Agenda No

AGENDA MANAGEMENT SHEET

Name of Committee	Adult & Community S Scrutiny Committee	Services Overview &
Date of Committee	10 January 2006	
Report Title	Supporting People	
Summary	Inspection of the Suppor	on the Audit Commission ting People Programme in s a copy of an Action Plan o date.
For further information please contact:	Rosie James Service Manager – Supporting People Tel: 01926 476849 rosiejames@warwickshire.gov.uk	John Bull Head of Adult Services Tel: 01926 412438 johnbull@warwickshire.gov.uk
Would the recommended decision be contrary to the Budget and Policy Framework? [please identify relevant plan/budget provision]	No	
Background papers	Audit Commission Inspect People Programme in War	ion report of the Supporting wickshire.
	Report to Cabinet on 13 th Commission Inspection	January 2005 on the Audit
	Report to Council on 21st .	July 2005.
CONSULTATION ALREADY U	INDERTAKEN:- Details	to be specified
Other Committees	Supporting People Co Supporting People Par	0
Local Member(s)		
Other Elected Members		
Cabinet Member		ult Services Portfolio Holder
Other Cabinet Member consulted		



Chief Executive		
Legal	X	Jane Pollard, Legal Services
Finance	X	Martin Jones, Head of Resources Management
Other Chief Officers		
District Councils		
Health Authority	X	Primary Care Trusts
Police		
Other Bodies/Individuals		
FINAL DECISION No		
SUGGESTED NEXT STEPS:		Details to be specified
Further consideration by this Committee		
To Council		
To Cabinet	X	02.02.06
To an O & S Committee		
To an Area Committee		
Further Consultation		



Adult & Community Services Overview & Scrutiny Committee – 10 January 2006

Supporting People

Report of the Interim Director of Adult Social Services

Recommendation

Members are asked to consider the progress and endorse the actions taken to prepare for the next Supporting People Audit commission Inspection, expected to commence week beginning 27 March 2006.

1. Introduction

1.1 This progress report on the Audit Commission Inspection of Supporting People indicates progress made by the Supporting People Team and partners to address recommendations to improve the Programme in Warwickshire.

2. Background

- 2.1 The Warwickshire Supporting People (SP) Programme was inspected by the Audit Commission in September 2004 and their report was published in January 2005.
- 2.2 The two judgements at that time were "poor" with "uncertain prospects for improvement".
- 2.3 The recommendations for improvement focussed upon a number of areas:
 - service users
 - service reviews
 - strategy development
 - governance arrangements
 - corporate mainstreaming of SP

3. Progress to Date

3.1 The Action Plan (Appendix 1) from the Audit Commission Inspection was merged with the Action Plan arising from the Supporting People Five Year Strategy, as there was duplication in some of the tasks. This also makes for ease of reporting and monitoring of progress being made.



3.2 The agreed Action Plan is monitored and reviewed on a quarterly basis by the Supporting People Partnership Board and the Commissioning Body. There has been significant improvement to date in many areas. These include:

3.2.1 Service Reviews

We are on target to complete reviews of all Supporting People funded services by the end of March 2006 (ODPM deadline). It can be evidenced that there have been improvements to services and outcomes to service users through this review process. On the whole, providers have found this a challenging but useful process. Feedback from providers includes the following comments:

"We will now work to build on the work that has been achieved and thank you for your assistance. In particular, we would like to thank the Supporting People Officers for the very professional, constructive and helpful way in which they carried out the review, and for the ongoing assistance which is provided. It is much appreciated".

"The report and action plan is by far the most detailed (and therefore most helpful) of any we have received from other authorities. Thanks once again".

"Thank you for making the review process for our staff and residents an enjoyable one".

"Thanking you once again for being approachable and making all the team feel at ease on your recent review visit".

"Just a quick thank you from me and the wardens who were at the meeting on Friday – we found your visit very helpful and reassuring. Thank you for giving your time".

There have been efficiency savings made from the review process. These savings are expected to be approximately £425,000 in 2005/06 (see also paragraph 3.2.6)

3.2.2 <u>Strategy Development</u>

The Supporting People Five Year Strategy was submitted to the ODPM on time (March 2005) and all partners signed up to it. Feedback was received on the strategy from ODPM with only two areas of weakness. We were able to address these and re-submit.

3.2.3 Service Users

Service users are actively involved with the review programme and their views are taken into account. Work is currently ongoing to involve them within the wider Supporting People agenda. Two examples are:

 SP attending the Customer First Steering Group to discuss SP and what it means for service users



 A User Group for SP has been set-up. Two meetings were held in November 2005 in the north and south of county. The outcome of these is that there is likely to be one group for the county which will act as a reference group, help to produce SP literature and assist, where appropriate, in reviews of similar services to their own.

3.2.4 Governance Arrangements

The Commissioning Body is responsible for the implementation and monitoring of the Programme. All Terms of Reference for the governing groups were reviewed in January 2005 following the Inspection. The intention was to establish the appropriate level of seniority for the Commissioning Body representatives.

Key areas of work are reported to the Supporting People Partnership Board and Commissioning Body on a regular basis and these are challenged where appropriate.

Some representatives on the Supporting People Partnership Board changed in May 2005, including the Chair. There will be a meeting on 20th January 2006 involving the Chair of the Partnership Board plus the Board representative from the Probation Service, the Accountable Officer for SP, the Chair of the Commissioning Body plus the SP Service Manager to revisit the Terms of Reference for both groups to ensure that this Board has a true scrutiny role.

- 3.2.5 The Inspectors also expected to see that Supporting People (SP) was corporately mainstreamed and that there was no 'silo' working. They concluded that there was little mainstreaming of the SP programme and made recommendations about this. There have been some improvements, for example:
 - a greater understanding of Supporting People in Social Services through training programmes
 - the integration of the Extra Care housing agenda into Supporting People
 - sharing of good practice e.g. Social Services' Commissioning Unit utilising some of the Supporting People review and monitoring framework when developing new contracting processes

3.2.6 Commissioning of New Services

From the £425,000 savings made through the Value for Money methodology when reviewing services, the Commissioning Body has agreed to use £200,000 of this to fund new floating support services. The bids have been shortlisted and prioritised and the Commissioning Body considered them at their meeting on 2nd December 2005. The outcome is that they have agreed in principle to fund four floating support services for learning disabilities, drug and alcohol misuse and young people at risk. The total of these services amount to approximately £250,000.



4. The Next Audit Commission Inspection of Supporting People

- 4.1 All Authorities who received a *poor* rating are re-inspected within eighteen months. The next on site inspection for Warwickshire will commence week beginning 27th March 2006. Approximately 12 weeks before, we are contacted to start the process.
- 4.2.1 This next inspection is a 'full' inspection, not a follow-up on the last. The Audit Commission are now using revised Key Lines of Enquiry (KLOE) which has raised the standard from the previous KLOE. There are 51 key lines and examples are given against each of what an excellent and fair Programme will deliver. When assessing Warwickshire against these we obtain 5 excellent; 19 between fair and excellent; 24 fair and 3 below fair. As a matter of course the Audit Commission will need to evidence these and use their 'triangulation' methodology.

However work is underway to address these three areas and it is anticipated that we can evidence improvement before the next Inspection.

- 4.3 Partners, stakeholders and service users will be interviewed in order to gain evidence for the inspection. During the last inspection, key people whom the Inspectors asked to interview included: Warwickshire County Council's Chief Executive; Members, including those of the District & Borough Councils; Chief Executives of the Primary Care Trusts; Probation Service; Housing Benefit Managers; Heads of Housing; the Director of Social Care & Health; the Head of Adult Services; plus other Warwickshire County Council Senior Managers. The inspection is very wide ranging.
- 4.4 Supporting People has been preparing for this inspection for some months but has had limited support from both the Audit Commission and ODPM in monitoring progress of our Action Plan, even though we have pressed for this.

5. Areas of Concern

5.1 SP Action Plan

Whilst there have been significant improvements within the Programme there are still areas where there are concerns about the pace of change expected by the Audit Commission. The attached Action Plan identifies where progress has been made but also where there are work areas not completed.

These include:

• The report highlighted concerns that the Inspectors had about the place and profile of SP within the corporate agenda. Although officers are addressing this, for example, the funding of a financial post by the Treasurers Department within the team to ensure the SP Grant is monitored and used effectively, we need to develop further understanding of how housing-related support can feed into the wider preventative agenda across all departments. The modernisation of the Council offers the opportunity to achieve this.



- The Supporting People Partnership Board continues to meet and gives all Elected/Board Members the opportunity to steer and contribute on the strategic development of the Programme. In addition SP Officers have briefed some of the housing sub-groups of the Local Strategic Partnership, and have given presentations at consultation events involving Members which clearly link District/Borough housing and homeless strategies to the SP agenda.
- There continues to be some concern about input and partnership arrangements with the three PCT'. SP is commissioning work to look at the emerging health structures alongside the modernisation of the County Council in order to identify how this may work effectively in the future. Linked into this will be identification of where SP can help achieve targets within the Local Delivery Plans of the PCT's.
- 5.2 In 2003 Members agreed that Fairer Charging would not be implemented for SP, as the extra costs for funding it were not included in the SP Grant. However there is an expectation that it will be funded as it will assist in delivering services to people who live in their own home and to break the link between SP only being available to people in receipt of housing benefit. To that end work is progressing to implement Fairer Charging and a report will be going to the SP Commissioning Body in January 2006 to detail the work in progress and to agree an implementation date of 1st April 2006. However there will be a further report for Cabinet for approval for implementation. It is expected that money to fund Fairer Charging for Supporting People will be met from savings made within the SP Grant.

6. Conclusion

6.1 Overall there has been a major improvement to the Programme and this can be evidenced. However there remains concerns about a small number of aspects of the Programme and although significant progress has been made there needs to continue to be a high level of commitment by Senior Officers and Elected/Board Members within the County Council and District/Borough Councils and the Health Community to successfully implement the programme throughout the County.

MICHAEL HAKE Interim Director of Social Care (Adult Services)

Shire Hall Warwick 8 December 2005





Warwickshire Supporting People

Action Plan for Delivering Housing Related Support Services

2005 - 2010

Version 4 - 15/11/05

Please note – updates since last version shown in *bold italics*

 updates to progress indicators are shown in grey





LEGEND

Progress Indicators

To enable a quick assessment of progress on actions, an indicator is shown in the final column. This is shaded in, to represent progress with the task, in increments of 25%. Thus:



Nil or less than 25% progress



75% of action completed



25% of action completed



Task complete



50% of action completed

Tasks highlighted in red indicate unlikely to meet required timescales.

Abbreviations

AA Administering Authority

ASG Social Services Adult Services Group
AO Accountable Officer – John Bull
BCHS Better Care; Higher Standards

CB Commissioning Body
DAT Drug Action Team

DC's District & Borough Councils
DHF District Housing Forums
DoH Department of Health

OPSR Older People Strategic Review – Eve Buckland, Kate Woolley

PCT's Primary Care Trusts

SPPB Supporting People Partnership Board
SSD Warwickshire Social Services Department

SU Service Users VfM Value for Money

WASG Warwickshire Accommodation Strategy Group (CSDG)
WPT Warwickshire Providers Together (Supported Housing Forum)

Supporting People Team

ADO Admin Officer – Ruth Napoleoni

BAM Business & Administration Manager – Karen Symonds

IT Analyst – Rod Lee

SM Service Manager – Rosie James SPO Supporting People Officers

SRM Service Review Manager – Jill Mogg

1. GOVERNANCE, DECISION MAKING AND CONSULTATION

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
1.1	Review of the Terms of Reference and Memorandum of Understanding for SPPB, CB & WASG.	Review undertaken and Terms of Reference agreed. Review undertaken of membership of groups. CB members have delegated authority to make decisions.	That the SP Programme is fully understood and is effectively governed.	CB – June 2005, then every three years. AC – April 2005	Minutes of Meetings. Terms of Reference. Memorandum of Understanding.	СВ	CB SM SPPB WASG	Completed. This will be reviewed early 06.	
1.2	Ensure SP represented at District / Borough Forums, WPT and Client based strategic groups.	SP is strategically linked and feeds into relevant plans / strategies.	That the current and future needs of service users are well represented.	CB – June 2005	Strategic MAP of groups. Minutes of Meetings. SP Team Plan.	SM WASG	DHF SPO SRM WPT	This work is ongoing.	
1.3	Establish Core Strategy Development Group.	WASG established. Wider than SP to ensure strategic integration of relevant plans / strategies.	To ensure that accommodation strategies are linked and complimentary.	CB – April 2005	Terms of Reference. Minutes of Meetings.	CB SM SRM	SSD DAT DC's PCT's Probation	Completed.	
1.4	Review role of Accountable Officer and ensure it is fit for purpose.	To ensure that the role of AO is appropriate to the governance of SP.		AC – April 2005	Minutes of Meetings. Terms of Reference.	СВ	AO	AO no longer chairing CB. New role as per ODPM guidance.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
1.5	Establish ways to involve service users and carers.	Service users and carers fully involved with the SP Programme.	Service users and carers involved in needs mapping and planning of services. Service users improving current services.	CB – End 2005 and ongoing AC – July 2005	Map of groups. SP User Engagement Strategy. Meetings of service users / carers. User involvement in service reviews. Review action plans.	SM Customer First Team to organise reference groups.	CB DHF Service Users & Carers SRM SPO SSD Customer First Team WASG WPT	Service users already involved in reviews (and made considerable improvements to some services) but need to include in needs mapping and planning. Customer First Team have organised reference groups for SP. First meetings were in November 05. Links established with Customer First Steering Group.	
1.6	Develop methodology to identify service priorities for development to achieve targets of partners.	Methodology agreed and implemented.	Commissioned services meet current and future need.	CB – July 2005 AC – April 2005	Minutes of Meetings. Agreed Methodology.	СВ	SM SPR WASG	Agreed framework at CB planning day. CB agreed to release £200,000 for developing floating support services.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
1.7	Create a link between capital and revenue funding sources.	That new SP funded services have appropriate capital investment.		CB – 2005 and ongoing	Minutes of Meetings. Reports.	CB Housing Corporation	SM SRM	Staffs SP piloting system with Housing Corporation for West Midlands Housing Corporation to be invited to CB meeting early 06 to discuss.	

2. INCLUSIVENESS AND DIVERSITY

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
2.1	To undertake Equalities Impact Assessment of SP Services.	That SP meets the requirements of the assessment.	To ensure that SP functions are inclusive and not discriminatory.	CB – May 2005 AC – April 2005	Equalities Impact Assessment. SP Team Plan.	СВ	SM SSD SRO BM	Work has started and aims to be completed Autumn 2005. SP Managers now received training Oct 05.	
2.2	Ensure providers are implementing diversity strategies.	BME access is proportional to population.	That all services are appropriate regardless of culture and ethnicity.	CB – 2008/09	Reviews and QAF Returns.	СВ	Providers SM SRM SPO	This area of work looked at in depth when doing reviews. All services will be reviewed by April 2006, thus ensuring they meet this criteria. However, it is ongoing work.	
2.3	To make sure that SP information is available in appropriate format and language.	Information on access to SP services is available to all.	Appropriate information is easily accessible so service users informed about SP.	CB – March 2006 AC – April 2005	Consultation with BME groups / SSD Customer First Team. Minutes of Meetings. SP Information. User Engagement Strategy.	WASG	Providers Service Users SM SSD ADO	Work is progressing. Web page now revised. Service user reference groups now established and will undertake some of this work.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
2.4	BME representation on any service user groups established.	BME representation achieved.	That groups are inclusive and diversity issues are considered.	CB – 2007/08	Consultation with BME groups. Minutes showing attendance. User Engagement Strategy.	WASG	Service Users SSD Customer First Team SM	Reference groups now established to work with Customer First Team to ensure BME representation	
2.5	Consult relevant stakeholders and potential service users on housing support needs of BME groups, refugees and asylum seekers, gypsies and travellers.	Needs analysis.	That gaps in services are identified. That all current and future services are appropriate regardless of culture and ethnicity.	CB – 2007/08 AC – July 2005	Consultation. SP Team member to attend Traveller Forum. Publication of Housing Needs report on BME and Travellers (2005). Notes of consultation meetings. Needs analysis report.	WASG	CB SM SRM SPO WPT DHF SU	BME Study published May 2005, but inconclusive. This is an ongoing area of work. Nov 06 WASG developing questionnaire to identify information on hard to reach groups that may already exist.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
2.6	Consult Health and SSD colleagues regarding potential support needs of people with HIV / AIDS.	Needs analysis.	Provision of services within Warwickshire.	CB – 2006 AC – July 2005	Notes of consultation meetings. Questionnaires. Needs Analysis.	SM	PCT's Service Users SSD	Work to be commissioned early 06 to look at how emerging health structure can engage with SP. Identifying targets which SP may fulfill from the new PCT will be part of this work.	

3. SERVICE REVIEWS, PERFORMANCE MANAGEMENT AND VALUE FOR MONEY

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
3.1	Accelerate and monitor programme of reviews.	All SP funded services reviewed.	Services proved to be offering quality and Value for Money.	CB – 31 st March 2006 AC – March 2005	Review documentation. Monitoring of timetables. Minutes of Meetings. Supervision Notes.	СВ	SM SRM SPO	Revised review timetable agreed by CB December 2004. Regular monitoring and reporting to CB and SPPB.	
3.2	Complete accreditation of providers by 31st March 2006.	Accreditation decisions for all providers.	Providers are proved to be competent in delivering SP services.	CB – 31 st March 2006	Quarterly Accreditation Monitoring Reports. Review documentation. Accreditation Certificates from other SP AAs.	СВ	BAM SM SRM	New staffing arrangements in place August 05.	
3.3	Where appropriate, continue to undertake joint reviews with partners.	Protocol agreed and joint reviews happening.	Reviews are carried out robustly.	CB – May 2005 AC – Ongoing	Protocol. Review documentation.	SM	SRM SPO SP Partners.	Protocol agreed and implemented. Joint reviews undertaken.	
3.4	Share review programme with WASG and SSD contracts officers.	Quarterly meetings arranged with SSD staff. Needs evidence gathered.	Good practice from SP in monitoring / reviewing contracts shared. Clear needs evidence established.	AC – April 2005	Minutes of Meetings.	SM	SSD Contracts Staff, WASG		

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
3.5	Adopt a more challenging approach to assess Value for Money (VfM) and make savings.	To ensure SP is on budget and to identify savings to commission new services.	That services offer Value for Money and quality.	CB – April 2006 and ongoing AC – April 2005 and ongoing	Review documentation. Financial Reports. VfM Methodology.	СВ	SM SPPB SRM SPO	Although this work is ongoing, methodology agreed and in place.	
3.6	To develop long-term Value for Money (VfM) Methodology which establishes 'fair' hourly rates and defines low, medium and high levels of support.	To ensure consistency in applying VfM. To aid future commissioning.	That services offer VfM and quality.	CB – 31 st March 2006	Methodology. Minutes of Meetings.	СВ	SM SRM SPO WASG WPT	Consultant agreed to help in establishing framework. This work is progressing and reported to CB on monthly basis. First consultation meeting on 16.12.05.	À
3.7	Develop an appeals procedure following reviews.	Providers can challenge, under ODPM criteria, decisions made by SP Team and CB.		CB – July 2005	Procedure. Leaflets. Minutes of Meetings.	СВ	SM SRM SPO	Procedure agreed June 2005.	
3.8	Develop an Eligibility Criteria.	Criteria agreed and implemented to ensure fairness and equity in reviews. That SP only funds eligible tasks.	That services delivered are clear in which SP tasks are eligible for funding.	CB – May 2005 (review when grant conditions amended).	Eligibility Criteria. Review documentation. Minutes of Meetings.	СВ	SM SRM SPO WASG WPT	Complete and implemented. Reviews undertaken before agreement to be checked.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
3.9	Complete second round of reviews as per timetable.	Reviews completed.	To ensure continuous improvement in services funded and to involve service users in this process.	CB – 31 st March 2010	Review timetable. Review documentation.	СВ	SM SRM SPO SPPB WASG Other Partners	Will not commence until April 2006	

4. IMPLEMENTATION AND FINANCIAL MANAGEMENT

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
4.1	Develop new long-term contract that will introduce some flexibility.	New contracts in use.	To provide stability for services funded. Increased flexibility will enhance quality and tenure less significant.	CB – September 2005	New Contract. Minutes of Meetings. Reports.	SM	CB BAM SRM SPO WASG WPT WCC Legal Services	Completed July 2005. To go to CB 6 th August 2005.	
4.2	Produce quarterly summaries of SP key data.	To disseminate information on SP Programme to aid understanding and strategic integration.	That SP information is available for commissioners of services.	CB – April 2006 (will be annual summary for 2005)	Bulletin. Minutes of Meetings.	SM	BAM SRM IT	Meeting arranged for July 2005 to discuss IT implications and requirements. Work slowed on this due to other work commitments.	A
4.3	To produce monthly and quarterly financial monitoring reports.	To ensure SP spend is within budget and savings identified.	That the SP Programme is financially well managed and long term implications planned for.	CB – June 2005	Reports. Minutes of Meetings.	BAM	SM SRM	Reports produced from April 2005. Monitored by CB and SPPB.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
4.4	To review / amend charging policy.	Agreed if to implement Fairer Charging.	Fairer Charging may result in service users being able to access SP services and may help fund.	CB – July 2005 then annually	Policy. Reports. Minutes of Meetings.	СВ	BAM SRM SU	First meeting arranged July 2005 with SSD Fairer Charging Team to discuss implementation.	
								Work on implementing Fairer Charging progressing. Paper on fairer charging plus amended charging policy to go to CB Jan 06.	
4.5	To review SP risk assessment.	Risk assessment reviewed and updated.	To ensure risks are identified and planned for.	CB – August 2005 then annually.	Risk Assessment. Reports. Minutes of Meetings.	СВ	SM BAM SRM	Work not commenced, likely to be Autumn 2005. Presented to CB September 05 for discussion. Final version to go to CB Jan 06.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
4.6	Review performance of SP Team.	That SP is delivering a high quality service to stakeholders / partners and service users.	Service users have a response to queries, concerns, complaints, quickly.	CB – 2006 then annually	Annual EFQM Questionnaires. Complaints. Compliments. Review documentation.	SM	All SP Team SU Providers	Will not commence until 2006, although complaints / compliments acted on and noted.	
4.7	Provide regular training and consultation events on SP.	'New to SP' training programme for 2005/06 planned. SP part of SSD Induction. Consultation events organised.	That all staff and stakeholders understand SP and how it impacts on their work to ensure a holistic approach to support and care.	AC – April 2005	Training Programme. List of delegates attended. Event details. Feedback.	SM	SRM SPO	SP courses oversubscribed so additional dates now arranged. Positive feedback from consultation events.	

5. STRATEGIC DEVELOPMENT

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
5.1	Ensure there is understanding at corporate and Partnership Board level of how SP can help achieve target and priorities in other strategies.	SP is promoted through all stakeholder strategic integration of plans / strategies.	That services deliver current and future required service. That there is a seamless approach to accommodation.	CB – August 2005 AC – April 2005 and ongoing	Minutes of Meetings. Reports. Monitoring of action plans. Research. Consultation undertaken. Terms of Reference.	CB SPPB	SM SRM WASG	Work is progressing well. SM & SRM working with some stakeholders on their strategies / plans.	
5.2	Ensure that related strategies and action plans with SMART targets are linked to SP where appropriate.	Targets are identified and monitored.	That services deliver current and future required service. That there is a seamless approach to accommodation.	CB – August 2005 AC – July 2005	Needs information. SP Management data. Strategies / Plans.	СВ	SM SRM SPO WASG WPT	Work has slowed due to other work commitments, but there is a growing realisation of what SP can deliver.	
5.3	To produce a map and schedule of other relevant strategies and action plans.	Integration of SP sharing of information.	That services deliver current and future required service. That there is a seamless approach to accommodation.	CB – August 2005	Map. Schedule.	WASG	CB SM	First draft produced June 2005.	
5.4	To develop appropriate needs mapping methodology.	To ensure information / data is collected and analysed in a consistent and appropriate way.	That needs of service users are understood.	CB – 2006 – 2010	Needs mapping. Minutes of Meetings. Care Support Notes.	WASG	SM SRM WPT SSD Commis- sioning Unit	Work has started on this.	

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
5.5	Include information about SP services in latest Better Care; Higher Standards (BCHS).	Link between BCHS and SP made.	Housing options are clearly identified.	AC – July and ongoing	Better Care; Higher Standards document.	SM	SSD Commissioning Unit	Completed for 2005.	
5.6	Ensure strategic review of Older People's Services is supported by all stakeholders and encompasses SP.	That SP and accommodation are integral to the review. To feed in outcomes from reviews of SP funded services.	That accommodation and support are included in this important review and considered if services changed.	AC – Ongoing	Review documentation. Consultation events. Reports.	OPSR	SM	First report presented to WCC.	À
5.7	Produce annual plans for Five Year Strategy.	To update Five Year Strategy and produce commissioning priorities and finance monitoring / forecasting.	To plan for future needs based on up to date information.	CB – Annually	Annual Plan. Minutes of Meetings. Reports.	СВ	SM SRM BAM SPO SPPB WASG	2005/06 Plan agreed. Data collection for 06/07 plan started.	À

6. CHANGING THE PATTERN OF PROVISION

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
6.1	Undertake research into needs of service users for housing related support.	That need and demand for services evidenced.	That need is fundamental to the planning / commissioning of SP services.	CB – March 2006 then ongoing	BME Housing report. Completed first round of reviews. Minutes of Meetings. Consultation / research findings.	WASG	SM SP Team SU	Work has started. BME report published. See 1.5	
6.2	To work with partners / stakeholders to plan future pattern of provision ie free of tenure.	Appropriate services commissioned.	Fair and equal access to services.	CB - Ongoing	Long-term Contract. Minutes of Meetings. Reports. Research.	WASG	SM SP Team	More flexible long-term contract agreed & implemented August 05. Discussions to start in August 05 with Fairer Charging Team.	
6.3	To develop service specifications for agreed priorities.	Specifications designed on need, quantity and VfM.	Services deliver required and appropriate support.	CB – 2005 and ongoing	Service Specifications. Five Year Strategy. Relevant Plans. Minutes of Meetings. Review documentation. Annual Plan.	WASG	CB SM SRM BAM SU	Five Year Strategy agreed and submitted.	
6.4	Review current geographical coverage of floating support services.	Services are delivered effectively, delivery quality and VfM.	Service users receive quality, cost effective services to help them live independently and out of institutionalised care.	CB – 2006-2008	Consultation. Minutes of Meetings. Research reports.	СВ	SP Team SU WASG WPT		

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
6.5	Decommission services where necessary.	That services reflect need and strategic relevance.	To improve services and fund appropriate support, BUT service users need to be involved.	CB – Ongoing	Up to 31 st March 2006 – recommendations from first round of reviews. Minutes of Meetings.	СВ	SM SP Team SU SPPB	Nine services decommission-ed through withdrawing SHMG funding. Also four services decommission-ed at the choice of the provider.	2003-2006 only
6.6	Commission new services as required.	To ensure gaps in provision are met.	More services to meet need and demand.	CB - Ongoing	Five Year Strategy. Needs mapping. Consultation.	СВ	SM SP Team SU WASG	Initial £200,000 to commission floating support / move-on 2005/06. Bids due by 05/09/05. WASG to shortlist mid September and present to CB October 05	
6.7	Remodel existing services using outcomes of service reviews.	Increased / improved service provision. Improved throughput.	Services reflect need, ie., offering floating support to enable service users to move on from accommodation based services.	CB - Ongoing	Review decisions. Five Year Strategy. Annual Plan. Minutes of Meetings.	СВ	SM SRM SP Team SU WASG WPT	Discussions taking place with several providers following reviews to deliver more units for same contract value.	2003-2006 only
6.8	To develop assisted technology where appropriate.	To utilise new technologies to deliver support.	Wider range of support available to enable SU's to live at home.	CB – 2005 and ongoing	Minutes of Meetings. Reports Research. Consultation.	SSD	SM SU WPT	Details of DoH Grant to be published July 2005.	

7. CROSS AUTHORITY WORKING

	TASK	FINAL OUTPUT	OUTCOMES FOR SERVICE USERS	TIMESCALE	ANY KEY EVIDENCE?	RESPON- SIBLE	INVOLV- ING	PROGRESS	PROGRESS INDICATOR
7.1	Produce sub-regional cross-authority strategy.	To ensure services sub-regionally compliment each other. To commission services for hard to reach groups.	Local Government boundaries and constraints removed. Seamless access.	CB – 2006 onwards	Strategy. Minutes of Meetings. Research.	SM	WASG Solihull & Coventry SP Teams	Cross Authority day to start process late Nov 05.	