

**Recommendations from the Adult Social Care and Health OSC
Select Committee held on 15 July 2015**

Having considered all the evidence presented at the select committee, the Adult Social Care and Health Overview and Scrutiny Committee agreed the following recommendations for approval by the Cabinet:

1. There needs to be more clarity around assessments, the costs of those assessments, and assessments should precede commissioning.
2. Our role as Corporate Parents should be emphasised in any changes affecting young adults.
3. Attention to those 'most in need' should not deny attention to those 'in need'. To ensure this, the timescales of implementation should be adjusted to help facilitate re-assessment of the implications to Warwickshire County Council and its partners.
4. A clear definition of eligibility criteria should precede savings assumptions, and funds may need to be re-distributed to meet the concerns expressed by the Committee.
5. Joint commissioning has some potential to reduce overheads but there needs to be clarity by how much against the risk of future demand on services.
6. If a generic service is to be used to eliminate specialist services, the new service must be robust enough to cover all areas of need.
7. Cabinet should be aware that reducing this service area is likely to put a strain on other public services (not limited to Warwickshire County Council).
8. As a strategic document the report leaves many specific concerns that have not been addressed. This lack of clarity has led to understandable anxiety for many customers and members.
9. Future monitoring should include the Partnership Board and other monitoring bodies e.g. Adult Social Care & Health Overview and Scrutiny and Heathwatch. A monitoring group should also be set up to ensure no duplications or ill-effect of changes, and to ensure that value for money is being obtained.
10. Cabinet are asked to examine these recommendations and report progress against the recommendations to full Council on 24 September 2015.

Minutes and Report – Cabinet 18 August 2015

Minutes of the extraordinary meeting of the Cabinet held on 18 August 2015

Present

Cabinet Members:

Councillors

Izzi Seccombe	Leader of the Council and Chair of Cabinet
Peter Butlin	Transport & Planning
Les Caborn	Health
Alan Cockburn	Deputy Leader
Jose Compton	Adult Social Care
Colin Hayfield	Education & Learning
Kam Kaur	Customers

Non-Voting Invitees:

Councillor Jerry Roodhouse	Leader of the Liberal Democrat Group
Councillor Richard Chattaway	Deputy Leader of the Labour Group

Other Councillors:

Councillors Sarah Boad (for part of meeting), Clive Rickhards and Maggie O'Rourke

Public attendance:

None

1. General

Before the commencement of the meeting Councillor Izzi Seccombe (Leader of the Council and Chair of Cabinet) informed members of the death of former County Councillor Martin Heatley. Members and officers extended their sympathy to Councillor Heatley's family.

(1) Apologies for absence

Apologies for absence were received from Councillor Jeff Clarke (Cabinet Portfolio Holder for Environment) and Councillor John Horner (Cabinet Portfolio Holder for Community Safety) and from Councillor June Tandy, Leader of the Labour Group.

(2) Members' Disclosures of Pecuniary and Non-Pecuniary Interests

David Carter, Strategic Director for Resources explained the outcome of the meeting of the Council's Dispensations Sub-Committee held on 10 August. It was explained that as a consequence of the resolution of the sub-committee elected members who would otherwise have been excluded could now participate fully in the Cabinet meeting. The exception to this is where a councillor's interest extends beyond the receipt by them or a spouse of an allowance through membership of a district or borough council.

There were no declarations beyond those already addressed by the Dispensations Sub-Committee.

2. Re-structure of Housing Related Support (Supporting People) – One Organisational Plan Savings

a) Report of the Chair of the Adult Social Care and Health Overview and Scrutiny Committee

b) Report with Proposed Service Changes

a) Report of the Chair of the Adult Social Care and Health Overview and Scrutiny Committee

Councillor Izzi Seccombe introduced this item explaining why, owing to timing issues, it had been necessary to call an extraordinary meeting of Cabinet. The select committee meeting of the Adult Social Care and Health Overview and Scrutiny Committee held on 15 July 2015 was referenced. Councillor Seccombe thanked the select committee for its work adding that Cabinet and officers had taken account of the recommendations resulting from that meeting, reflecting on and adjusting proposed service changes where appropriate.

Councillor Maggie O'Rourke Chair of the Adult Social Care and Health Overview and Scrutiny Committee explained that Councillor Bob Hicks who had chaired the select committee meeting was unable to attend the Cabinet meeting. Councillor O'Rourke stated that the select committee meeting had been productive and that it had explored the pertinent questions around the Council's proposals.

b) Report with Proposed Service Changes

Councillor Jose Compton (Portfolio Holder for Adult Social Care) thanked the select committee and officers for their work. Councillor Compton reiterated that the recommendations of the select committee had been taken into account where appropriate. Councillor Compton summarised the proposals in the published report, highlighting the consultation that had been undertaken

as well as the development of an Equality Impact Assessment. It was stressed that the proposals before Cabinet sought to:

- Introduce eligibility criteria based on the Care Act 2014
- Re-commission services for single homeless people (including adult offenders, young people at risk of homelessness (including young parents and care leavers), non-specialist floating support services, and disability services.
- Stop services for gypsy and travellers, homeless families with support needs, floating support for adult and young offenders and lifeline alarm services in sheltered housing.
- Continue to fund services for substance misuse until the end of the contract and then re-commission with the Warwickshire Drug and Alcohol Action Team, continue to fund domestic violence services until the end of the contract and then re-commission with the Communities Group and partners.

Councillor Compton moved the published recommendations.

Councillor Les Caborn (Portfolio Holder for Health) thanked Councillor Compton for her hard work on this matter and asked what actions other local authorities are undertaking to address similar matters. In reply the meeting was informed that Warwickshire County Council has consulted other local authorities to obtain benchmarking information. For example, Birmingham City Council has reduced its Housing Related Support budget from £51.9m in 2010 to £28.6m for 2015-116. By 2017 the budget will have been reduced by 54.1 % from its 2010 figure. The older people services contract ceased in 2013 and community alarms are now funded in Birmingham by a combination of increased service charges and by revised business models being implemented by providers.

In response to a question from Councillor Kam Kaur (Portfolio Holder for Customers), Cabinet was informed that the service redesign in Warwickshire will meet the requirements of the Care Act 2014. It was suggested that all services will need to be reviewed in the light of the Care Act. This is already being undertaken in the case of domiciliary care.

Cabinet members stressed that Housing Related Support services are non-statutory. There is significant pressure on the Council's finances and if savings are not realised in this service area it is likely that cuts in other areas e.g. social care will be required.

In response to a question from Councillor Clive Rickhards regarding recommendation four of the select committee meeting, Cabinet was informed that eligibility criteria for the receipt of support had already been agreed through the partnership group (paragraph 1.15 of the report to Cabinet refers). With a focus on vulnerable people the Care Act imposes a duty on the County Council to assess all individuals where necessary.

Chris Lewington (Head of Strategic Commissioning) noted that it is important to remember those people who are on the edge of care i.e. those who may not yet meet the set criteria but who may in the future. Members recognised the diversity of issues facing people and stressed the need to ensure that whatever form the re-designed service took it met the needs of as many as possible.

Resolved

1. That Cabinet approves proceeding with the proposals to re-structure Housing Related Support services to deliver the One Organisational Plan savings target from 2015 to 2018 (STC-G) as detailed in the published report.

2. That Cabinet agrees to the delegation of the implementation of the proposals; method of procurement for and any de-commissioning of, Housing Related Support services; and the subsequent award of contract to the Strategic Director of People Group on terms and conditions acceptable to the Strategic Director of Resources Group.

The meeting rose at 11.37 a.m.

..... Chair

Report considered by Cabinet 18 August 2015

Re-structure of Housing Related Support (Supporting People)

One Organisational Plan Savings – Report with Proposed Service Changes

Recommendations

1. That Cabinet approves proceeding with the proposals to re-structure Housing Related Support services to deliver the One Organisational Plan savings target from 2015 to 2018 (STC-G) as detailed in this report
2. That Cabinet agrees to the delegation of the implementation of the proposals; method of procurement for and any de-commissioning of, Housing Related Support services; and the subsequent award of contract to the Strategic Director of People Group on terms and conditions acceptable to the Strategic Director of Resources Group.

1.0 Background

- 1.1 Housing Related Support (HRS) is non-statutory service provision offered to adults aged 16 years and over across Warwickshire.
- 1.2 This service provision, previously known as Supporting People, was introduced as a national programme in April 2003. The scope of the programme was to fund, monitor and improve frontline Housing Related Support services for disadvantaged and vulnerable people.
- 1.3 The Supporting People Grant brought together seven housing-related funding streams from across central government into a single programme. This funding was ring-fenced within the local authority to provide housing-related support services.
- 1.4 In 2009, the ring-fence around this funding was removed, which meant that local authorities had complete control over how this money was spent. The provision of HRS is discretionary, which means that the County Council has no duty to offer these services to Warwickshire citizens. From 2011 funding

was incorporated in the local authority Formula Grant and there is no longer a specific funding stream for housing-related support services.

- 1.5 Nationally, there has been a diverse response to the changes to the funding of Supporting People services. In some areas, there have been significant reductions in the overall budget for these services.
- 1.6 In Warwickshire, the specific budget for Housing Related Support services has been protected from significant reduction to date by working consistently with providers to re-negotiate contracts and improve service efficiency.
- 1.7 However, the challenging financial landscape and the requirements of the Care Act 2014, notwithstanding the recent amendments announced by Central Government, mean that the County Council can no longer continue to commission and fund these discretionary services in the same way. The deferral of the cap on care costs has not removed the overall pressure on the care system and the need for councils to make savings to manage the planned reductions in funding from Central Government.

Key Issues

- 1.8 The One Organisational Plan Savings target for Housing Related Support services means a reduction in available budget from £8.6 million to £4.875 million by 2018.
- 1.9 This funding reduction requires a re-focus the provision of Housing Related Support services to target the most vulnerable customers within Warwickshire. In order to meet this funding challenge we are proposing to re-structure services.
- 1.10 Although it is inevitable that we will stop funding some services; how we provide Housing Related Support services will be different in the future. Services will be redesigned to ensure that they are preventative in nature and customer wellbeing is promoted.
- 1.11 In order to meet our business outcomes and deliver the key principles of the Care Act 2014, we have made a number of proposals to re-structure Housing Related Support services across Warwickshire. These proposals included changing how we decide who is eligible for support; stopping some services, keeping some services the same and offering services in a different way.
- 1.12 A comprehensive public consultation was completed to ensure that citizens of Warwickshire had an opportunity to tell us:
 - If they agree or disagree with our proposals
 - What the impact of our proposals will be
 - How we could do things differently

- 1.13 To ensure a strategic approach to re-structuring Housing Related Support services and to maintain the pace of change, the Warwickshire Housing Related Support Partnership Group ('the Partnership Group') was established.
- 1.14 Core membership of 'the Partnership Group' is the Heads of Housing for the five District/Borough Housing services; Warwickshire County Council Social Care and Support; Public Health; the Warwickshire and West Mercia Community Rehabilitation Company; and the County Council Strategic Commissioning Unit.
- 1.15 'The Partnership Group' produced:
- a re-defined eligibility criteria to ensure that Housing Related Support services are utilised by those most in need of support. (full report, page 13)
 - an agreed set of key principles to form the basis of our decision-making when considering the consultation feedback (full report, page 10)
 - an agreed decision-making flowchart against which each proposal and consultation was tested and adjusted as necessary. (full report, page 12)
- 1.16 By applying this decision-making process, a proposal to re-structure Housing Related Support in Warwickshire has been produced.
- 1.17 In order to realise our duties with regard to the Equalities Act 2010 and have due regard for the impact of these proposals on protected groups (Equalities Impact Assessment document, Pages 9-11; 15 and 19 specifically) under the Act; we have carried out an Equalities Impact Assessment.

This assessment will be reviewed and amended regularly throughout the life of this project.

2.0 Proposal

- 2.1 The tables below show a summary of the proposals detailed in this report, together with the perceived impact of such proposals and the financial impact on individual client groups.
- 2.2 These proposals were considered by Adult Social Care and Health Overview and Scrutiny Select Committee on 15th July 2015. The recommendations from the Committee are set out in their report on this agenda.

Proposal number - What will happen?	When	Existing budget	New budget	Perceived impact.
PROPOSAL 1. We will introduce an eligibility criteria based on either Care Act 2014 or a definition of 'edge of care'	All new services from October 2015			HRS service will be available to the most vulnerable.
PROPOSAL 2. We will re-commission by competitive tender, accommodation based services for Single Homeless with support needs. These services will also support adult offenders.	New services from April 2016	£1,250,332	↓ £1,027,090 17% reduction	Improved accommodation quality and placement geographically. Focus on the needs of the most vulnerable
PROPOSAL 3. We will stop funding specialist floating support for the Gypsy and Traveller community We will stop funding specialist floating support for Single Homeless with support needs We will stop funding specialist floating support for Homeless Families with support needs We will stop funding specialist floating support for Adult Offenders We will stop funding specialist accommodation based support for Adult Offenders We will stop funding specialist floating support for Young Offenders We will reduce the amount of non-specialist (Generic) floating support with a view to developing a new non-specialist floating support service from April 2016.	October 2015 October 2015 October 2015 October 2015 March 2016 October 2015 October 2015: new services from April 2016*	£2,961,447	↓ £786,000* 73% reduction	Re-designed non-specialist service will be available to support those customers who have multiple HRS needs. Universal services will support those individuals with single issues such as debt or housing need. Re-designed services for young people will support young offenders with HRS needs
PROPOSAL 4. We will re-commission Housing Related Support services for young people who are leaving care; or are 16 or 17 years of age; or aged 16-25 years and at significant risk of homelessness and/or needing care services (including young parents). We will do this by competitive tender.	New services from April 2016	£1,069,747	↓ £900,000 13% reduction	Re-designed HRS services will meet the outcomes of young people at risk of homelessness. Access to emergency accommodation will be improved. Improved focus on preventing homelessness.
PROPOSAL 5. We will stop providing contributory funding to support scheme managers and lifeline alarm services in sheltered accommodation. (Alternative funding sourced through HB) We will continue to fund Home Improvement Agencies We will commission by competitive tender a new non-specialist floating support service	March 2016 On-going New Service from April 2016*	£1,951,818 £150,168	↓ 100% reduction ↑ £250,000 66% uplift £786,000* as above	Re-commissioned non-specialist HRS service will support eligible older people irrespective of where they live. Increased funding for Home Improvement Agencies will enable older people to remain independent in their own home. Intensive Housing Management as an alternative source of funding
PROPOSAL 6. We will continue to fund Housing Related Support for substance misusers until the end of the current agreement. We will seek to re-commission a new service in partnership with the Warwickshire Drug Alcohol Action Team and other partners. We will continue to fund Housing Related Support for people experiencing domestic abuse until the end of the current agreement. We will seek to re-commission a new service with Communities Group and other partners by competitive tender.	Current agreement to end March 2016. Action on future provision to be made by end December 2015. Current agreement to end March 2016. Action on future provision to be made by end December 2015.	£184,937 £343,583	£184,937 £343,583 No Movement No Movement	Future re-design of HRS element of these services will be strategic and therefore meet the priorities of a range of stakeholders.
PROPOSAL 7. We will stop funding current services for People with a Learning Disability; mental ill health; physical impairment; sensory impairment. We will ensure that all relevant customers receive a review of their needs. We will re-commission by competitive tender, a disability service comprised of both accommodation based and floating support services	March 2017 2016 - 2017 New Services from April 2017	£2,667,929	↓ £1,300,000 51% reduction	Those long term needs identified through the proposed review process will be supported more securely through statutory funding. HRS services will complement care and support provided by other statutory partners.
Total		£8,636,252*	**£4,875,000	

Note – *Priority 5 existing budget (£1,951,818) is included within Priority 3 budget (2,961,447) – separated out here to reflect impact of the proposed budget. The Leaseholders budget of £8109 does not relate to a given priority and there is no net effect, the budget remains as is.

**Within the proposed budget £75,281 for contract transition and a Leaseholders budget of £8109 is included.

Primary Client Group	Current Contract Spend as at 31/03/15	Total grouped current contract spend 31/03/15	Proposed annual Contract Budget by 2018	Impact of proposed Re-Structure	Percentage impact %age	Current available Accommodation based units @31.03.15	Current available Floating support /Alarm units @31.03.15
HIA	£150,168	£150,168	£250,000	+ £99,832	66% uplift		1,150
Leaseholders	£8109	£8109	£8109	£0			33
Physical & Sensory Impairment	£96,025	£2,667,929	£1,300,000	- £1,367,929	51% drop Stop current funding in March 2017 Then recommission new services in April 2017	2	30
Learning Disability	£1,639,069					94	113
Mental Health	£932,835					67	120
Single Homeless with support needs	£976,820	£1,250,332	£1,027,090	- £223,242	17% drop Recommission new services in April 2016	159	26
Offenders	£273,512						
Non-Specialist Housing Related Support	£890,001	£2,961,447	£786,000	- £2,175,447	73% drop Stop current funding current services in October 2015 Then develop a non specialist generic floating support in April 2016	43	26
Gypsy & Traveller	£40,251					0	247
Older People/Frail Elderly	£1,951,818					0	16
Homeless Families with support needs	£79,377					0	26
Young People, Care Leavers, Young Offenders	£899,955	£1,069,747	£900,000	- £169,747	13% drop Recommission new services in April 2016	64	55
Young Parents	£169,792					19	25
Substance Misuse	£184,937	£184,937	£184,937	£0		0	640
People experiencing domestic abuse	£343,583	£343,583	£343,583	£0		18	70
Non-Service Contract budget (transition)			£75,281	+ £75,281	contingency		
TOTAL	£8,636,252	£8,636,252	£4,875,000	- £3,761,252	43%		

This plan meets our critical success factors set out below and will meet the requirements of the Care Act 2014 by promoting well-being and preventing/delaying/reducing the need for more acute services.

Critical Success Factors

- Housing Related Support services are re-designed to maximise the use of remaining funding
- Changes to service provision completed in a planned way
- Customers are supported throughout the process of change
- Stakeholders remain engaged throughout the project
- OOP savings achieved

3.0 Timescales associated with the decision and next steps

- 3.1 'The Partnership Group' will now produce a detailed delivery plan that will show:
- how Housing Related Support services will be accessed
 - where Housing Related Support services will be placed
 - how the different models of Housing Related Support will be structured
- 3.2 The plan will also finalise the proportion of budget available for each service area and the procurement approach that will be taken. The Equality Impact Assessment will continue to be developed throughout the life of this project.
- 3.3 We will develop a methodology to ensure that we are able to manage the transitional and implementation arrangements for each of the primary client groups identified in this report.
- 3.4 Through this mechanism, we will identify any potential cost pressures as they are relevant to Adult Social Care and develop a clear plan for mitigating this this.
- 3.5 A detailed project plan will be developed to ensure that the implementation phase is managed and current governance will be maintained through the Warwickshire Cares Better Together Programme Board.

Appendices

1. Full Report: Re-structure of Housing Related Support (Supporting People) - One Organisational Plan Savings
2. Equality Impact Assessment

Background papers

1. Consultation Document (September 2014)
2. Housing Related Support Consultation Report, February 2015

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Appendix One

**Re-structure of Housing Related Support (Supporting People)
One Organisational Plan Savings**

Cabinet

18th August 2015

Re-structure of Housing Related Support (Supporting People) One Organisational Plan Savings

Background

Housing Related Support (HRS) is non-statutory service provision offered to adults aged 16 years and over across Warwickshire.

This service provision, previously known as Supporting People, was introduced as a national programme in April 2003. The scope of the programme was to fund, monitor and improve frontline Housing Related Support services for disadvantaged and vulnerable people.

The Supporting People Grant brought together seven housing-related funding streams from across central government into a single programme funded by the Department for Communities and Local Government (DCLG); formerly the Office of the Deputy Prime minister (ODPM). The programme was ring-fenced within local authority funding to provide housing-related support services.

In 2009, the ring-fence around the Supporting People funding stream was removed. This meant that individual local authorities now had complete control over how this money was spent dependent on local needs. The provision of HRS is discretionary, which means that the County Council has no duty to offer these services to Warwickshire citizens. Since 2011, the money has been incorporated into the local authority Formula Grant and there is no longer a specific funding stream for these services.

In 2010, the Supporting People administration grant, which paid directly for local authority staff and monitoring costs, was stopped by Central Government. However, the County Council decided to continue to cover any administration costs associated with the provision of Housing Related Support services.

These changes to funding for HRS services have led to a diverse range of responses from local authorities. The National Audit Office¹ has reported that spending nationally on HRS has fallen by a median of 45.3% between 2010-11 and 2014-15. In some areas, this has meant significant reductions in the overall budget for HRS provision.

In Warwickshire, the specific budget for Housing Related Support² services has been protected from significant reduction to date. During this period, the overall budget used to fund these services was only reduced by 15% and the County Council has been able to do this by working consistently with providers to re-negotiate contracts and improve service efficiency.

However, the challenging financial landscape and the requirements of the Care Act 2014, notwithstanding the recent amendments announced by Central

¹ National Audit Office 'The Impact of funding reductions on local authorities' www.nao.org.uk

² The term Supporting People is no longer used and has been replaced by Housing Related Support to identify this group of services

Government, mean that the County Council can no longer continue to commission and fund these discretionary services in the same way. The deferral of the cap on care costs has not removed the overall pressure on the care system and the need for councils to make savings to manage the planned reductions in funding from Central Government.

Housing Related Support in Warwickshire

The budget for Housing Related Support services in Warwickshire for 2014-2015 is £8.6 million.

The primary outcome of the service programme is to prevent homelessness and/or repeat homelessness and improve the ability of vulnerable customers to live independently in the community. Key to the achievement of these outcomes is the ability of services to work with customers to gain and/or maintain suitable accommodation. Services can offer a range of support activities including, but not limited to, financial capability/budgeting, maximising income (including Welfare Benefits), liaising with landlord regarding tenancy agreement, maintaining physical and/or mental health, preventing harm, improving opportunities through education, training and employment.

The majority of contracts are offered on a short term basis. This means that services are offered for up to a maximum of 2 years. There is a strong focus on building resilience and enabling the customer to live independently without service intervention.

Services are also offered to older people/frail elderly and people with a learning disability on a long term basis and focus on maintaining independence and preventing escalating need.

There are currently 103 contracts that provide HRS services, delivered by 45 individual providers who are either Local Housing Authorities or not for profit organisations. There is also some Warwickshire County Council in-house provision.

Currently, the majority of services are offered as either:

Accommodation based: where a person moves into specific accommodation to receive support – such as a homeless hostel.

Or

Floating Support: where a person receives housing related support in their own home and the support can move with them i.e. the funding follows the person and is not based on accommodation

The majority of HRS services have been in place since 2006/2007 and have developed organically since that time. There has been some competitive tendering for new services, but that has been limited. This means that the development of services has not been needs-led and there is evidence of inequitable provision across the county.

Spend on HRS is currently patterned as detailed in Figure 1:

Figure 1: Housing Related Support spend 2014 - 2015

Primary Client Group	Annual Contract Spend	Accommodation Based Maximum Capacity (units [^])	Floating Support/Alarm Maximum Capacity (units [^])	Average Unit Cost (weekly)
Older People/Frail Elderly	£1,951,818	3,601	1,498	£7.34*
HIA/Handyperson/Home Safety Check Scheme	£150,168	0	1,510	£1.91*
Leaseholders	£8,109	0	33	£4.93*
Physical & Sensory Impairment	£96,025	2	30	£57.55
Single Homeless with support needs	£976,820	159	26	£101.26
Homeless Families with support needs	£79,377	0	26	£58.55
Generic	£890,001	0	247	£69.10
Adult Offenders	£273,512	43	26	£76.02
Young People, Care Leavers, Young Offenders	£899,955	64	55	£145.03
Young Parents	£169,792	19	25	£74.00
Learning Disability	£1,639,069	94	113	£151.60
Mental Health	£932,835	67	120	£96.26
Substance Misuse	£184,937	0	640 (includes 400 brief interventions)	£5.56**
Gypsy and Traveller	£40,251	0	16	£48.24
Domestic Abuse	£343,583	18	70	£70.71
TOTAL	£8,636,252***			
Budget Reduction by (2018)	£3,725,000			
Revised Budget (2018)	£4,875,000			

Source: Financial Forecast March 2015

**this represents a contribution towards the provision of service rather than the total cost.*

***the service model is patterned on a mix of interventions over 6 months. As it includes 400 brief interventions, this reduces the unit cost significantly.*

****this total represents gross contract spend only. The actual budget is £8.6 million*

[^] A unit represents either an individual customer or a household depending on the type of Housing Related Support service provided.

Business Requirement

The One Organisational Plan Savings Plan (OOP)

Warwickshire is facing unprecedented restraints on resources and has made commitments to deliver £92 million in savings across the Council by 2018.

£25 million of this savings target will be from Adult Social Care.

The OOP savings target for HRS was revised following Councils Budget Setting Session for 2015-16. From February 2015 the revised savings target over the next three years is shown below:

2015-2016	2016-2017	2017-2018
£'000	£'000	£'000
300	1,828	3,725

The current budget for Housing Related Support services is £8.6 million. If the OOP target is successfully applied, then the budget for these services will reduce to £4.875 million by 2018.

This reduction in funding means that it is inevitable that we will stop funding some services; and how we provide services will be different in the future. HRS services will be redesigned to ensure that, for the most vulnerable citizens of Warwickshire, wellbeing is promoted and available services are preventative in nature.

The Care Act 2014

The implementation of the Care Act 2014, notwithstanding the recent announcement from Central Government, represents a significant reform of care and support. It provides the legislative framework that will put people in control of their care and support and provides a mechanism through which the quality of provision will be improved.

There are a number of key principles in the Act that are relevant to the need to re-structure HRS services in Warwickshire.

The promotion of individual well-being and the prevention, delay or reduction of a need for more acute services are two of the key principles of the Care Act 2014.

Promoting individual well-being is a guiding principle at the heart of care and support. In essence, a person's well-being extends into many of the areas supported through HRS, including physical and mental health; participation in work, education and training; social and economic well-being; suitability of living accommodation; and contribution to society.

Preventing people developing needs for care and support or delay people deteriorating such that they would need ongoing care and support is a key function of the Local Authority and is essential to helping people to maintain their independence.

The re-structure of HRS services will ensure that these principles are at the heart of all new services.

These key principles will be assured through the development of a market that delivers a wide range of high quality care and support services that are available to communities.

Objectives / Outcomes

Within the context of OOP and the implementation of the Care Act 2014, the objective is to re-configure the programme of HRS services within Warwickshire.

Re-configured services will support the following People Group Key Business Outcomes:

People are Independent: people, including those who are vulnerable, are able to live independently within their own homes and families, without the need for critical services to support them.

People are Independent: people and their carers are in control of planning their own care and managing their own risks.

People are Independent: people can choose from a range of accommodation support which enables them to remain independent.

People enjoy life: People avoid loneliness and isolation and enjoy an enhanced quality of life through opportunities and access to employment, recreation, family, social and community life.

People enjoy positive personal and social relationships

People are healthy:

People are mentally and emotionally healthy and resilient

People can access the right services: People know what choices are available to them locally and where to access the right information, support and advice if they need it.

Information, support and advice is accessible.

People have choice and control in the services they access, including financial control.

People have fair and equal access to the services they need, regardless of their circumstances or location.

.....and delivered in the right way: Support builds on the skills and assets that people already have so that where appropriate they can live as independently as possible.

High quality services are commissioned strategically and in partnership, based on robust intelligence, research and evidence.

The local market meets people's changing needs and expectations.

Poor performance across services we manage, commission or support, is challenged and improved.

Systems and processes effectively support our priorities, principles and outcomes, and facilitate high-quality services.

.....at the right time: Services respond in a timely manner to assess and support people to regain, retain and maintain independence as soon as possible.

Critical Success Factors

- Housing Related Support services are re-designed to maximise the use of remaining funding
- Change to service provision is completed in a planned way
- Customers are supported throughout the process of change
- Stakeholders remain engaged throughout the project
- One Organisational Plan Savings target achieved

Stakeholders and Consultation

Stakeholders

The following stakeholders are likely to be impacted by the recommendation in this report:

- Current and potential customers across the county who may have a need for Housing Related Support. This will include all of the current client groups who will have a range of needs;
- Local Housing Related Support service providers;
- Adult Social Care and Support teams;
- Clinical Commissioning Groups;
- Community and voluntary organisations;
- District and Borough Council Housing teams;
- Warwickshire Community Rehabilitation Company;
- Warwickshire Public Health;
- Warwickshire County Council Localities and Community Safety.

In order to ensure a strategic approach to re-structuring HRS services, the Warwickshire Housing Related Support Partnership Group ('the Partnership Group') was established.

Core membership of 'the Partnership Group' is the Heads of Housing for the five District/Borough Housing services, Warwickshire County Council Social Care and Support, Public Health; Warwickshire and West Mercia Community Rehabilitation Company; and the County Council Strategic Commissioning Unit.

Terms of Reference have been agreed for 'the Partnership Group', which meets every two (2) weeks. Outputs from 'the Partnership Group' are monitored through the Accommodation with Support Board, which also has responsibility for successfully delivering the re-structure of HRS services

Consultation

In order to achieve the People Group outcomes identified, we have made a number of proposals to re-structure HRS services across Warwickshire. These proposals included changing how we decide who is eligible for support; stopping some services, keeping some services the same and offering services in a different way. A comprehensive public consultation was completed on these proposals between the 8th September 2014 and 28th November 2014.

This provided an opportunity for citizens of Warwickshire to tell us:

- If they agree or disagree with our proposals;
- What the impact of our proposals will be;
- How we could do things differently.

Due to the wide range of customer groups supported by HRS services, it was imperative that a range of consultation methodologies were utilised. This approach would ensure views were sought from a broad and diverse range of people.

These methods included:

Questionnaires

A questionnaire was developed as an accessible and generic version to support a wide range of potential respondents.

A paper copy of the generic questionnaire was sent to all current HRS customers (6,000 copies), together with a pre-paid return envelope to support postal returns. In addition, both versions were available online on the council consultation website (www.askwarwickshire.gov.uk), together with an Equalities Impact Assessment and 'Frequently Asked Questions'.

Focus Groups

49 face to face meetings were completed where participants were assisted to respond to the consultation.

33 sessions were completed by Grapevine on behalf of the County Council for people with a learning disability. A total of 151 customers participated in these focus groups and were able to detail their responses to the consultation.

A further 16 focus groups were completed and are detailed in Figure 2.

Figure 2: Breakdown of focus groups conducted (excluding Learning Disability)

Primary Client Group catered for by the service	Focus Groups	Customers attending	Relatives/Carer attending
Young People at risk/Care Leavers	3	16	0
Frail Elderly	1	14	1
Homeless Families	1	3	0
Offenders	2	12	0
Older People	5	60	6
Physical and / or Sensory Impairment	1	5	0
Single Homeless	2	18	0
Young Parents	1	3	0
TOTAL	16	131	7

Telephone Helpline

33 people were supported to complete their consultation responses through the telephone helpline provided.

Other Responses

248 responses were received in other formats such as letter and email. Of these, three (3) people submitted their responses via a DVD.

Other Contacts

- Regular briefings (written and verbal) have been provided to elected members throughout the consultation period, together with responses to specific questions from constituents;
- We have also attended a number of meetings including Warwickshire; Safeguarding Adults Board and North Warwickshire Health and Well-Being Board to support the consultation process.

In total, 1,505 individual responses were received.

Analysis of Responses

Due to the volume of responses received and the number of responses that were made using methods other than the questionnaire, an external research company was engaged to complete the analysis. This was supported by the Strategic Commissioning Business Intelligence Team and the Warwickshire Observatory.

Principles in Decision-Making

'The Partnership Group' developed a set of principles to enable progress from the consultation phase to a detailed delivery plan for the future structure of Housing Related Support Services.

The 4 principles³ are:

- ✓ A service must prevent / reduce escalation of need and promote / wellbeing.
- ✓ A service must support those customers that are in need and are eligible under the Care Act 2014 assessment to maximise their independence and to reduce the risk of needing acute / long term care.
- ✓ A service must be targeted at the most vulnerable, who are at risk of losing or not maintaining their independence. The most vulnerable will generally be those with multiple needs, for example: homelessness, mental ill health, substance misuse and / or offending behaviour. They will have one main need that is complicated by others or a combination of lower-level issues that together give cause for concern in terms of their ability to maintain independence. ('edge of care')
- ✓ A Housing Related Support service should complement other services provided and should represent an effective use of resources based on need.

These Principles formed the basis of our decision-making when considering the consultation feedback

In order to make the right decisions, taking full account of the consultation feedback, three key steps have been applied:

1. The establishment of four (4) key Principles
2. A decision-making flowchart
3. Eligibility Criteria

Each proposal was tested using each of the three (3) steps in turn in order to ensure that decisions fully reflected the consultation feedback received and would support duties as required under the Care Act 2014.

³ The context for the 4 key principles is that Housing Related Support services are discretionary and therefore the County Council does not have a duty to provide them. Therefore they should not be used to deliver support that is relevant for statutory service provision.

The flowchart (Fig 3) shows how consultation responses were considered in the construction of a delivery plan.

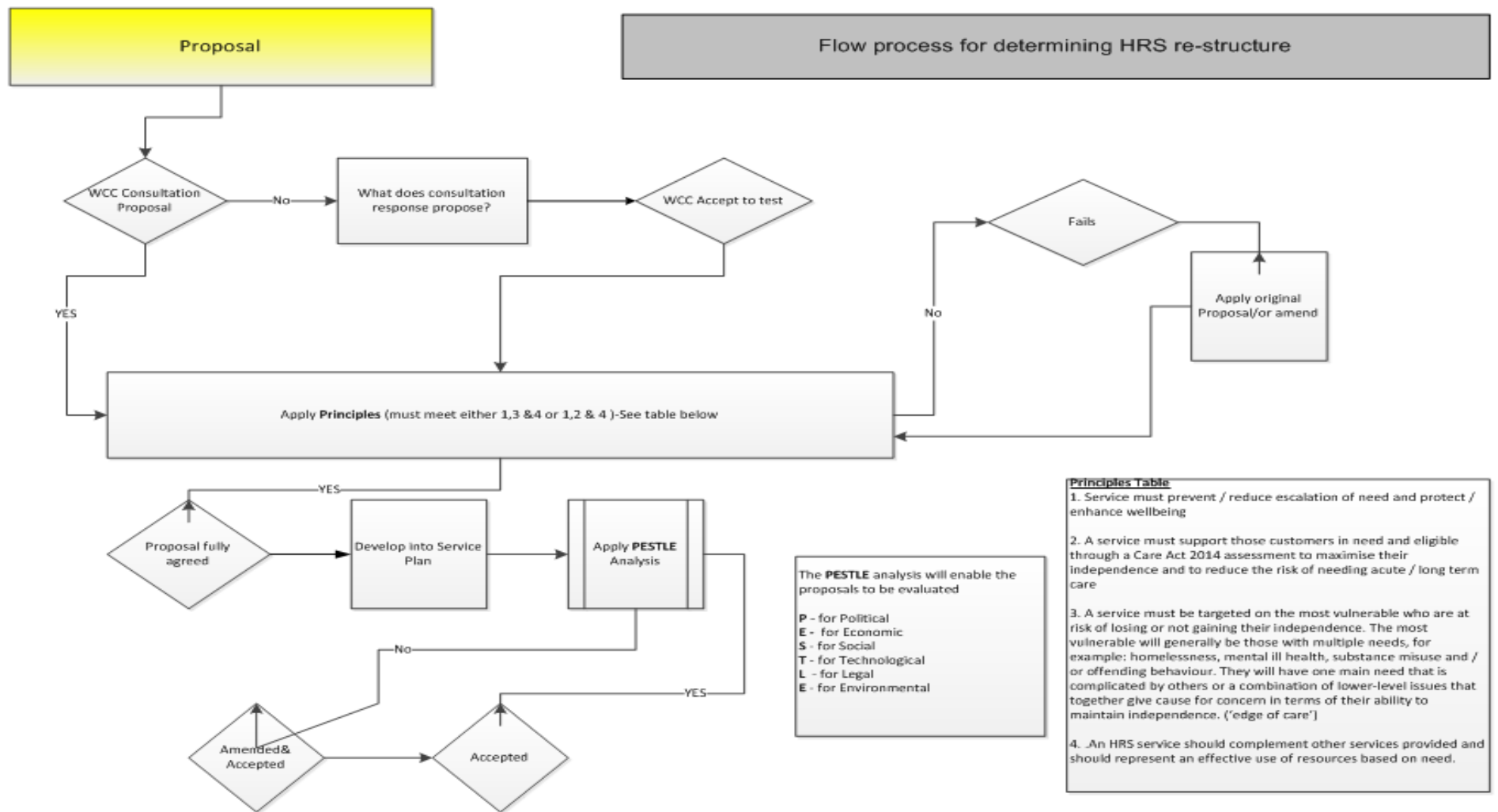


Figure 3: Flow process for determining Housing Related Support re-structure

In order for a proposal to be successfully taken forward, it must meet the standards detailed below:

- Principles one (1) and four (4) must be met
- Either Principle two (2) or Principle three (3) must be met

Once all of the detailed proposals have been progressed, each of them and the subsequent service delivery plan is subject to a PESTLE⁴ type analysis.

The principles will ensure that re-structured Housing Related Support services prevent escalation of need for more acute services and / or promote individual well-being as required by the Care Act 2014.

One of the proposals consulted on related directly to the application of eligibility criteria as a means of ensuring that Housing Related Support services were utilised by those in most need of support.

Eligibility Criteria

Through the application of the methodology detailed above, the Partnership Group has developed clear eligibility criteria to determine access to HRS services. At the highest level, eligibility for a HRS service will be defined through **either** one of the following:

Eligible for Social Care and Support (Care Act 2014) (Appendix 1)

The person will have eligible needs if they meet all of the following:

- they have care and support needs as a result of a physical or mental condition;
- because of those needs, they cannot achieve two or more of the outcomes specified;
- as a result, there is a significant impact on their wellbeing.

The outcomes are specified in the regulations, and include people's day-to-day outcomes such as dressing maintaining personal relationships, and working or going to school.

Or

'Edge of Care' (Appendix 2)

The definition of 'edge of care' is taken from No Secrets 2000 guidance and has been updated in line with the requirements of the Care Act 2014. This means that a person who is on the 'edge of care' is experiencing vulnerabilities that do not meet the threshold to access statutory support from Adult Social Care under the Care Act 2014.

⁴ Political, Economic, Social, Technical, Legal and Environmental. <http://pestleanalysis.com/>

A person on the 'edge of care' is defined as a someone aged 16 years and over who is, or may be, in need of a HRS service to prevent, reduce and/or delay the need for longer term care and support; and/or promote well-being by reason of:

- disability
- age
- illness
- substance misuse
- homelessness
- experience of domestic abuse
- experience of institutional living such as prison or long stay hospital or children's residential care service

Who are, or may be, unable to take care of themselves or protect themselves from significant harm or serious exploitation; or represent a threat of harm to their community.

Case Studies (Appendix 3)

Concerns were raised in the consultation that the proposed eligibility criteria was too care focused, which would result in some particularly vulnerable groups being excluded from Housing Related Support services.

A number of anonymous case studies, provided by partners representing Adult Offenders and Homeless people with support needs, were used to test the fairness of the Eligibility Criteria. Through 'the Partnership Group', each case study had the eligibility criteria applied to ensure that services would be accessible to those who were most vulnerable.

Having completed this exercise, it was agreed that the eligibility criteria as detailed was adequately balanced to represent both care and support. HRS services would be accessible to the most vulnerable customers and would support prevention for a wide range of customers

Assumptions

The following assumptions under-pin the proposed re-structure of Housing Related Support services:

- There is a need for support to vulnerable adults who meet eligibility criteria as defined by **either** the Care Act 2014 **or** the 'edge of care' definition.
- Suitably skilled organisations and enterprises exist who would be interested in tendering and providing support to customers of Housing Related Support services as re-designed.
- Provision would be available to adults aged 16 years and over.
- Commissioning and procurement resources will be made available from within the People Group to progress a competitive tender exercise where required.
- Any commissioned support providers would link appropriately with other relevant services, including Social Care and Support.

- All HRS services will be monitored and evaluated to ensure they are achieving intended outcomes

Scope

In scope:

The recommendations of this report will impact upon vulnerable adults, their family/carers, service providers and a range of statutory organisations operating across Warwickshire.

Out of scope:

Young people under the age of 16 years.

Dependencies

Progressing recommendations will be impacted upon and be impacted by:

- Warwickshire County Council's One Organisational Plan.
- Implementation of the Care Act 2014.

Constraints

To ensure any new arrangements can be supported by a range of organisations engagement activity will be required to support the development of an appropriate service specification.

Proposal

Following analysis of all consultation responses and application of the key principles detailed above, the proposed plan for the re-structure of Housing Related Support services is as follows:

The proposals consulted on were grouped into three key areas:

- a. Services that will be changed
- b. Services that will no longer be provided
- c. Services that will continue unchanged

These proposed changes will be effective during 2015-2016

Proposal 1

For all new Housing Related Support services: That in the future Housing Related Support services should only support those customers who are assessed as being eligible for social care services (Care Act 2014) or as being on the "edge of care"

Overarching themes from the consultation responses were:

- That HRS services should be available to those who need them and that everyone should be treated equally and without discrimination;
- That HRS services should prioritise the most vulnerable people and any revised eligibility criteria should ensure that people in need are not overlooked;
- That HRS services should focus on providing early intervention and prevention support so that people are not in a crisis;
- That HRS services should remain unchanged and the Council should look to make savings in other areas.

Impact of this proposal

The application of clear eligibility criteria will ensure that Housing Related Support services are available for the most vulnerable. The key principles in the Care Act 2014 that relate to preventing, delaying or reducing the need for more acute services; and promoting well-being will be assured.

What we will do by applying the principles:

- We will develop eligibility criteria and service pathways for HRS services that focuses on those most vulnerable and in need;
- We will retain this proposal but will work to ensure that the combination of eligibility for social care support (Care Act 2014) and being on the 'edge of care' complement each other and support those most in need;
- We will develop clear assessment guidance for the application of the eligibility criterion and ensure that there are clear service pathways
- We will develop a robust definition of Housing Related Support that can be used to ensure that services meet defined outcomes.

What will happen?	When will this take effect?
We will introduce an eligibility criteria based on either Care Act 2014 or a definition of 'edge of care'	All new services from November 2015

Proposal 2

We propose to change services for single homeless people with support needs who require an accommodation based service. We will focus on helping people to develop the skills that prevent future homelessness and gain the skills and experience to improve opportunities for paid employment.

Overarching themes from the consultation responses were:

- Single homeless people need support as they are very often not eligible for statutory homeless support from the Local Housing Authorities. They often have multiple needs that have a negative impact on their ability to maintain accommodation;

- Services for single homeless people should help people to be empowered and live independently;
- Current services are already providing this support and therefore should remain unchanged;
- There are not enough accommodation based services for single homeless people across the County and in particular, there are not enough emergency access hostels to take people off the streets;
- If these services are reduced or withdrawn, there will be increased pressure on other services such as housing, mental health services and probation.

Impact of this Proposal

It is anticipated that there would be minimal loss of accommodation based service for these customers. However, there will be a re-design of the service types available by altering the balance between very short term, emergency type services and those that offer longer term support to move on.

This proposal will ensure that services are better spread across the county. This will mean that there will be some re-distribution of HRS services to better ensure that all districts are appropriately serviced.

Customers who have multiple and complex needs that are either the cause of their homelessness or contribute to their ability to sustain accommodation in the longer term will be better supported by this proposal. However, it is important that any re-designed services are able to meet the needs of Adult Offenders and work in partnership with relevant Criminal Justice agencies.

We anticipate that there may be an impact on those customers who are homeless but do not have a need for intensive support. Although a number of organisations⁵ highlight increasing homelessness as a potential result of re-structuring HRS services for homeless people, there is no published direct correlation on which to accurately measure impact.

What we will do by applying the principles:

- We will re-commission accommodation based services for Single Homeless with support needs, including emergency access hostel. These services will be commissioned to support multiple and complex needs, including those presented by adult offenders;
- To use the new eligibility criteria to ensure that commissioned services meet the requirements of those who are most vulnerable;
- Work with Housing Associations, The Voluntary Sector, Warwickshire and West Mercia Community Rehabilitation Company and the five District & Borough Councils to identify alternative accommodation solutions and to identify all relevant funding streams to support the development of these services.

⁵ <http://www.homeless.org.uk/>

What will happen?	When will this take effect?
We will re-commission by competitive tender, accommodation based services for Single Homeless with support needs. These services will also support adult offenders.	New services from April 2016

Proposal 3

Proposal to stop funding for: Homeless families with support needs – Gypsy & Traveller groups – People with non-specialist, generic Housing Related Support needs – Adult offenders – Floating support for Single Homeless people - Young Offenders

Overarching themes from consultation responses were:

- Universal services such as Citizens Advice Bureau and District and Borough Council Housing Options Teams do not have the capacity to absorb those people who need support but are excluded from re-structured Housing Related Support services;
- Withdrawing non-specialist Housing Related Support floating support may result in increased pressure on other services such as housing, hospital accident and emergency services; GP services; and the criminal justice system.
- Services such as District and Borough Council Housing Services are often difficult for people to access;
- Customers will struggle to manage without HRS, which in turn could lead to increased homelessness. If people are less able to manage debts, budgeting and bills, then this will impact on their ability to retain their accommodation;
- There will be an impact on community safety if specialist Adult Offender services are withdrawn. More universal homeless services will not have the expertise to manage the risk on the wider community posed by some offenders.

Impact of this Proposal

There will be a loss of HRS service that is available specifically for the **Gypsy and Traveller** community. This will mean that customers will need to access a non-specialist HRS or universal services such as Citizens Advice Bureau.

Any re-designed HRS service and universal services must be able to achieve effective engagement with customers. They should have some insight into the external factors that are experienced by the Traveller community and impact on a person's ability to achieve identified outcomes.

The county council delivers a Gypsy and Traveller Liaison Service, which operates independently of the HRS service and will be a valuable contact point for a re-designed non-specialist HRS service and any universal services that are accessible to eligible members of the Traveller community.

The withdrawal of the specialist HRS service will mean a loss of 13 support placements for the Traveller community. The Traveller community will experience exclusion from support if re-designed services are unable to gain access to the Community or universal services are unavailable.

There will be a loss of HRS floating support service that is available to **Adult Offenders, Young Offenders** and **Single Homeless with support needs**. This will mean that customers will need to access either other specialist HRS services; non-specialist HRS services or universal services such as Citizens Advice Bureau.

It is possible that there will be increased pressure on the Criminal Justice system as well as increased costs associated with eviction and homelessness. The most common support needs identified by recent customers of these specialist services were managing accommodation/avoiding eviction; obtaining paid work and managing substance misuse.

We will retain some **non-specialist** HRS across the County, although there will be reduction on the current level of service available. This retained service will be re-structured to address the needs of those eligible customers in the interim period prior to the commissioning of a new non-specialist HRS service from April 2016. This will mean that all District and Borough areas will experience a reduction in the availability of HRS service.

As these non-specialist HRS services support customers with a wide range of needs, it is possible that there will be increased pressure on Public Health, acute hospitals, Adult Social Care and Criminal Justice. This pressure may be reflected through increased footfall into services as well as increased costs associated with eviction and homelessness.

The most common support needs identified by recent customers of non-specialist HRS services are managing debt and managing accommodation or avoiding eviction. To maintain a focus on HRS, re-designed services will need to offer support to customers who have multiple needs rather than single financial issues that could be addressed through a universal service.

What we will do by applying the principles:

- We will work with the five District and Borough Councils, Housing Associations and Warwickshire and West Mercia Community Rehabilitation Company to develop a non-specialist Housing Related Support floating support service that can meet the needs of eligible customers and to agree how access to this service will be managed. This service will replace the retained but reduced non-specialist service.
- Work with Citizen Advice Bureau and the five District and Borough Councils to re-focus their priorities so they can support customers within this proposal;
- Ensure the Care Act 2014 principles of providing information and advice are maximised through the services delivered for older people to minimise isolation and loneliness;
- Ensure that the needs of adult offenders (as they related to accommodation) are addressed through re-structured HRS services and in particular, through

accommodation based services for those who are homeless with complex and multiple needs.

What will happen?	When will this take effect?
We will stop funding specialist floating support for the Gypsy and Traveller community	November 2015
We will stop funding specialist floating support for Single Homeless with support needs	November 2015
We will stop funding specialist floating support for Homeless Families with support needs	November 2015
We will stop funding specialist floating support for Adult Offenders	November 2015
We will stop funding specialist accommodation based support for Adult Offenders	March 2016
We will stop funding specialist floating support for Young Offenders	November 2015
We will reduce the amount of non-specialist (Generic) floating support that we fund with a view to developing a new non-specialist floating support service from 2016.	November 2015: new services from April 2016

These proposed changes will be effective during 2016-2017

Proposal 4

From April 2016, we are proposing to develop a new service offering support to young people who are leaving care; or are 17 years of age; or aged 16-21 years and at significant risk of homelessness and / or needing care services.

Overarching themes from the consultation responses were:

- There is a significant need for Housing Related Support service to support young people to prevent homelessness and promote independent living. Therefore, these services should not be restricted to those who are eligible for social care support (Care Act 2014) or on the 'edge of care';

- Service is required for those aged 16-17 years but should not be restricted to aged 21 years. The span should be 16 years to 25 years;
- Staff need to be qualified and equipped to support young people;
- Integration of services across health, education, social care and housing is essential to support young people to make positive life choices;
- Ensure that all relevant funding streams, including Housing Benefit are explored in order to provide seamless support to young people
- Impact of this Proposal
-
- This proposal means that there will be some reduction in specialist Housing Related Support services to Young People – in particular, Young Offenders. However, it is expected that services will be re-designed to meet the outcomes of young people who are at risk of homelessness.
-
- Re-designed specialist HRS services for Young People will need to improve access to emergency accommodation and appropriate accommodation for those who are 16-17 year old. In addition, re-designed services should be more focused on prevention activity.

What we will do by applying the principles:

- We will ensure that services commissioned will be integrated with other relevant services such as the Clinical Commissioning Groups, Education, Social Care and Support teams and Housing Associations and the five District & Borough Councils for young people;
- Develop and commission services that meet the needs of the most vulnerable up to the age of 25 years;
- Develop and commission services that have quality standards attached that ensure the provider has appropriately qualified and experienced staff who will promote independent living and prevent escalation of need and deliver outcomes;
- We will work with the five District and Borough Councils and community and voluntary organisations to explore alternative funding options to support these services.

What will happen?	When will this take effect?
We will re-commission Housing Related Support services for young people who are leaving care; or are 16 or 17 years of age; or aged 16-25 years and at significant risk of homelessness and/or needing care services (including young parents). We will do this by competitive tender.	New services from April 2016

Proposal 5

We are making two proposals relating to hrs services for older people:

1. That we should continue to support the Home Improvement Agency and Home Safety Check Scheme
2. That we should seek to make the allocation of HRS services for Older People fairer and more transparent across the county.

Overarching themes from the consultation responses were:

- It is important that people are treated fairly and that all older people have access to HRS services;
- It is also important to service users that they keep their Wardens/Sheltered Scheme Managers as provide important support;
- For some people, sheltered accommodation means that they do not have to move into residential care;
- Many people have moved into sheltered accommodation because of the level of support that is provided through Wardens/Scheme Managers and alarm provision;
- Preventing isolation and promoting social inclusion is an important function of the sheltered housing service, which would be lost if the Warden/Scheme Manager was removed.
- Any reduction in funding for sheltered accommodation will inevitably lead to increased costs elsewhere in the health and social care system.

Impact of this Proposal

The majority of Housing Related Support funding for older people is currently used to support the provision of sheltered scheme managers and lifeline alarms. Therefore, the application of this proposal will affect almost 4,000 customers living in sheltered accommodation across the County and a further 1,500 customers who have a lifeline.

The majority of sheltered accommodation that attracts HRS funding is in Warwick District, Stratford District and Nuneaton and Bedworth Borough.

We know from benchmarking with other Local Authorities and the approach taken in Rugby Borough that there are options to support the continuation of current sheltered scheme managers and lifeline alarms through Housing Benefit. However, it is anticipated that some re-structuring of this function would be required in order to ensure that those customers with the most need were supported.

If an alternative method of funding the continuation of current sheltered Scheme Managers and lifeline alarms is not identified and customers wish to retain this specific service, then customer charging may be an option.

It is anticipated that the application of either of the above proposals may mean that any retained scheme manager and lifeline alarm function will be reduced.

Given the range of support provided through Scheme Managers, it is possible that there will be increased pressure on a wide range of public services, including Adult Social Care and Support through the implementation of this proposal.

The County Council is proposing to offer HRS to eligible older people irrespective of the accommodation they live in. In addition, through our intention to support older people through the Home Improvement Agency service, older people will be supported to remain independent in their own home and therefore prevent avoidable entry to more acute services.

What we will do by applying the principles:

- To use the new eligibility criteria ensure that commissioned services meet the requirements of those who are most vulnerable;
- We will make sure people are supported by using the Home Improvement Agency and Home Safety Check Scheme to enable people in their own homes / sheltered accommodation to live independently within their home as long as possible;
- Ensure the Care Act principles of providing information and advice are maximised through the services delivered for older people to minimise isolation and loneliness;
- We know from benchmarking against other Local Authorities that there are opportunities to access Housing Benefit to assist with the funding of support in sheltered accommodation. We will continue to explore this option with the five District & Borough Councils, this will mean that some HRS funding can be identified to provide a floating support service giving access to eligible older people irrespective of their accommodation;
- We also know from other Local Authorities that there are alternative methods for funding alarm services (or funding assistive technology) and we will explore these opportunities.

What will happen?	When will this take effect?
We will stop providing contributory funding to support scheme managers and lifeline alarm services in sheltered accommodation.	March 2016
We will continue to fund Home Improvement Agencies	On-going
We will commission by competitive tender a new non-specialist floating support service for Warwickshire citizens (including Older People)	New Service from April 2016

Proposal 6

There are some Housing Related Support services that we are not currently proposing to make any changes to at this time: 'Independent Living Service for

people who misuse drugs and / or alcohol’ and ‘Services for people experiencing domestic abuse’

Overarching themes from the consultation responses were:

- Joint commissioning is crucial to ensure that the HRS needs of these clients groups are met. There is an opportunity to ensure that HRS services are better linked to other services such as the treatment programme for substance misusers and the Police and Crime Commissioner;
- Although these services are currently jointly commissioned, funding is separate. By having a single, pooled budget for these services, there may be opportunities for a more streamlined service that meets the needs of more people;
- Services should be re-commissioned based on the needs of the community and local priorities.

Impact of this Proposal

This proposal will ensure that any future re-design of the Housing Related Support element of these services will be strategic and therefore meet the priorities of a range of stakeholders.

What we will do by applying the principles:

- We will update the needs analysis associated with these services in order to ensure that future commissioning is needs-led;
- We will work with the Office of the Police and Crime Commissioner and Clinical Commissioning Groups to explore the developments around joint commissioning including funding methods for future services;
- We will ask customers to work in partnership to develop revised service models that meet need.

What will happen?	When will this take effect?
<p>We will continue to fund Housing Related Support for substance misusers until the end of the current agreement. We will seek to re-commission a new service in partnership with the Warwickshire Drug Alcohol Action Team and other partners.</p>	<p>Current agreement to end March 2016. New services from April 2016</p>
<p>We will continue to fund Housing Related Support for people experiencing domestic abuse until the end of the current agreement. We will seek to re-commission a new service with Communities Group and other partners.</p>	<p>Current agreement to end March 2017 New services from April 2017</p>

These proposed changes will be effective during 2017-2018

Proposal 7

For services supporting people living with mental ill health, learning disability and / or physical / sensory impairment, the proposal is to develop a new targeted service that would focus on supporting people creatively in the community to develop new skills to enable them to take more control of their lives and maintain their independence.

Overarching themes from the consultation responses were:

- HRS services support should help a person to live independently by supporting them to gain independent living skills and help them to make their own choices;
- There needs to be a mixed range of accommodation based and floating support services to meet the needs of these service users;
- Services need to be designed to meet those who are in need of higher levels of support to prevent escalation of need alongside support for those who would benefit from a shorter term, community based solution;
- People living with mental ill health benefit from on-going support and people need to have someone to go to if they need some advice to prevent an escalation of need;
- If eligibility is restricted only to those who are eligible for social care support, then this could result in increased pressure on other services;
- How services will be developed needs a clearer explanation;
- More support is needed in the community to enable people to live independently and participate.

Impact of this Proposal

Some customers will have their care and support needs reviewed and those needs that are eligible as determined by the Care Act 2014 will be met by statutory service provision.

There are currently 407 customers in receipt of specialist Housing Related Support, many of whom will also be eligible to have their needs met through a statutory service. Current evidence tells us that 80% of customers with a learning disability and all customers living with mental ill health who receive Housing Related Support are also eligible for statutory services.

We will need to complete a review of needs for each of the customers who are in receipt of both HRS and statutory care services to understand the level and type of support needed to meet individual needs. Although some impact on social care services is anticipated, previous experience of completing this type of review for people with a learning disability has shown this impact to be minimal.

For the customer, this proposal will ensure that support for long term needs is more secure. Housing Related Support services are discretionary and the County Council does not have a duty to provide them. Therefore they should not be used to deliver support that is relevant for statutory service provision.

What we will do by applying the principles:

- To use the new eligibility criteria to ensure that commissioned services meet the requirements of those who are most vulnerable;
- We will work with customers and the Clinical Commissioning Groups, Social Care & Support teams, the Voluntary Sector and Housing Associations and the five District & Borough Councils to re-design services that will promote independent living;
- We will commission a range of support services based on outcomes to meet identified need.

What will happen?	When will this take effect?
We will stop funding current services for People with a Learning Disability; mental ill health; physical impairment; sensory impairment.	March 2017
We will ensure that all relevant customers receive a review of their needs.	2016 - 2017
We will re-commission by competitive tender, a disability service comprised of both accommodation based and floating support services	New Services from April 2017

Summary

To summarise, the impact of the consultation process on the original proposals, applying the methodology as described is as follows:

- We proposed to end funding to all non-specialist HRS floating support. However, following consultation, we will be retaining some non-specialist HRS floating support service for eligible customers, including the Gypsy and Traveller community.
- We proposed to end funding to specialist HRS services for adult offenders. However, following consultation, we will be combining HRS for this customer group with services for Single Homeless people with support needs.
- We proposed to focus specialist HRS services for eligible young people on those aged 16 to 21 years (inclusive). However, following consultation, we will

retain the current agreement for young people's HRS services to support those aged between 16 and 25 years (inclusive)

- We proposed to establish eligibility criteria relating to either the Care Act 2014 or an 'edge of care' definition. Following consultation, we will retain the eligibility criteria as described but will clarify the 'edge of care' definition to ensure that services are available to the most vulnerable citizens.

All other proposals will be implemented without change and service models will be developed accordingly.

Recommendation

To implement the revised Housing Related Support proposals contained within this report and develop a detailed delivery plan.

This approach would realise the OOP savings target. Services will be focused on the most vulnerable citizens. They will promote individual well-being and help to prevent, delay or reduce dependence on more acute services.

Taking a strategic approach to re-design will ensure that access to available funding across agencies is maximised and the impact of improved customer outcomes is felt across the public service economy.

The methodology detailed in Figure 3 and the associated key principles have been used to measure how far a proposal will deliver re-structured services that meet the requirements of the Care Act 2014 and deliver OOP savings target.

Some consultation respondents stated that they preferred HRS services to remain unchanged. By applying the methodology, we are able to determine whether or not proposals would deliver the OOP savings target and meet the needs of the most vulnerable.

Application of this methodology has allowed us to consistently test our original proposal; or any alternative proposal offered through the consultation. From this, we have developed a clear plan for re-structuring HRS services.

Each of the final proposals detailed in this report will have a PESTLE⁶ analysis to ensure that they are strategically relevant and that the business impact is understood. As the detailed delivery plan is developed in readiness for competitive tender or negotiated re-design, this analysis will be applied to each proposed service pathway.

There will be some reduction in the availability of Housing Related Support services and this re-structure will ensure that we focus specifically on those in the most need of support. There will be a measurable impact on promoting well-being and preventing/delaying/reducing the need for more acute service.

⁶ <http://pestleanalysis.com/>

This approach will encourage a strategic approach to re-designing Housing Related Support services that supports key priorities and the outcomes of eligible customers.

Costs and Funding

The One Organisational Plan Savings Plan (OOP)

Warwickshire is facing unprecedented restraints on resources and has made commitments to deliver £92 million in savings across the Council by 2018.

£25 million of this savings target will be from Adult Social Care.

The OOP savings target for HRS was revised following Councils Budget Setting Session for 2015-16. From February 2015 the revised savings target over the next three years is shown below:

2015-2016	2016-2017	2017-2018
£'000	£'000	£'000
300	1,828	3,725

The current budget for HRS services is £8.6 million. If the OOP target is successfully applied, then the budget for these services will reduce to £4.875 million by 2018.

The proposed pattern of future funding is as detailed in Figure 4 below:

Figure 4: Proposed future annual funding by client grouping

Proposed Client Groupings	Proposed annual contract budget
Home Improvement Agency/ Home Safety Check Scheme	£ 250,000
Leaseholders	£ 8,109
Disabilities (mental ill health; learning disability; physical and/or sensory impairment)	£1,300,000
Single Homeless with support needs	£1,027,090
Non-specialist Housing Related Support	£ 786,000
Young People (care leavers; at risk;) and Young Parents	£ 900,000
People experiencing domestic abuse	£ 343,583
Substance Misusers	£ 184,937

The financial impact of this proposal is illustrated in Figure 5

Figure 5: Financial impact of proposed re-structure

Primary Client Group	2014-2015 Contract Spend	Proposed annual Contract Budget	Impact of proposed Re-Structure
HIA/Home Safety Check	£150,168	£250,000	£99,832

Scheme			
Leaseholders	£8,109	£8,109	£0
Physical & Sensory Impairment	£96,025	£1,300,000	(£1,367,929)
Learning Disability	£1,639,069		
Mental Health	£932,835		
Single Homeless with support needs	£976,820	£1,027,090	(£223,242)
Adult Offenders	£273,512	£786,000	(£2,175,447)
Non-Specialist Housing Related Support	£890,001		
Gypsy & Traveller	£40,251		
Older People/Frail Elderly	£1,951,818		
Homeless Families with support needs	£79,377		
Young People, Care Leavers, Young Offenders	£899,955	£900,000	(£169,747)
Young Parents	£169,792		
Substance Misuse	£184,937	£184,937	£0
People experiencing domestic abuse	£343,583	£343,583	£0
Non-Service Contract budget		£75,281	£75,281
TOTAL	£8,636,252	£4,875,000	(£3,761,252)

Implementation costs: these costs will relate to the time and staff resource required to deliver the change. It is anticipated that the majority of implementation costs will be identified in:

- Strategic Commissioning
- Procurement
- People Group Finance

There will be a requirement for Adult Social and Support Service engagement to review the HRS needs of current customers. This is particularly relevant to customers with a Learning Disability, Mental Ill Health, Physical and/or Sensory Impairment and some Older People with support needs. It is expected that any cost pressure to Adult Social Care resulting from this process will be funded from within the available HRS budget. It is therefore crucial to ensure that information on the number of reviews required is available without delay. In addition, the reviews themselves should be completed as early in the implementation process as possible to ensure that cost pressures are identified and accounted for.

Transitional costs and arrangements: It is anticipated that there may be some transitional costs to support customers through the change to a re-structured HRS

service. Funding has been identified within the savings plan to support any transitional costs that are evident.

Through the next phase of this planned re-structure, the 'Partnership Group' will develop a detailed plan to manage transitional and implementation arrangements for each of the primary client group areas identified in this report. This will include identification of the potential cost of implementation to Adult Social Care and Support.

It is essential that current service providers are engaged in this process as early as possible in order to ensure a smooth transition for customers.

Benefits

- Increased flexibility and choice of providers offering support to individuals;
- Development of a co-produced service specification outlining a range of expectations and requirements, e.g., customer outcomes, quality and performance monitoring;
- Improved outcomes for customers focused on promoting well-being and preventing, reducing, delaying the need for more acute services;
- Increase the ability of Social Care and Support teams and other relevant organisations to identify appropriate Housing Related Support services post assessment.

Risks and mitigation

- **Risk 1**
De-stabilisation of the market for HRS services
Mitigation: A clear communications plan is developed and maintained to ensure that all key stakeholders remain involved in the progress to re-structure.
- **Risk 2**
Cabinet, Group Leadership Team, customers, carers, service providers and key partner agencies do not agree with the proposals.
Mitigation: rationale to support changes is clear and transparent. There is ongoing communication with parties to engage them in the development of the service specification, contract material and re-design process as appropriate.
- **Risk 3**
A proposed recommendation does not eliminate discrimination, promote equality or foster good relations.
Mitigation: Equality Impact Assessment of proposed new arrangements is prepared and monitored on an ongoing basis.
- **Risk 4**
Proposals and subsequent service re-design does not result in improved support to customers, positive outcomes and value for money.

Mitigation: the re-design of Housing Related Support services must be developed to ensure that clear outcomes are promoted through the on-going application of the key principles; and appropriate review arrangements are in place to ensure continuous service improvement.

- **Risk 5**

Proposals and subsequent service re-design leads to an increase in cost pressures in Adult Social Care. Any cost pressure must be funded from within the proposed budget for Housing Related Support, which will potentially reduce the availability of commissioned service provision.

Mitigation: Through the next phase of the planned re-structure of Housing Related Support services, the 'Partnership Group' develops a methodology that will ensure that we understand the potential impact of savings on Adult Social Care. This is particularly relevant for disabilities and older people services.

- **Risk 6**

Insufficient resources are available to complete the reviews required to determine the Housing Related Support needs of customers who are known to Social Care and Support.

Mitigation: Work with Social Care and Support and Housing Related Support service providers to identify those customers who require a review of their support needs. There should be a clearly defined timescale for this work in order to ensure that any cost pressures to Adult Social Care are met appropriately.

Conclusion and Next Steps

The One Organisational Plan Savings target for Housing Related Support services means a reduction in available budget from £8.6 million to £4.875 million by 2018.

This reduction in funding means that it is inevitable that we will stop funding some services; and how we provide services will be different in the future. HRS services will be redesigned to ensure that, for the most vulnerable citizens of Warwickshire, wellbeing is promoted and available services are preventative in nature.

In order to meet our business outcomes and deliver the key principles of the Care Act 2014, we have made a number of proposals to re-structure Housing Related Support services across Warwickshire. These proposals included changing how we decide who is eligible for support; stopping some services, keeping some services the same and offering services in a different way.

A comprehensive public consultation was completed to ensure that citizens of Warwickshire had an opportunity to tell us:

- If they agree or disagree with our proposals
- What the impact of our proposals will be
- How we could do things differently

To ensure a strategic approach to re-structuring Housing Related Support services and to maintain the pace of change, the Warwickshire Housing Related Support Partnership Group ('the Partnership Group') was established.

Core membership of 'the Partnership Group' is the Heads of Housing for the five District/Borough Housing services; Warwickshire County Council Social Care and Support; Public Health; the Warwickshire and West Mercia Community Rehabilitation Company; and the County Council Strategic Commissioning Unit.

'The Partnership Group' produced:

- agreed set of key principles to form the basis of our decision-making when considering the consultation feedback
- agreed decision-making flowchart against which to test each key proposal
- Re-defined eligibility criteria to ensure that Housing Related Support services are utilised by those most in need of support.

By applying this decision-making process, a proposal to re-structure Housing Related Support in Warwickshire has been produced.

The proposed re-structure plan is:

What will happen?	When will this take effect?	Action to manage the impact
We will introduce an eligibility criteria based on either Care Act 2014 or a definition of 'edge of care'	All new services from November 2015	HRS service will be available to the most vulnerable.

What will happen?	When will this take effect?	Proposed revised budget	Action to manage the impact
We will re-commission by competitive tender, accommodation based services for Single Homeless with support needs. These services will also support adult offenders.	New services from April 2016	£1,027,090	Improved accommodation quality and placement geographically. Focus on the needs of the most vulnerable

What will happen?	When will this take effect?	Proposed revised budget	Action to manage the impact
We will stop funding specialist floating support for the Gypsy and Traveller community	November 2015		Re-designed non-specialist service will be available to support those customers who have multiple HRS needs.
We will stop funding specialist floating support for Single Homeless with support needs	November 2015		Universal services will support those individuals with single issues such as debt or housing need.
We will stop funding specialist floating support for Homeless Families with support needs	November 2015		
We will stop funding specialist floating support for Adult Offenders	November 2015		
We will stop funding specialist accommodation based support for Adult Offenders	March 2016		
We will stop funding specialist floating support for Young Offenders	November 2015		Re-designed services for young people will support young offenders with HRS needs
We will reduce the amount of non-specialist (Generic) floating support that we fund with a view to developing a new non-specialist floating support service from 2016; for citizens (including Older People).	November 2015: new services from April 2016		

What will happen?	When will this take effect?	Proposed revised budget	Action to manage the impact
We will re-commission Housing Related Support services for young people who are leaving care; or are 16 or 17 years of age; or aged 16-25 years and at significant risk of homelessness and/or needing care services (including young parents). We will do this by competitive tender.	New services from April 2016	£900,000	Re-designed HRS services will meet the outcomes of young people at risk of homelessness. Access to emergency accommodation will be improved. Improved focus on preventing homelessness.

What will happen?	When will this take effect?	Proposed revised budget	Action to manage the impact
We will stop providing contributory funding to support scheme managers and lifeline alarm services in sheltered accommodation.	March 2016		Re-commissioned non-specialist HRS service will support eligible older people irrespective of where they live.
We will continue to fund Home Improvement Agencies	On-going	£250,000	Increased funding for Home Improvement Agencies will enable older people to remain independent in their own home.
We will commission by competitive tender a new non-specialist floating support service for citizens (including Older People) as described above	New Service from April 2016	£786,000	

What will happen?	When will this take effect?	Proposed revised budget	Action to manage the impact
We will continue to fund Housing Related Support for substance misusers until the end of the current agreement. We will seek to re-commission a new service in partnership with the Warwickshire Drug Alcohol Action Team and other partners.	Current agreement to end March 2016. Action on future provision to be made by end December 2015.	£184,937	Future re-design of HRS element of these services will be strategic and therefore meet the priorities of a range of stakeholders.
We will continue to fund Housing Related Support for people experiencing domestic abuse until the end of the current agreement. We will seek to re-commission a new service with Communities Group and other partners by competitive tender.	Current agreement to end March 2017 Action on future provision to be made by end December 2016.	£343,583	

What will happen?	When will this take effect?	Proposed revised budget	Action to manage the impact
We will stop funding current services for People with a Learning Disability; mental ill health; physical impairment; sensory impairment.	March 2017	£1,300,000	Those long term needs identified through the proposed review process will be supported more securely through statutory funding. HRS services will complement care and support provided by other statutory partners.
We will ensure that all relevant customers receive a review of their needs.	2016 - 2017		
We will re-commission by competitive tender, a disability service comprised of both accommodation based and floating support services	New Services from April 2017		

A summary of this plan and an overview of the impact on funding by client group can be found in Appendix 4.

This plan meets our critical success factors below and will meet the requirements of the Care Act 2014 by promoting well-being and preventing/delaying/reducing the need for more acute services.

Critical Success Factors

- Housing Related Support services are re-designed to maximise the use of remaining funding
- Changes to service provision completed in a planned way
- Customers are supported throughout the process of change
- Stakeholders remain engaged throughout the project
- OOP savings achieved

'The Partnership Group' will now produce a detailed delivery plan that will show:

- how Housing Related Support services will be accessed
- where Housing Related Support services will be placed
- how the different models of Housing Related Support will be structured

The plan will also finalise the proportion of budget available for each service area and the procurement approach that will be taken.

We will develop a methodology to ensure that we are able to manage the transitional and implementation arrangements for each of the primary client groups identified in this report.

Through this mechanism, we will identify any potential cost pressures as they are relevant to Adult Social Care and develop a clear plan for mitigating this this.

A detailed project plan will be developed to ensure that the implementation phase is managed and current governance will be maintained through the Accommodation with Support Board.

Appendix One

96 Care and Support Statutory Guidance

Eligibility

6.100. The national eligibility criteria set a minimum threshold for adult care and support needs and carer support needs which local authorities must meet. All local authorities must comply with this national threshold. Authorities can also decide to meet needs that are not deemed to be eligible if they chose to do so.

6.101. The introduction of a national eligibility threshold provides more transparency on what level of need is eligible. More clarity will support authorities in deciding whether the earlier provision of information and advice or preventative services would delay a person from developing needs which meet the eligibility criteria or whether longer-term care and support might be needed. It should also help the person needing care or their carer to think more broadly about what support might be available in the local community or through their support network to meet their needs and support the outcomes they want to achieve.

What is the national eligibility threshold for adults needing care?

6.102. The eligibility threshold for adults with care and support needs is set out in the Care and Support (Eligibility Criteria) Regulations 2014 (the 'Eligibility Regulations'). The threshold is based on identifying how a person's needs affect their ability to achieve relevant outcomes, and how this impacts on their wellbeing.

6.103. In considering whether an adult with care and support needs has eligible needs, local authorities must consider whether:

- The adult's needs arise from or are related to a physical or mental impairment or illness.
- As a result of the adult's needs the adult is unable to achieve two or more of the specified outcomes (which are described in the guidance below).
- As a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult's wellbeing.

6.104. An adult's needs are only eligible where they meet all three of these conditions.

Interpreting the eligibility criteria

The adult's needs arise from or are related to a physical or mental impairment or illness

6.105. The first condition that local authorities must be satisfied about is that the adult's needs for care and support are due to a physical or mental impairment or illness and that they are not caused by other circumstantial factors. Local authorities must consider at this stage if the adult has a condition as a result of either physical, mental, sensory, learning or cognitive disabilities or illnesses, substance misuse or brain injury. The authority should base their judgment on the assessment of the adult and a formal diagnosis of the condition should not be required.

As a result of the adult's needs, the adult is unable to achieve two or more of the outcomes set out in the regulations

6.106. The second condition that authorities must consider is whether the adult is "unable" to achieve two or more of the outcomes set out in the regulations. Authorities must also be aware that the regulations provide that "being unable" to achieve an outcome includes any of the following circumstances, where the adult:

- is unable to achieve the outcome without assistance. This would include where an adult would be unable to do so even when assistance is provided. It also includes where the adult may need prompting for example, some adults may be physically able to wash but need reminding of the importance of personal hygiene;
- is able to achieve the outcome without assistance but doing so causes the adult significant pain, distress or anxiety. For example, an older person with severe arthritis may be able to prepare a meal, but doing so will leave them in severe pain and unable to eat the meal;
- is able to achieve the outcome without assistance, but doing so endangers or is likely to endanger the health or safety of the adult, or of others – for example, if the health or safety of another member of the family, including any child, could be endangered when an adult attempts to complete a task or an activity without relevant support;
- is able to achieve the outcome without assistance but takes significantly longer than would normally be expected. For example, an adult with a physical disability is able to dress themselves in the morning, but it takes them a long time to do this, leaves them exhausted and prevents them from achieving other outcomes.

6.107. The Eligibility Regulations set out a range of outcomes. Local authorities must consider whether the adult is unable to achieve two or more of these outcomes when making the eligibility determination. The following section of the guidance provides examples of how local authorities should consider each outcome set out in the Eligibility Regulations (which do not constitute an exhaustive list) when determining the adult's eligibility for care and support:

- (a) managing and maintaining nutrition
Local authorities should consider whether the adult has access to food and drink to maintain nutrition, and that the adult is able to prepare and consume the food and drink.
- (b) maintaining personal hygiene
Local authorities should, for example, consider the adult's ability to wash themselves and launder their clothes.
- (c) managing toilet needs
Local authorities should consider the adult's ability to access and use a toilet and manage their toilet needs.
- (d) being appropriately clothed
Local authorities should consider the adult's ability to dress themselves and to be appropriately dressed, for instance in relation to the weather to maintain their health.
- (e) being able to make use of the home safely
Local authorities should consider the adult's ability to move around the home safely, which could for example include getting up steps, using kitchen facilities or accessing the bathroom. This should also include the immediate environment around the home such as access to the property, for example steps leading up to the home.

- (f) maintaining a habitable home environment
Local authorities should consider whether the condition of the adult's home is sufficiently clean and maintained to be safe. A habitable home is safe and has essential amenities. An adult may require support to sustain their occupancy of the home and to maintain amenities, such as water, electricity and gas.
- (g) developing and maintaining family or other personal relationships
Local authorities should consider whether the adult is lonely or isolated, either because their needs prevent them from maintaining the personal relationships they have or because their needs prevent them from developing new relationships.
- (h) accessing and engaging in work, training, education or volunteering
Local authorities should consider whether the adult has an opportunity to apply themselves and contribute to society through work, training, education or volunteering, subject to their own wishes in this regard. This includes the physical access to any facility and support with the participation in the relevant activity.
- (i) making use of necessary facilities or services in the local community including public transport and recreational facilities or services
Local authorities should consider the adult's ability to get around in the community safely and consider their ability to use such facilities as public transport, shops or recreational facilities when considering the impact on their wellbeing. Local authorities do not have responsibility for the provision of NHS services such as patient transport, however they should consider needs for support when the adult is attending healthcare appointments.
- (j) carrying out any caring responsibilities the adult has for a child
Local authorities should consider any parenting or other caring responsibilities the person has. The adult may for example be a step-parent with caring responsibilities for their spouse's children.

As a consequence there is, or there is likely to be, a significant impact on the adult's wellbeing

6.108. The third condition that must be met is that local authorities must consider whether the adult's needs and their inability to achieve the outcomes above cause or risk causing a significant impact on their wellbeing. The meaning of "wellbeing" is set out in Section 1 of the Care Act and more detail is described in chapter 1 of this guidance.

6.109. Local authorities must determine how the adult's inability to achieve the outcomes above impacts on their wellbeing. Where the adult is unable to achieve more than one of the outcomes, the local authority does not need to consider the impact of each individually, but should consider whether the cumulative effect of being unable to achieve those outcomes is one of a "significant impact on wellbeing". In doing so, local authorities should also consider whether:

- the adult's inability to achieve the outcomes above impacts on at least one of the areas of wellbeing (as described in Section 1 of the Act and chapter 1 of this guidance) in a significant way, or,
- the effect of the impact on a number of the areas of wellbeing mean that there is a significant impact on the adult's overall wellbeing.

6.110. The term "significant" is not defined by the regulations, and must therefore be understood to have its everyday meaning. Local authorities will have to consider whether the adult's needs and their consequent inability to achieve the relevant outcomes will have an important, consequential effect on their daily lives, their independence and their wellbeing.

6.111. In making this judgment, local authorities should look to understand the adult's needs in the context of what is important to him or her. Needs may affect different people differently, because what is important to the individual's wellbeing may not be the same in all cases. Circumstances which create a significant impact on the wellbeing of one individual may not have the same effect on another.

6.112. The table below illustrates the interplay of the three conditions above, the outcomes listed in the eligibility regulations and the wellbeing principle, which is broken down into areas of wellbeing in (see chapter 1).

Appendix Two

'Edge of Care'

The definition of 'edge of care' is taken from No Secrets 2000 guidance and has been updated in line with the requirements of the Care Act 2014. This means that a person who is on the 'edge of care' is experiencing vulnerabilities that do not meet the threshold to access statutory support from Adult Social Care under the Care Act 2014.

Customers

People who may benefit from a Housing Related Support service will generally have either one main need that is complicated by others, or a combination of lower level

Issues that together are a cause for concern. They might include:

- presenting risky behaviours,
- a chaotic lifestyle,
- experiencing difficulties in a certain aspect of their life, e.g. homelessness or a

Edge of Care	<p>A person on the 'edge of care' is defined as:</p> <p>A person aged 16 years and over who is, or may be, in need of a Housing Related Support service to prevent, reduce and/or delay the need for longer term care and support; and/or promote well-being by reason of:</p> <ul style="list-style-type: none">• disability• age• illness• substance misuse• homelessness• experience of domestic abuse• experience of institutional living such as prison or long stay hospital or children's residential care service <p>Who are, or may be, unable to take care of themselves or protect themselves from significant harm or serious exploitation; or represent a threat of harm to their community.</p>
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significant threat of homelessness, criminal justice, self-harm, significant debt that threatens their ability to maintain their independence,

- People with the inability to engage and develop a future for themselves or escalating needs
- where one or more of these have a significant and negative impact on their ability to gain or maintain accommodation

The above is indicative and not exhaustive.

Appendix Three

Case Study 1

Completed by, Accommodation Officer for the Warwickshire and West Mercia Community Rehabilitation Company

Case Reference	1A
Date Referred	2014
Outcome	Placed in supported housing
NPS/CRC	CRC
Risk Level	Medium risk to the public
Support Needs	Alcohol

Brief Synopsis of Case

1A was staying at an approved premise (AP) and was referred to the Probation accommodation SPOC for a move on placement. On initial receipt of the referral an assessment was made and 6 supported housing projects (funded through Housing Related Support) across Warwickshire (Provider one in Leamington, Provider two in Nuneaton, provider three in Stratford, provider four in Warwick, provider five in Rugby and provider six in Leamington or Rugby) were identified as potentially suitable. Onward referrals were sent to attempt to secure the required placement. Following these referrals, provider one placed 1A on their waiting list but provider five did not have any suitable vacancies and therefore refused the referral. 1A also advised that they did not want to be in Stratford so the referral to provider three was withdrawn.

It was identified that another referral for an offender had been submitted to provider six for their Leamington project and, following discussions with Offender Managers and AP keyworkers, it was agreed that placing the customer with the same provider would not be ideal; it was therefore decided that provider six Rugby project only should process the referral. 1A was accepted by provider six and moved in 2 months after the referral was submitted to the Probation SPOC. The referrals to other supported housing providers were subsequently withdrawn.

This is an example of how the system can work and demonstrates that a smooth move from custody to approved premises to supported housing can be achieved.

Case Study 2

Completed by, Accommodation Officer for the Warwickshire and West Mercia Community Rehabilitation Company

Case Reference	2A
Date Referred	2014
Outcome	Withdrawn – Reoffended (Sentence Revoked and Resentenced)
Date of Outcome	2014
NPS/CRC	NPS
Risk Level	High to the public
Support Needs	Alcohol, ETE, Mental Health, Self Harm

Brief Synopsis of Case

2A was of No Fixed Abode (NFA) and sofa surfing; 2A was referred to the Probation SPOC to find a placement at a supported housing project due to vulnerability regarding both homelessness and other support needs. 2A had already registered with the local authority and 5 supported housing providers were identified as potentially suitable for him to be placed with. Referrals were sent to the first four providers, whilst further information needed to be gathered to make a referral to the latter. Within four weeks assessments had been arranged with two of the identified providers however, 2A reoffended and was resentenced to custody. As 2A would not be released on licence, Probation was unable to continue to support the referrals post-release, however, it was highly likely that 2A would be released NFA. Therefore, all providers were contacted and updated; rather than withdraw the referrals, this would give 2A the chance to make contact with those projects following his release and they would be able to continue to process the original referral in the usual way.

This is a good example of what can happen to the offenders who we are working with whilst solutions to accommodation problems can be found. Although it cannot be proven that 2A's housing situation directly lead to his re-offending, it is likely that it was a significant factor.

Case Study 3

Case Reference	3A
Date Referred	2015
Outcome	Ongoing
Date of Outcome	n/a
NPS/CRC	CRC
Risk Level	Medium risk to the public
Support Needs	Drugs, ETE, Finance, Mental Health, Self Harm

Brief Synopsis of Case

3A was referred to the Probation SPOC for assistance with housing following a relationship breakdown with a parent and subsequently being asked to leave home; he is currently sofa surfing. Following assessment it was deduced that the most appropriate accommodation solution for 3A would be a supported housing placement, based on his presentation of support needs. 3A wanted to move to a different area of Warwickshire to make a 'fresh start'. As a result, it was identified that attempting to secure housing/support in 3A's home area would still need to be an option. Four housing/housing related support providers were identified as potentially suitable.

This case study demonstrates the demands of service users and how we attempt to accommodate those. Although placing someone outside the boundaries of their local authority can be difficult and sometimes problematic, where vulnerability is identified, the advantages of moving areas within a supportive environment justify the effort involved in making such referrals.

Further case studies considered:

- Male aged 22 with high support needs around both accommodation and floating support/advocacy in respect of all areas and mental health.
- Male aged 25 diagnosis of Asperger's, autism, and Tourette's he needs accommodation and this will need to be supported.
- Female aged 31 no formal diagnosis of either mental health or learning difficulties homeless so needs accommodation preferably supported housing previously unable to sustain a tenancy and will need at the floating support of high level if unable to secure supported housing .
- Male aged 19 former care leaver who is perpetrator of domestic abuse to partner. He is a prolific offender and current/ former drug user who is homeless he needs supported accommodation in particular surrounding his drug and violent behaviour.

Appendix 4

Summary of Proposals; perceived impact and financial impact by client group.

Proposal number - What will happen?	When	Existing budget	New budget	Perceived impact.
PROPOSAL 1. We will introduce an eligibility criteria based on either Care Act 2014 or a definition of 'edge of care'	All new services from October 2015			HRS service will be available to the most vulnerable.
PROPOSAL 2. We will re-commission by competitive tender, accommodation based services for Single Homeless with support needs. These services will also support adult offenders.	New services from April 2016	£1,250,332	↓ £1,027,090 17% reduction	Improved accommodation quality and placement geographically. Focus on the needs of the most vulnerable
PROPOSAL 3. We will stop funding specialist floating support for the Gypsy and Traveller community We will stop funding specialist floating support for Single Homeless with support needs We will stop funding specialist floating support for Homeless Families with support needs We will stop funding specialist floating support for Adult Offenders We will stop funding specialist accommodation based support for Adult Offenders We will stop funding specialist floating support for Young Offenders We will reduce the amount of non-specialist (Generic) floating support with a view to developing a new non-specialist floating support service from April 2016.	October 2015 October 2015 October 2015 October 2015 March 2016 October 2015 October 2015: new services from April 2016*	£2,961,447	↓ £786,000* 73% reduction	Re-designed non-specialist service will be available to support those customers who have multiple HRS needs. Universal services will support those individuals with single issues such as debt or housing need. Re-designed services for young people will support young offenders with HRS needs
PROPOSAL 4. We will re-commission Housing Related Support services for young people who are leaving care; or are 16 or 17 years of age; or aged 16-25 years and at significant risk of homelessness and/or needing care services (including young parents). We will do this by competitive tender.	New services from April 2016	£1,069,747	↓ £900,000 13% reduction	Re-designed HRS services will meet the outcomes of young people at risk of homelessness. Access to emergency accommodation will be improved. Improved focus on preventing homelessness.
PROPOSAL 5. We will stop providing contributory funding to support scheme managers and lifeline alarm services in sheltered accommodation. (Alternative funding sourced through HB) We will continue to fund Home Improvement Agencies We will commission by competitive tender a new non-specialist floating support service	March 2016 On-going New Service from April 2016*	£1,951,818 £150,168	↓ 100% reduction ↑ £250,000 66% uplift £786,000* as above	Re-commissioned non-specialist HRS service will support eligible older people irrespective of where they live. Increased funding for Home Improvement Agencies will enable older people to remain independent in their own home. Intensive Housing Management as an alternative source of funding
PROPOSAL 6. We will continue to fund Housing Related Support for substance misusers until the end of the current agreement. We will seek to re-commission a new service in partnership with the Warwickshire Drug Alcohol Action Team and other partners. We will continue to fund Housing Related Support for people experiencing domestic abuse until the end of the current agreement. We will seek to re-commission a new service with Communities Group and other partners by competitive tender.	Current agreement to end March 2016. Action on future provision to be made by end December 2015. Current agreement to end March 2016. Action on future provision to be made by end December 2015.	£184,937 £343,583	£184,937 £343,583 No Movement No Movement	Future re-design of HRS element of these services will be strategic and therefore meet the priorities of a range of stakeholders.
PROPOSAL 7. We will stop funding current services for People with a Learning Disability; mental ill health; physical impairment; sensory impairment. We will ensure that all relevant customers receive a review of their needs. We will re-commission by competitive tender, a disability service comprised of both accommodation based and floating support services	March 2017 2016 - 2017 New Services from April 2017	£2,667,929	↓ £1,300,000 51% reduction	Those long term needs identified through the proposed review process will be supported more securely through statutory funding. HRS services will complement care and support provided by other statutory partners.
Total		£8,636,252*	**£4,875,000	

Note - *Priority 5 existing budget (£1,951,818) is included within Priority 3 budget (2,961,447) - separated out here to reflect impact of the proposed budget. The Leaseholders budget of £8109 does not relate to a given priority and there is no net effect - the budget remains as is.

**Within the proposed budget £75,281 for contract transition and a Leaseholders budget of £8109 is included.

Primary Client Group	Current Contract Spend as at 31/03/15	Total grouped current contract spend 31/03/15	Proposed annual Contract Budget by 2018	Impact of proposed Re-Structure	Percentage impact %age	Current available Accommodation based units @31.03.15	Current available Floating support /Alarm units @31.03.15
HIA	£150,168	£150,168	£250,000	+ £99,832	66% uplift		1,150
Leaseholders	£8109	£8109	£8109	£0			33
Physical & Sensory Impairment	£96,025	£2,667,929	£1,300,000	- £1,367,929	51% drop	2	30
Learning Disability	£1,639,069				Stop current funding in March 2017 Then recommission new services in April 2017	94	113
Mental Health	£932,835				67	120	
Single Homeless with support needs	£976,820	£1,250,332	£1,027,090	- £223,242	17% drop	159	26
Offenders	£273,512				Recommission new services in April 2016		
Non-Specialist Housing Related Support	£890,001	£2,961,447	£786,000	- £2,175,447	73% drop	43	26
Gypsy & Traveller	£40,251				Stop current funding current services in October 2015 Then develop a non specialist generic floating support in April 2016	0	16
Older People/Frail Elderly	£1,951,818				0	0	
Homeless Families with support needs	£79,377				0	26	
Young People, Care Leavers, Young Offenders	£899,955	£1,069,747	£900,000	- £169,747	13% drop	64	55
Young Parents	£169,792				Recommission new services in April 2016	19	25
Substance Misuse	£184,937	£184,937	£184,937	£0		0	640
People experiencing domestic abuse	£343,583	£343,583	£343,583	£0		18	70
Non-Service Contract budget (transition)			£75,281	+ £75,281	contingency		
TOTAL	£8,636,252	£8,636,252	£4,875,000	- £3,761,252	43%		



APPENDIX TWO to Cabinet Report 18th August 2015

EQUALITY IMPACT ASSESSMENT/ ANALYSIS (EqIA)

Housing Related Support – STC-G

This version of the Equality Impact Assessment updates previous versions so as to reflect the position immediately prior to presentation to Cabinet on 18th August 2015. Further updates of the Assessment will be produced as the process of developing new services for the future continues.

Equality Impact Assessment/ Analysis (EqIA)

Group	People
Business Units/Service Area	Social Care and Support
Plan/ Strategy/ Policy/ Service being assessed	Housing Related Support STC-G
Is this is a new or existing policy/service? If existing policy/service please state date of last assessment	A mixture of existing and proposed new models of Housing Related Support in Warwickshire
EqIA Review team – List of members	Chris Lewington Zoe Mayhew Sue Green Deanna Phillips Hugh Gaster
Date of this assessment	20.01.14 Updated 04.08.15 (version 5)
Signature of completing officer (to be signed after the EqIA has been completed)	Zoe Mayhew
Are any of the outcomes from this assessment likely to result in complaints from existing services users and/ or members of the public? If yes please flag this with your Head of Service and the Customer Relations Team as soon as possible.	YES
Name and signature of Head of Service (to be signed after the EqIA has been completed)	Chris Lewington
Signature of GLT Equalities Champion (to be signed after the EqIA is completed and signed by the completing officer)	Chris Lewington

A copy of this form including relevant data and information to be forwarded to the Group Equalities Champion and the Corporate Equalities & Diversity Team



Working for Warwickshire

Form A1

INITIAL SCREENING FOR STRATEGIES/POLICIES/FUNCTIONS FOR EQUALITIES RELEVANCE TO ELIMINATE DISCRIMINATION, PROMOTE EQUALITY AND FOSTER GOOD RELATIONS



High relevance/priority



Medium relevance/priority



Low or no relevance/ priority

Note:

1. Tick coloured boxes appropriately, and depending on degree of relevance to each of the equality strands
2. Summaries of the legislation/guidance should be used to assist this screening process

Business Unit/Services:	Relevance/Risk to Equalities																										
	Gender			Race			Disability			Sexual Orientation			Religion/Belief			Age			Gender Reassignment			Pregnancy/ Maternity			Marriage/ Civil Partnership (only for staff)		
State the Function/Policy /Service/Strategy being assessed:	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
STC – G Housing Related Support		✓			✓		✓					✓			✓	✓					✓			✓			
<p>Are your proposals likely to impact on social inequalities e.g. child poverty for example or our most geographically disadvantaged communities? If yes please explain how.</p> <p>The annual budget for the Housing Related Support (HRS) programme is to be reduced from £8,600,000 in 2014-15 to £4,875,000 in 2017-18 The consequent reduction in service capacity will impact on social inequalities with less people in need of HRS being supported in future. However the re-alignment of the programme also provides an opportunity to adopt a more strategic approach to service delivery. This will enable us to ensure that future services can maximise the opportunities for</p>																								YES			

<p>individuals to make positive choices that will promote independent living and improve quality of life and to also ensure that future services will be focused on those in most need across the County. This process will also enable services to deliver better value for money within the reduced level of funding available.</p>	
<p>Are your proposals likely to impact on a carer who looks after older people or people with disabilities? If yes please explain how. By offering specific support to gain and/or maintain stable accommodation, re-aligned services will promote independent living and individual resilience. By taking a strategic approach to service development, we will be able to support those customers in the most need and thereby reduce the impact on acute services. Services will be focused on those in most need across the County.</p>	<p>YES</p>

Form A2 – Details of Plan/ Strategy/ Service/ Policy

Stage 1 – Scoping and Defining

(1) What are the aims and objectives of Plan/Strategy/Service/Policy?

The aim is to develop a range of HRS services that:

- a. are strategically relevant and fully integrated into the wider 'support offer' to our customers.
- b. reflect the needs and expressed views of customers
- c. are designed in partnership with key stakeholders
- d. are delivered within the reduced budget that has been agreed by Cabinet.
- e. are designed in accordance with four key principles requiring that future service must:
 - prevent / reduce escalation of need and protect / enhance wellbeing.
 - support those customers in need and eligible under the Care Act 2014 assessment to maximise their independence and to reduce the risk of needing acute / long term care.
 - be targeted at the most vulnerable, who are at risk of losing or not maintaining their independence. The most vulnerable will generally be those with multiple needs, **for example:** homelessness, mental ill health, substance misuse and / or offending behaviour. They will have one main need that is complicated by others or a combination of lower-level issues that together give cause for concern in terms of their ability to maintain independence. ('edge of care')
 - complement other services provided and should represent an effective use of resources based on need.

(2) How does it fit with Warwickshire County Council's wider objectives?

Within the People Group Strategic Commissioning Intentions, the need to review the range of current HRS services has been identified. This review and re-alignment of services will ensure a strategic and consistent approach to supporting the independence of vulnerable people.

It will support the Council's Core Purpose to *'develop and sustain a society that looks after its most vulnerable members, delivers appropriate, quality services at the right time, and seeks opportunities for economic growth and innovation'*.

It will support the connected outcomes that:

- *'Our communities and individuals are safe and protected from harm and able to remain independent for longer.'*
- *'The health and wellbeing of all in Warwickshire is protected.'*
- *'Our economy is vibrant, residents have access to jobs, training and skills development.'*
- *'Resources and services are targeted effectively, whether delivered by the local authority, commissioned or in partnership.'*

In addition it will also support the following People Group Outcomes:

People are independent:

- *'People, including those who are vulnerable, are able to live independently within their own homes and families, without the need for critical services to support them.'*
- *'People and communities are supported to develop social capital that enables them to help themselves and others.'*
- *'People can choose from a range of accommodation support which enables them to remain independent.'*

People Enjoy Life

- *'People avoid loneliness and enjoy an enhanced quality of life through opportunities and access to employment, recreation, family, social and community life.'*
- *'People enjoy positive personal and social relationships.'*

People are healthy

- *'People are mentally and emotionally healthy and resilient.'*

People contribute

- *'Vulnerable people are able to exercise their rights.'*

<p>(3) What are the expected outcomes?</p>	<p>The expected outcome is that HRS is re-aligned through re-modelling, re-commissioning or de-commissioning and is affordable within the agreed savings plan by 2017-2018.</p> <p>Strategically relevant services: That will maximise limited resources in order to offer the best outcomes to customers.</p> <p>Agreed purpose and focus: Enabling service providers and partners to be consistent and operate strategically in order to ensure the best outcomes to customers.</p> <p>Value for money: Through HRS services that maximise customer independence and offer a range of services that support vulnerable people.</p>
<p>(4) Which of the groups with protected characteristics is this intended to benefit? (see form A1 for list of protected groups)</p>	<p>All listed groups will benefit: Gender, Race, Disability, Sexual Orientation, Religion/Belief, Age, Gender Reassignment, Pregnancy/maternity, Marriage / Civil Partnership.</p> <p>The re-alignment of HRS will deliver robust support where it is needed across the County, within a reduced budget. Service design/development will need to ensure that they consider all groups with protected characteristics and social inequalities. In particular, where specialist services are de-commissioned, it is crucial that the remaining re-modelled support offer is able to support all groups with protected characteristics.</p>

Stage 2 - Information Gathering

(1) What type and range of evidence or information have you used to help you make a judgement about the plan/ strategy/ service/ policy?

A public consultation was conducted from 08/09/2014 to 28/11/2014. The consultation covered the entire HRS programme and asked for feedback on 7 proposals. As part of this exercise paper copies of the consultation questionnaire were sent to all HRS customers. Responses were received from a wide range of customers and also from stakeholders, including HRS service providers, relatives of customers, and other interested parties. The responses received have been analysed and the findings used to revise the original proposals put forward.

A programme of strategic reviews was completed between 2010 and 2013 and a needs analysis of the need for HRS in relation to 15 HRS customer categories has been developed to inform the process.

Knowledge of the current market for HRS and alternative funding streams has been utilised.

It is intended that all current customers of HRS services for people with a learning disability who are also in receipt of adult social care services will participate in a holistic review of needs.

All of the work that will be carried out will continue to include consideration of those groups who have protected characteristics and how they may be impacted by the savings proposals.

(2) Have you consulted on the plan/ strategy/ service/policy and if so with whom?

We have consulted with HRS customers, stakeholders, including service providers, and other interested parties through the public consultation that ended on 28th November 2014. This has included conducting 49 focus groups, together with individual interviews with members of the Gypsy and Traveller community.

We have also consulted within Strategic Commissioning with a view to ensuring that re-alignment resulting from funding reduction is strategic.

As the process of re-alignment of HRS services will take place over a 3 year financial cycle, it is anticipated that communication with key stakeholders, including service providers will be completed throughout the period.

We have been working with key stakeholders via the Warwickshire Housing Related Support Partnership Group ('the Partnership Group') whose membership included the Heads of Housing from the five districts / borough housing authorities and representatives of Probation and Public Health. The group has supported the process of developing new services.

This group is now to be succeeded by a Steering Group whose membership will include representatives of all of the above agencies together with representation from the Clinical Commissioning Groups operating in Warwickshire.

(3) Which of the groups with protected characteristics have you consulted with?

The consultation questionnaire was sent to every HRS customer. In addition, we worked with service providers to facilitate feedback from their customers.

- 1,172 questionnaire responses were received, completed in paper form or online. Of those who completed the attached equality questions, 69.6% were customers of an HRS service and 4.2% were family carers or informal carers.
- 10.2% were aged between 16 and 29; 15.6% were 30 to 44; 18.1% were 45 to 59; 28.5% were 60 to 75 and 27.7% were 75 years old or older. The preponderance of older people reflects the considerable interest of older people concerning proposals for services for that age group.
- 90.09% were White British with the remainder spread over a number of ethnic origins as follows: White Irish (1.87%), Asian or Asian British (1.72%), Gypsy or Irish Traveller (1.58%), Mixed / multiple ethnic group (1.44%), Black/African/Caribbean/Black British (1.44%), and 'Other White' (1.29%).
- We also conducted 49 focus groups of which 33 were with customers of services for people with a learning disability. These sessions were conducted by Grapevine, an organisation that specialises in working with people with learning disabilities or autism. (151 customers or others with Learning Disabilities attended).

The remaining focus groups are summarised below:

Primary Client Group catered for by service	Focus Groups	Customers attending	Relatives / Carers attending
Young People at Risk / care leavers	3	16	0
Frail Elderly	1	14	1
Homeless Families	1	3	0
Offenders	2	12	0
Older people	5	60	6
Physical and / or Sensory Disability	1	5	0
Single homeless	2	18	0
Young parents	1	3	0
TOTAL	16	131	7

In addition, 5 individual interviews were conducted with members of the Gypsy and Traveller community.

Stage 3 – Analysis of impact

<p>(1) From your data and consultations is there any adverse or negative impact identified for any particular group which could amount to discrimination?</p> <p>If yes, identify the groups and how they are affected.</p>	<p>RACE</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change <p>The proposed changes to HRS may adversely affect the Gypsy and Traveller community.</p> <p>We will work with key partner agencies to develop a non-specialist HRS floating support service that can meet the needs of eligible customers and to agree how access to this service can be managed.</p> <p>In so doing it will be necessary to ensure that the service meets the needs of a wide range of customers.</p>	<p>DISABILITY</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change <p>The proposed re-alignment of HRS services may have adverse impacts for adults with disabilities.</p> <p>It is intended that the current arrangements are re-designed to offer a more flexible, community based service. This will support customers to maintain their tenancies and prevent or delay the need for more intensive services.</p> <p>Under this proposal, all customers who are in receipt of both statutory service provision and housing related support will have a review of their holistic needs. This could mean that the housing related support provision for some customers will be reduced.</p>	<p>GENDER</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change
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	<p>MARRIAGE/CIVIL PARTNERSHIP</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change 	<p>AGE</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change <p>Proposed changes will affect 3,700 older people households living in sheltered schemes and 1,500 households with an alarm service.</p> <p>In both cases funding is currently provided, subject to financial status, regardless as to whether or not a customer needs support.</p> <p>Responses to the consultation included that sheltered housing services prevent isolation and promote social inclusion and the concern was expressed that this would be lost if Wardens /Scheme Managers were removed. Concern was also expressed that there would be an impact on safety and increased fear if alarm services were reduced or removed.</p> <p>We will explore opportunities to access Housing Benefit and other relevant funding streams to fund these services.</p>	<p>GENDER REASSIGNMENT</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change

	<p>RELIGION/BELIEF</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change 	<p>PREGNANCY MATERNITY</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change 	<p>SEXUAL ORIENTATION</p> <p>Delivery of the savings plan may have adverse impacts for:</p> <ul style="list-style-type: none"> • Customers from the service changes • Communities because local services are likely to change
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(2) If there is an adverse impact, can this be justified?

From 2003 until 2009 HRS services were paid for via a ring-fenced grant provided for this purpose. The ring-fence was removed in 2009 giving Warwickshire complete control over how this money was spent. Finally since 2011, the money has been incorporated into the local authority Formula Grant and the provision of HRS is now discretionary meaning that the County Council now has no duty to offer these services.

The need to make savings in the County Council's overall expenditure whilst at the same time ensuring that statutory services can continue to be provided has now made it necessary to reduce expenditure on HRS services. Accordingly the budget for HRS must now fall from £8.6 million for 2014-15 to £4.875 million for 2017-18. This reduction will require a rationalisation of HRS service provision and in future less people will be able to benefit from HRS than at present.

However the need to make changes also provides an opportunity to ensure that new services work to optimum efficiency and a crucial part of the review of HRS services has been to recognise where specialist services are not required. For many customer groups, a core HRS delivery can be offered without the need for a specialist service area and successful outcomes can be maintained and even improved. In addition we will work with Citizens Advice Bureau and the 5 Districts / Boroughs to re-focus their priorities so they can support service users where services are ended.

Also the process of commissioning new services provides an opportunity to eliminate any duplication of provision with universal services and those provided by the District and Borough Council partners.

Finally customer demand and aspiration mean that new service models must evolve to support options that are relevant and choices that are real to our communities and the process of commissioning new services provides a timely opportunity to ensure that this can be achieved.

(3)What actions are going to be taken to reduce or eliminate negative or adverse impact? (this should form part of your action plan under Stage 4.)

Eligibility criteria for HRS services have been developed that focus on those most vulnerable and in need.

With regards to services for older people, we know from benchmarking against other local authorities that there are opportunities to access Housing Benefit to support the funding of support in sheltered accommodation. We also know from other local authorities that there are alternative methods for funding alarm services (or funding assistive technology). We will continue to explore these options through discussions with our District & Borough colleagues.

We will use the eligibility criteria for the Care Act 2014 / 'edge of care' to meet the requirements of those older people who are most vulnerable. In addition we will make sure people are supported by using the Home Improvement Agency and the Home Safety Check Scheme to enable older people in their own homes or in sheltered accommodation to live independently for as long as possible. We will also ensure the Care Act principles of providing information and advice are maximised through the services delivered for older people to minimise isolation and loneliness;

With regards to the proposal to stop funding a specialist HRS service for Travellers, in future there would be a non-specialist HRS floating support service designed to ensure the inclusion of a wide range of customers, including Travellers, together with support to help people access universal services.

There is research evidence that the Traveller community may find accessing universal services challenging and it is therefore expected that support will also be required from WCC Gypsy and Traveller Liaison Service. This service has close contacts with the Traveller community and in particular those households who are deemed to be homeless, through a requirement to complete welfare checks.

More generally customers will still be able to access other HRS services and universal services, for example Citizens Advice Bureau, for support, advice and signposting.

In addition we will:

- re-commission accommodation based services for Single Homeless with support needs to support multiple and complex needs, including those presented by adult offenders;
- Work in partnership with key stakeholders to identify alternative accommodation solutions for Single Homeless people and to identify all relevant funding streams to support the development of these services.

<p>(4) How does the plan/strategy/service/policy contribute to promotion of equality? If not what can be done?</p>	<p>The re-alignment of HRS services will promote equality. By enabling the development of a balanced HRS market, social equality, choice and improved quality of life will be supported.</p>
<p>(5) How does the plan/strategy/service/policy promote good relations between groups? If not what can be done?</p>	<p>Through the re-alignment of HRS services, we will develop a balanced market. Key to the successful utilisation of this will be a need to promote equality of opportunity in terms of equal access to services, equal treatment and ultimately equal outcomes.</p>
<p>(6) Are there any obvious barriers to accessing the service? If yes how can they be overcome?</p>	<p>The main barrier to accessing service will be due to service availability and resulting waiting lists for support. However, by re-aligning services to focus on those most in need of support and changing the service models to reduce dependency, it is anticipated that there will be a faster throughput of customers.</p>
<p>(7) What are the likely positive and negative consequences for health and wellbeing as a result of this plan/strategy/service/policy?</p>	<p>A re-alignment of HRS services and the associated focusing of support on those in most need will inevitably result in some customers being signposted to other, more relevant services. If these services are not available, then there will be a negative impact on health and well-being for those individuals. However by working with our key stakeholders we will work to minimise any adverse impacts by ensuring that other services are able to respond to the needs of those who will no longer be able to receive HRS.</p> <p>However, it is anticipated that a re-alignment of HRS services will offer support that is available to those most in need and that services will be provided in a way that seeks to ensure that services are equally accessible throughout the county.</p>
<p>(8) What actions are going to be taken to reduce or eliminate negative or adverse impact on population health? (This should form part of your action plan under Stage 4.)</p>	<p>As previously stated, re-aligned HRS services will target those in most need and other needs will be met through universal service provision such a Citizens Advice Bureau and those services provided by the District and Borough Council partners.</p> <p>It is crucial that re-aligned services have clear eligibility criteria that target those most in need to minimise the negative impacts on health and well-being.</p>

<p>(9) Will the plan/strategy/service/policy increase the number of people needing to access health services? If so, what steps can be put in place to mitigate this?</p>	<p>One of the outcomes of a re-alignment of HRS services will be to contribute to improved health and well-being outcomes through quality services targeted at those most in need.</p> <p>Nevertheless, given the reduction in the number of people who can be supported by HRS in future there may be an adverse impact on health services and other non HRS services provided for people with HRS needs. Any such impacts will need to be identified and /monitored through close working with partners.</p>
<p>(10) Will the plan/strategy/service/policy reduce health inequalities? If so, how, what is the evidence?</p>	<p>One of the outcomes of a re-alignment of HRS services will be to promote the development of a robust market that is focused on those with the most need. In tandem with supporting the reduction of social inequality, the re-alignment will aim to reduce health inequalities by recognising the importance of good quality accommodation and associated support to health and well-being.</p> <p>In addition, new services will work to serve the population of Warwickshire as equitably as possible so that there is equal opportunity to access services across the county</p>

**Stage 4 – Action
Planning, Review &
Monitoring**

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If No Further Action is required then go to – Review & Monitoring

(1) Action Planning – Specify any changes or improvements which can be made to the service or policy to mitigate or eradicate negative or adverse impact on specific groups, including resource implications.

EqIA Action Plan

Action	Lead Officer	Date for completion	Resource requirements	Comments
Ensure that re-aligned services have clear entry and exit pathways together with clear eligibility criteria.	Deanna Phillips / Lisa Lissaman/ Louise Cunningham	As determined by Cabinet in August 2015.		
Review of needs of customers of disability services	Lisa Lissaman	As above		
Work with other agencies to ensure non HRS services help to mitigate impact and that duplication is avoided.	Deanna Phillips / Lisa Lissaman/ Louise Cunningham	As above		
Negotiate through the Steering Group regarding alternative funding of services for older people, including alarm services.	Deanna Phillips	As above		
Ensure that new services collect and monitor equalities data.	Deanna Phillips / Lisa Lissaman/ Louise Cunningham	As above		
Ensure eligibility criteria meet the needs of those older people who are most vulnerable	Deanna Phillips	As above		
Provide funding for Home Improvement Agencies.	Deanna Phillips	As above		
Ensure the Care Act principles of providing information and advice are maximised through HRS services delivered for older people to minimise isolation and loneliness.	Deanna Phillips	As above		
Ensure new non-specialist HRS floating support service can support Travellers, working with the WCC Gypsy and Traveller Liaison Service.	Deanna Phillips	As above		
Commission new accommodation based services for Single Homeless people to support multiple and complex needs, including those presented by adult offenders.	Deanna Phillips	As above		
Work with stakeholders to identify alternative accommodation solutions for Single Homeless people and to identify all relevant funding	Deanna Phillips	As above		

(2) Review and Monitoring
State how and when you will monitor policy and Action Plan

It is important that the implementation and impact of EqIA is relevant throughout the re-alignment of HRS services. This activity will form part of the project management process.