SP team of awards via completing section two of the Information-Sharing form.

Users will: -

- Enter into an agreement with the provider to pay for the support charges.
- Provide written authorisation for information exchange between relevant sections via the information-Sharing form that the user must send to the Revenues and Benefits Department.
- Be aware that if this is not done, the user is responsible for providing this information to the SP Team.
- Apply for fairer charging assessments where applicable.
- Inform the Fairer-Charging section of any change in financial circumstances.

N.B. If a user refuses to provide sufficient information for a financial assessment, it may be reasonable to require payment of a full charge.

Providers (both Local Authority (LA) and external) will: -

- Ensure that users enter into an agreement to pay the support charge.
- Check these agreements are linked to tenancies.
- Where no landlord/tenant relationship exists, draft an agreement that establishes an enforceable obligation to pay for any support charges due.
- In LA schemes where all charges were previously pooled, changes will be made to charge new tenants – unless pass ported.
- Provide and assist users with relevant application documentation and information.
- Ensure their housing management systems are adept for payments.
- Collect support charges and take the responsibility of the attached risks.

Maximum Charge

Subject to consultation.

Treatment of Disability Related Benefits/War Pensions

- Law prevents the mobility component of Disability Living Allowance (DLA) to be taken into account when carrying out financial assessments. Councils should disregard the War Pensioner's Mobility supplement when assessing income, and this should be treated as analogous to DLA mobility component.
- Disregards apply to War Widows Pensions and to War Widows supplementary Pensions.
- The following benefits may be taken into account: -
 - The Severe Disability (SPD) premium of Income Support.
 - Attendance allowance (AA).
 - Disability Living Allowance (DLA).
 - Constant Attendance Allowance (CAA).
 - Exceptionally Severe Disablement Allowance (ESDA).

To include the above benefits is at the council's discretion, but it should not -

- Reduce the users net income below the basic level of Income support plus 25%.
- Result in the user being left without the means to pay for any other necessary care or support or for other cost arising from their disability.

This aim is best achieved through charge assessments, which assess both the resources and expenditure of the user – expenditure should include any disability-related expenditure. Councils are expected to assess disability-related expenditure specifically for all users whose disability-related benefits are taken into account as income. Councils should also consider and specifically consult users on any need to do this for other users, who may have disability related expenditure.

Benefits Advice

It is proposed that the Providers of the service and other benefit agencies will provide the benefits advice. Subject to consultation.

Some users may prefer to obtain welfare rights advice from an independent source and users should be offered this choice where possible. Where independent advice is accessed, arrangements should be made to exchange information for the charge assessment, with the user's permission.

Savings and capital

- Savings will be taken into account to calculate the tariff income, as set out in the Charges for Residential Accommodation Guidance (CRAG). The upper savings limit will be £19,500 from April 2003.
- The value of the main residence occupied by the user should not be taken into account for charges.
- Consistence with the guidance in CRAG, ex gratia payments made to former Far Eastern prisoners of war and payments made under the Vaccine Damage Payment scheme should be disregarded entirely
- Provision should be made for charges to be reviewed at regular intervals, where saving are being used up by charges.

Appeals Process

Section 17 (3) of the HASSASSA Act 1983 gives a user the right to ask the council for a review of the charge which has been assessed, if the user considers the he/she cannot afford to pay it. Under the legislation, the council must be satisfied that the user's means are insufficient to pay the amount they would otherwise be charged, before deciding to reduce or waive the charge

Charges will come into effect from the date of the commencement of services, provided the user has been informed of the changes by that date. If the financial assessment is delayed to allow the service user's family to attest, the charge may come into effect seven days after commencement of service.

If the service user does not agree with the assessment of their charges, they may request a rapid review by a senior officer not involved in the original assessment.

If the service user is not satisfied with any aspect of the financial assessment process, they may make a complaint under the departmental complaints procedure.

In the event that the charges are not paid the debt may be pursued as a debt, but services will not be withdrawn.

Work incentives

Hartlepool's policy is to encourage and enable those who want to work, including disabled people and their carers, to do so. This policy shall avoid creative disincentives to work.

Consultation

Consultation with users and carers about charging policies and increases in charges should follow good practice advice, for example, **The National Consumer Council's: *Involving Users: Improving the Delivery of Local Public Services***. Consultation is one of the main principles, which should guide council's **Best Value** Reviews of local services. Where changes in charging policies would result in significant increases in charge for some users, this should be specifically explained and considered as part of the consultation.

Partner's income and savings

Partner's income and savings will not be taken into account.

Setting the level of charges

Clear information about charges and how they are assessed should be readily available for user and carers from Social Services fairer-Charging Designated Officers. Only information concerning the individual or the carer's subject will be made available.

Assessments and access to support

Assessments of a person's need for support should not be confused with a person's ability to pay. Once a person has been assessed as needing a service, it should not be withdrawn even if the user refuses to pay. The service should continue to be provided, whilst perusing the debt.

Financial Implications

Subject to consultation

Basic income support levels – April 2000 and April 2001 rates

A. Pensioners, single

Pensioner aged 60+, single

	April 2001
IS Personal allowance	£53.05
Pensioner Premium	£39.10
BASIC IS LEVEL	£92.15

B. Pensioners, couples

Pensioner aged 60+, couple

	April 2001
IS Personal allowance	£83.25
Pensioner Premium	£57.30
BASIC IS LEVEL	£140.55

C. Disabled, adults

Aged 25-59

	April 2001
IS Personal allowance	£53.05
Disability Premium	£22.60
Enhanced Disability Premium	£11.05
BASIC IS LEVEL	£86.70

D. Disabled, adults

Aged 18-24

	April 2001
IS Personal allowance	£42.00
Disability Premium	£22.60
Enhanced Disability Premium	£11.05
BASIC IS LEVEL	£75.65

E. Disabled adults, couples

Aged 18+

	April 2001
IS Personal allowance	£83.05
Disability Premium	£32.25
Enhanced Disability Premium	£16.00
BASIC IS LEVEL	£131.30

F. Carers, single

Over 25 and under 60

	April 2001
IS Personal allowance	£53.05
Disability Premium	£24.40
Enhanced Disability Premium	£16.00
BASIC IS LEVEL	£77.45

Scenarios of assessments.

1. Single Person aged 66, no disability-related benefits or expenditure

Income Support only	Occupational Pensioner	Occupational Pensioner, higher income
Income support personal allowance £53.05 + pensioner premium £39.10 Assessable income £92.15	Basic state pension £72.50 + occupational pension £100 Assessable income £172.50	Basic State Pension £72.50 + occupational pension £400.00 + savings £15,000, tariff = £20 weekly Assessable income £492.50
Deduct (£92.15+25%)= £115.19	Deduct (£92.15+25%)= £115.19 Deduct:- Rent/Housing £40.00 Council tax £13.00 Total Deductions £168.19	Deduct (£92.15+25%)= £115.19 Deduct:- Rent/Housing Nil Council tax £13.00 Total Deductions £128.19
Assessable income remaining = zero No charge	Assessable income remaining = £4.31 To be assessed	Assessable income remaining = £364.31 To be assessed

2. Single Person aged 66, disability-related benefits and £25.00 disability- related expenditure

Income Support only	Occupational Pensioner	Occupational Pensioner, higher income
Income support personal allowance £53.05 + pensioner premium £39.10 + severe disability premium £41.55 + AA £37.00 Assessable income <u>£170.70</u>	Basic state pension £72.50 + occupational pension £100 + AA £37.00 Assessable income <u>£209.50</u>	Basic State Pension £72.50 + occupational pension £400.00 + savings £15,000, tariff = £20 weekly Assessable income <u>£529.50</u>
Deduct (£92.15+25%)= <u>£115.19</u> Deduct:- Rent/Housing Nil Council tax Nil Disability related £25.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Total Deductions <u>£140.19</u>	Deduct (£92.15+25%)= <u>£115.19</u> Deduct:- Rent/Housing £40.00 Council tax £13.00 Disability related £25.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Total Deductions <u>£193.19</u>	Deduct (£92.15+25%)= <u>£115.19</u> Deduct:- Rent/Housing Nil Council tax £13.00 Disability related £25.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Total Deductions <u>£153.19</u>
Assessable income remaining = <u>£30.51</u> To be assessed	Assessable income remaining = <u>£16.31</u> To be assessed	Assessable income remaining = <u>£376.31</u> To be assessed

3. Couple aged 66 and 63, disability-related benefits for user and £40.00 disability-related expenditure – user assessed as individual

Income Support only	Occupational Pensioner	Occupational Pensioner, higher income
Income support personal allowance £53.05 + pensioner premium £39.10 + AA £37.00 Assessable income <u>£129.15</u>	Basic state pension £72.50 + occupational pension £100 + AA £37.00 Assessable income <u>£209.50</u>	Basic State Pension £72.50 + occupational pension £400.00 + savings £15,000, tariff = £20 weekly Assessable income <u>£529.50</u>
Deduct (£92.15+25%)= <u>£115.19</u> Deduct- Rent/Housing Nil Council tax Nil Disability related £40.00 Additional care services £12.50 Dietary £2.50 Extra Heating £2.80 Cleaner £4.40 Gardening Services £5.00 Alarm system £3.50 Loan for wheelchair and adaptations to vehicle £9.30 Total Deductions <u>£155.19</u>	Deduct (£92.15+25%)= <u>£115.19</u> Deduct:- Rent/Housing £20.00 (half) Council tax £6.50 (half) Disability related £40.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Additional care services £12.50 Dietary £2.50 Extra Heating £2.80 Cleaner £4.40 Gardening Services £5.00 Alarm system £3.50 Loan for wheelchair and adaptations to vehicle £9.30 Total Deductions <u>£181.69</u>	Deduct (£92.15+25%)= <u>£115.19</u> Deduct:- Rent/Housing Nil Council tax £6.50 (half) Disability related £40.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Additional care services £12.50 Dietary £2.50 Extra Heating £2.80 Cleaner £4.40 Gardening Services £5.00 Alarm system £3.50 Loan for wheelchair and adaptations to vehicle £9.30 Total Deductions <u>£161.69</u>
Assessable income remaining = Zero	Assessable income remaining = <u>£27.81</u>	Assessable income remaining = <u>£367.81</u>

No charge due	To be assessed	To be assessed
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4. Single person aged 54, with exempted earnings, with Disability related benefits and £40 disability-related expenditure

Income Support only	Occupational Pensioner	Occupational Pensioner, higher income
Earnings £130.00 + DLA £37.00 Assessable income £37.00	Earnings £170.00 + DLA £37.00 + savings £15,000 tariff £20.00 weekly Assessable income £57.00	Earnings £470.00 + DLA £37.00 + savings £15,000 tariff £20.00 weekly Assessable income £57.00
Deduct (£86.70+25%)= £108.38 Deduct:- Rent/Housing £15.00 Council tax £5.00 Disability related £40.00 Additional care services £12.50 Dietary £2.50 Extra Heating £2.80 Cleaner £4.40 Gardening Services £5.00 Alarm system £3.50 Loan for wheelchair and adaptations to vehicle £9.30 Total Deductions £168.38	Deduct (£86.70+25%)= £108.38 Deduct:- Rent/Housing £40.00 Council tax £13.00 Disability related £40.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Additional care services £12.50 Dietary £2.50 Extra Heating £2.80 Cleaner £4.40 Gardening Services £5.00 Alarm system £3.50 Loan for wheelchair and adaptations to vehicle £9.30 Total Deductions £201.38	Deduct (£86.70+25%)= £108.38 Deduct:- Rent/Housing £40.00 Council tax £13.00 Disability related £40.00 Dietary £6.00 Extra Heating £7.00 Cleaner £7.00 Gardening Services £5.00 Additional care services £12.50 Dietary £2.50 Extra Heating £2.80 Cleaner £4.40 Gardening Services £5.00 Alarm system £3.50 Loan for wheelchair and adaptations to vehicle £9.30 Total Deductions £201.38
Assessable income remaining = Zero No charge due	Assessable income remaining = Zero No charge due	Assessable income remaining = Zero No charge due

5. Disabled Adults, Single

Aged 18-24	Aged 25-59
Income support personal allowance £42.00 + Disability Premium £22.60 Enhanced disability premium £11.05 Assessable income <u>£75.65</u>	Income support personal allowance £53.05 + Disability Premium £22.60 Enhanced disability premium £11.05 Assessable income <u>£86.70</u>
Deduct ($£75.65 + 25\%$) = <u>£94.56</u>	Deduct ($£86.70 + 25\%$) = <u>£108.38</u>
Assessable income remaining = Zero No charge due	Assessable income remaining = Zero No charge due

6. Disabled Adults, Couples

Aged 18+
Income support personal allowance £83.05 + Disability Premium £32.25 Enhanced disability premium £16.00
Assessable income £131.30
Deduct (£131.30+25%)= £164.13
Assessable income remaining = Zero No charge due

This Charging Policy is currently under review. This policy will remain in place and active until the revised policy is issued after completion of the review period.

The new policy will be available from September 2006. Any changes to the policy will be effective from the start of the following month of completion, which would be October 2006 with a September Policy completion date.

CABINET REPORT

29th August 2006



Report of: The Head of Community Strategy

Subject: SCRUTINY PARTNERSHIPS ENQUIRY ACTION PLAN

SUMMARY

1. PURPOSE OF REPORT

1.1 To agree an Action Plan in response to the findings of the Regeneration and Planning Services Scrutiny Forum investigation into Partnership working in the Local Authority.

2. SUMMARY OF CONTENTS

2.1 The report provides brief background information on the Partnerships Investigation and provides an Action-Plan in response to the Forum's recommendations in Appendix 1.

3. RELEVANCE TO CABINET

3.1 At its meeting of 15th May Cabinet agreed the Forum's recommendations.

4. TYPE OF DECISION

4.1 Non-Key

5. DECISION MAKING ROUTE

5.1 Progress on the Action Plan's implementation will be given to Regeneration & Planning Services Scrutiny Forum on 29th September 2006.

6. DECISION REQUIRED

6.1 That Members of the Cabinet approve the Action Plan attached at Appendix 1 in response to the recommendations of the Regeneration & Planning Services Scrutiny Forum's Partnerships Enquiry.

Report of: The Head of Community Strategy

Subject: SCRUTINY PARTNERSHIPS ENQUIRY ACTION PLAN

1. PURPOSE OF REPORT

1. To agree an Action Plan in response to the findings of the Regeneration and Planning Services Scrutiny Forum investigation into Partnership working in the Local Authority.

2. BACKGROUND

1. In May 2006 Regeneration and Planning Services Scrutiny Forum concluded its inquiry into Partnership working. The aim of the investigation was to assess the governance arrangements surrounding sub-regional and local partnerships on which Hartlepool Borough Council was represented.
2. Over the course of the investigation Members employed a variety of methods, which included:
 - Detailed Officer reports supplemented by verbal evidence;
 - Detailed presentations from external partners, including from Hartlepool Community Network, Tees Valley Regeneration, Tees Valley Partnership and Tees Valley Living;
 - Presentation and verbal evidence from the Chair of the Hartlepool Partnership, the town's MP;
 - Verbal evidence from the Mayor;
 - Verbal evidence from Councillors serving on Partnerships; and
 - Verbal evidence from Community Network Representatives.
3. On 15th May, Cabinet received the Forum's final report and approved and supported the associated recommendations.

3. ACTION PLAN

1. In addition to the mapping of partnership working and raising awareness, the Forum made the following recommendations:
 - (a) That the Council seeks to strengthen the feedback mechanisms (to the Local Authority) for its representatives on the Regional Assembly and that substitute arrangements for those representatives should be clarified;
 - (b) That the Council seeks clarification from the RDA around the selection process for representatives on this body;
 - (c) That the Council produces further information about the LAA process for a wider audience, and that this should incorporate summary sheets and diagrams;
 - (d) That Scrutiny continues to be involved in the LAA process, and that in the next round of negotiations all Scrutiny Fora are involved at the formative stage;
 - (e) That increased levels of community and voluntary sector representation be examined on the Lifelong Learning Partnership and the Children and Young People Partnership, including the Executive.
 - (f) That the levels of voluntary sector representation be increased on the Tees Valley Partnership and also direct Local Strategic Partnership representation on the TVP. In addition, the Town's MP and Mayor should be invited to support the strengthening of the representation on the TVP.
 - (g) That an appropriate measure be put in place for the election of voluntary representatives on the Tees Valley Partnership through the Voluntary Sector Forum.
 - (h) That the need for infrastructural organisation offering support to the wider VCS be recognised by the Council and be appropriately funded.
 - (i) That discussions are held with the Mayor, the MP and Council to support the issue of voluntary representation on the thematic partnerships.
 - (j) That Scrutiny's involvement in the on-going review of the Community Strategy be strengthened across all Scrutiny Fora.
 - (k) That Elected Member involvement in Thematic and other partnerships be recommended.
 - (l) That roles and responsibilities for ALL members of Theme Partnerships be encouraged as part of good practice.

- (m) That an annual review of both the levels of community representation and the compact be reviewed as part of the Best Value Performance Review.
 - (n) That the Council emphasises the importance of continued partnership working, and supports co-terminus arrangements between the Council, Police and PCT.
 - (o) The level of officer time committed to partnerships be examined in order to ensure it is tailored to the appropriate requirements.
 - (p) That the attendance records of all Members on partnerships be produced as a public document.
 - (q) That in relation to communication and information dissemination an internal and external communication protocol should be developed. In this respect the Forum welcomed the development of a 'Tool Kit' for resident's use as part of the review of the Community Strategy.
 - (r) That a section be included in the State of the Borough Debate to feedback the work and success of the Hartlepool Partnership and the Theme Partnerships.
 - (s) That where possible Councillors attending events across the town take the opportunity to feedback the work and success of the partnerships they are involved in.
 - (t) That informal (quarterly) meetings are arranged to enable elected representatives sitting on Partnerships to feedback on their involvement in these partnerships to other Elected Members and resident representatives.
 - (u) That the development of a 'map' outlining how the Council's departments, political structures, LSP and Theme Partnerships are aligned be explored.
 - (v) Members recommend that a summary of this report be produced as a guide to partnership working. In addition, the guide should be produced in an accessible format for circulation to a wider audience, with the PR office.
 - (w) That the Cabinet produce an Action-Plan in response to these recommendations detailing both timescales for action if approved and responsible officers. In addition the Forum recommends that Cabinet report back to the Forum within 3-6 months of receipt.
2. An Action-Plan in response to these recommendations has now been produced and is attached at **Appendix 1**.

4. RECOMMENDATION

1. Cabinet is requested to approve the Action Plan attached at **Appendix 1** in response to the recommendations of the Regeneration & Planning Services Scrutiny Forum's Partnerships Enquiry.

PARTNERSHIPS ENQUIRY ACTION PLAN

APPENDIX 1

NAME OF FORUM: Regeneration & Planning Services Scrutiny Forum

NAME OF SCRUTINY ENQUIRY: Partnerships Enquiry

DECISION MAKING DATE OF FINAL REPORT: Cabinet on 15 May 2006

DISCUSSION ON DRAFT ACTION PLAN: Informal Cabinet 14th August 2006

DECISION ON ACTION PLAN: Cabinet 29th August 2006

PRESENTATION TO SCRUTINY FORUM: 29th September 2006

	RECOMMENDATION	PROPOSED ACTION	LEAD OFFICER	DELIVERY TIMESCALE	FINANCIAL / RESOURCE IMPLICATIONS
(a)	<p>That the Council seeks to strengthen the feedback mechanisms (to the Local Authority) for its representatives on the Regional Assembly and</p> <p>(Direct link with recommendation (s))</p> <p>that substitute arrangements for those representatives should be clarified.</p>	<p>The Constitution Working Group should consider establishing feedback mechanisms from its representatives on Partnerships to Council.</p> <p>Contact the Regional Assembly and clarify substitute arrangements.</p>	<p>Tony Brown Constitution Working Group</p> <p>Angela Hunter Democratic Services</p>	<p>December 2006</p> <p>September 2006</p>	<p>Work programme of Constitution Working Group. Officer time to support group.</p> <p>No significant additional resource requirements</p>

	RECOMMENDATION	PROPOSED ACTION	LEAD OFFICER	DELIVERY TIMESCALE	FINANCIAL / RESOURCE IMPLICATIONS
(b)	That the Council seeks clarification from the RDA around the selection process for representatives on this body.	The Mayor to write to the RDA to request this information	Paul Walker	September 2006	No significant additional resource requirements
(c)	That the Council produces further information about the LAA process for a wider audience, and that this should incorporate summary sheets and diagrams.	Produced a LAA information sheet	Joanne Smithson Regeneration & Planning Services	October 2006	Officer time to prepare summary sheet. Photocopying /distribution costs
(d)	That Scrutiny continues to be involved in the LAA process, and that in the next round of negotiations all Scrutiny Fora are involved at the formative stage.	None – note for negotiation of new LAA in 2008 for implementation in 2009/10	Joanne Smithson Regeneration & Planning Services	-	-
(e)	That increased levels of community and voluntary sector representation be examined on the Lifelong Learning Partnership and the Children and Young People Partnership, including the Executive.	Review Community and Voluntary Sector representation on the Children's Trust Review community and voluntary sector representation on new Partnership structures for Lifelong Learning	Adrienne Simcock Children's Services Support from Peter Scott, Regeneration & Planning Services and Adult & Community Services.	April 2007	Officer time to review arrangements and consult on options.
(f)	That the levels of voluntary sector representation be increased on the Tees Valley Partnership and also direct Local Strategic Partnership representation on the TVP. In addition, the Town's MP and Mayor should be invited to support the strengthening of the representation on the TVP.	May or to write to the Tees Valley Partnership requesting update on voluntary sector representation in new proposed structures. MP to write to the Tees Valley Partnership requesting update on voluntary sector representation in new proposed structures	Paul Walker Joanne Smithson Regeneration & Planning Services	September 2006 September 2006	No significant additional resource requirements

RECOMMENDATION	PROPOSED ACTION	LEAD OFFICER	DELIVERY TIMESCALE	FINANCIAL / RESOURCE IMPLICATIONS
(g) That an appropriate measure be put in place for the election of voluntary representatives on the Tees Valley Partnership through the Voluntary Sector Forum.	Head of Adult & Community Services to write to enquire as to current arrangements	Nicola Bailey Adult & Community Services	September 2006	No significant additional resource requirements
(h) That the need for infrastructure organisation offering support to the wider VCS be recognised by the Council and be appropriately funded.	Continue to support the NE Centre of Excellence funded Building Links Programme. Review the funding of infrastructure organisations by the Community Pool as part of COMPACT re-launch	Nicola Bailey Adult & Community Services Geoff Thompson Regeneration & Planning Services	March 2007	Funding from the NE Centre of Excellence secured to March 07
(i) That discussions are held with the Mayor, the MP and Council to support the issue of voluntary representation on the thematic partnerships.	Hold meeting to discuss the issue of voluntary representation on the thematic partnerships	Joanne Smithson Regeneration & Planning Services	Schedule meeting for October 2006	No additional resource implications
(j) That Scrutiny's involvement in the ongoing review of the Community Strategy be strengthened across all Scrutiny Fora.	Scrutiny Co-ordinating committee to review 1 st draft and final draft of the Community Strategy	Joanne Smithson Regeneration & Planning Services	September 2006 February 2007	Officer time to support process
(k) That Elected Member involvement in Thematic and other partnerships be recommended.	To be considered following publication of the Local Government White Paper and revised guidance on the role of LSPs due in Autumn	Joanne Smithson Regeneration & Planning Services	Unable to be set	Unable to determine at this point
(l) That roles and responsibilities for <u>ALL</u> members of Theme Partnerships be encouraged as part of good practice.	Prepare a Hartlepool Partnership good governance guide that incorporates this recommendation	Joanne Smithson Regeneration & Planning Services	October 2006	Officer time to prepare guidance, review good practice, liaise with individual Theme Partnerships.

RECOMMENDATION	PROPOSED ACTION	LEAD OFFICER	DELIVERY TIMESCALE	FINANCIAL / RESOURCE IMPLICATIONS
(m) That an annual review of both the levels of community representation and the compact be reviewed as part of the Best Value Performance Review.	Collate information on the level of community representation on Theme Partnerships annually Initiate a re-launch of the COMPACT as set out in the Strengthening Communities Best Value Review Strategic Improvement Plan	Joanne Smithson Regeneration & Planning Services Geoff Thompson Regeneration & Planning Services	April 2007 October 2006	Officer time to prepare proforma, issue to Theme Partnerships, analyse results. A review of the COMPACT will require additional resources including staff time and identification of a budget to support community and voluntary sector engagement
(n) That the Council emphasises the importance of continued partnership working, and supports co-terminus arrangements between the Council, Police and PCT.	No further actions proposed			
(o) The level of officer time committed to partnerships be examined in order to ensure it is tailored to the appropriate requirements.	CMT review officer time committed to partnerships	Chief Executive / CMT	March 2007	CMT time to carry out review
(p) That the attendance records of all Members i.e. Councillors on partnerships be produced as a public document.	Constitution Working Group examine the feasibility of this recommendation	Tony Brown Constitution Working Group / Democratic Services	April 2006	Working group members time and officer support
(q) That in relation to communication and information dissemination an internal and external communication protocol should be developed. In this respect the Forum welcomed the development of a 'Tool Kit' for resident's use as part of the review of the Community Strategy.	No further actions proposed as Hartlepool Partnership Communications Strategy agreed and Community Strategy Toolkit produced			

RECOMMENDATION		PROPOSED ACTION	LEAD OFFICER	DELIVERY TIMESCALE	FINANCIAL / RESOURCE IMPLICATIONS
(r)	That a section be included in the State of the Borough Debate to feedback the work and success of the Hartlepool Partnership and the Theme Partnerships.	The Mayor to include a section on the work and success of the Hartlepool Partnership and the Theme Partnerships in his State of the Borough presentation.	Joanne Smithson Regeneration & Planning Services	Autumn 2006	Officer time to collate required information
(s)	That where possible Councilors attending events across the town take the opportunity to feedback the work and success of the partnerships they are involved in.	No further actions in addition to action identified at recommendation (a)	Tony Brown Constitution Working Group	December 2006	Working group members time and officer support
(t)	That informal (quarterly) meetings are arranged to enable elected representatives sitting on Partnerships to feedback on their involvement in these partnerships to other Elected Members and resident representatives.	Constitution Working Group examine the feasibility of this recommendation	Tony Brown Constitution Working Group	December 2006	Working group members time and officer support
(u)	That the development of a 'map' outlining how the Council's departments, political structures, LSP and Theme Partnerships are aligned be explored.	Ensure recommendations are included in conclusions of Governance Review	Peter Scott Regeneration & Planning Services	December 2006	Significant Officer time to review implications of White Paper and set out proposed response
(v)	Members recommend that a summary of this report be produced as a guide to partnership working. In addition, the guide should be produced in an accessible format for circulation to a wider audience, with the PR office.	Produce a guide to partnership working.	Joanne Smithson Regeneration & Planning Services with input from Scrutiny Support and Public Relations	April 2007	Staff time to collate information, prepare, draft and produce. Publishing and distribution costs
(w)	That the Cabinet produce an Action-Plan in response to these recommendations detailing both timescales for action if approved and responsible officers. In addition the Forum recommends that Cabinet report back to the Forum within 3-6 months of receipt.	Action Plan to Scrutiny Forum on 29 September Update on Plan implementation to be presented in March 07	Joanne Smithson Regeneration & Planning Services	Action Plan to Scrutiny Forum on 29 September 2006 Update on Plan implementation to be presented in March 2007	