

Supporting People

City of Wakefield Metropolitan District Council

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Contents

Supporting People Inspections	4
Summary	5
Scoring the service	6
Recommendations	9
Report	11
Context	11
How good is the service?	13
Summary	21
Implementing the review programme	22
Addressing value for money through commissioning services	26
What are the prospects for improvement to the service?	33
Summary	38
Appendix 1 – Demographic information	39
Performance information	40
Appendix 2 – Documents reviewed	53
Appendix 3 – Reality checks undertaken	54
Appendix 4 – Positive practice	55

Supporting People Inspections

The Audit Commission is an independent body responsible for ensuring that public money is spent economically, efficiently and effectively and delivers high quality local and national services for the public.

Within the Audit Commission, the Housing Inspectorate inspects and monitors the performance of a number of bodies and services. These include local authority housing departments, local authorities administering Supporting People programmes, arms length management organisations and housing associations. Our key lines of enquiry (KLOEs) set out the main issues which we consider when forming our judgements on the quality of services. The KLOEs can be found on the Audit Commission's website at www.audit-commission.gov.uk/housing.

This inspection has been carried out by the Housing Inspectorate using powers under section 10 of the Local Government Act 1999 and is in line with the Audit Commission's strategic regulation principles. In broad terms these principles look to minimise the burden of regulation while maximising its impact. Supporting People inspections are carried out with the Commission for Social Care Inspection (CSCI) and Her Majesty's Inspectorate of Probation (HMIP).

'Supporting People' is the Government's long-term policy to enable local authorities to plan, commission and provide housing related support services which help vulnerable people live independently.

The Supporting People programme brings together significant funding streams including transitional housing benefit (THB), which has paid for the support costs associated with housing during the implementation phase; the Housing Corporation's supported housing management grant (SHMG) and the probation accommodation grant scheme (PAGS) into a single pot to be administered by 150 administering local authorities (ALA). Unitary and metropolitan authorities and counties are designated as an administering authority with the county taking the lead in most cases for the districts in their area.

Administering local authorities work in partnership, with districts where this is relevant, to agree Supporting People strategies and delivery mechanisms for housing related support services with housing, social services, health and the probation service providers. Negotiation and consultation is also required with service users, all housing and support service providers, other statutory service providers, the private sector and voluntary organisations to plan and commission support services to meet identified needs.

The former Office of the Deputy Prime Minister (ODPM) published a number of consultation papers on the developing programme and a work plan setting out what local authorities and their partners will need to achieve in order to deliver the programme effectively. All the relevant papers for Supporting People can be found on the Supporting People k-web that can be accessed through the Supporting People website: www.spkweb.org.uk

Summary

Introduction to the Supporting People Programme

- 1 'Supporting People' is the Government's long-term policy to enable local authorities to plan, commission and provide support services, which help vulnerable people live independently. The programme went live on 1 April 2003.
- 2 The aim of the Supporting People programme is to establish a strategic, integrated policy and funding framework, delivered locally in response to identified local needs, to replace the previous complex and uncoordinated arrangements for providing housing related support services for vulnerable people.
- 3 Wakefield Metropolitan District Council was inspected in the third year of the Supporting People programme. This report therefore reflects the current context for the Council as it continues to deliver the programme and focuses on determining the effectiveness of current service delivery, the value for money presented by the contracted services and the outcomes for vulnerable people.

Background

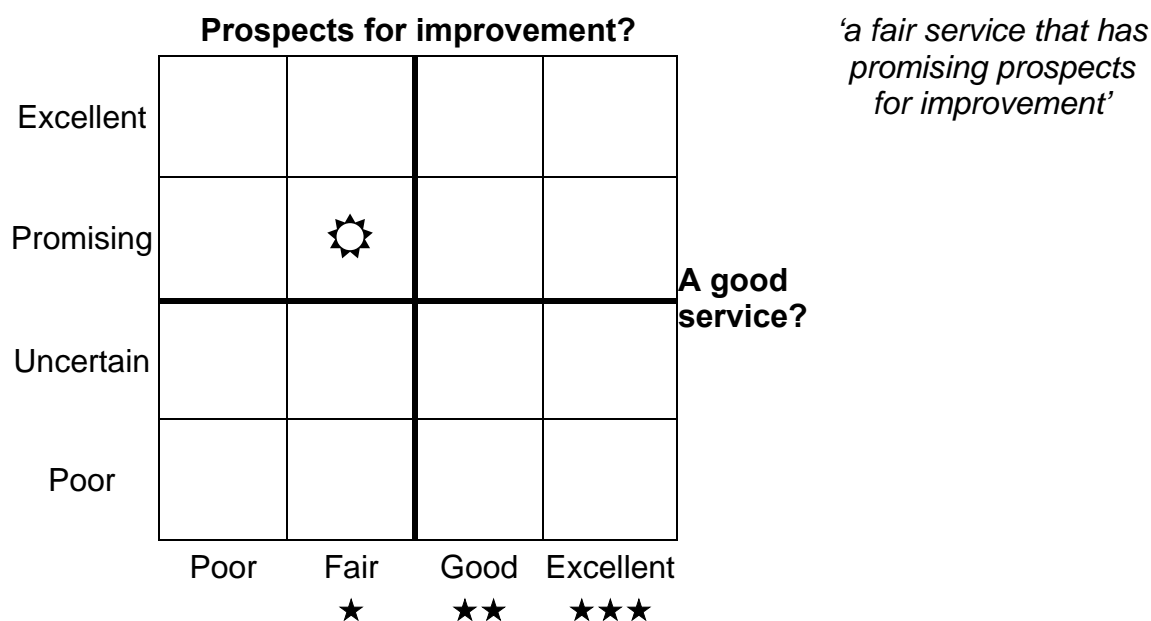
- 4 Wakefield is one of the five metropolitan districts in West Yorkshire. The District is a mixture of rural and urban areas with a population of 318,300 of which 3.31 per cent are from minority ethnic groups. Currently 15.61 per cent of the population are over the age of 65 although this figure is set to increase by approximately four per cent by 2008 and 19 per cent by 2014.
- 5 The district is ranked at 54 out of 354 English authorities where one is the most deprived and has 31 of its 209 super output areas in the 10 per cent most deprived nationally. Unemployment at 2.2 per cent is slightly below the national average of 2.4 per cent.
- 6 The Council comprises 63 Councillors with the Labour party having control with 43 of the seats. There is a leader and cabinet political structure. The Council employs 16,000 staff (including schools) and for 2005/06 has a net revenue budget of £360,805 million.
- 7 The Council acts as the administering authority for the Supporting People programme across the district. In commissioning Supporting People services the Council works in partnership with Eastern Wakefield and West Wakefield Primary Care Trusts (PCTs) and the West Yorkshire Probation Service.
- 8 The total amount of Supporting People grant allocated to the Council in 2004/05 was £7,332,753. This decreased to £6,963,434 for 2005/06. In addition, during 2004/05 the Council received a £224,822 administration grant to fulfil its role as the administering authority. The level of grant has reduced to £6,963,434 in 2005/06.

- 9 The highest cost Supporting People service is £733.02 per person per week in an accommodation scheme for people with learning disabilities. The lowest cost service provides support for older people with support needs and costs £1.04 per person per week.
- 10 The Supporting People programme in Wakefield covers 135 services provided through 36 contracts. There are 14,090 units of supported accommodation and 440 units of floating support excluding Home Improvement Agencies (HIAs).

Scoring the service

- 11 We have assessed City of Wakefield Metropolitan District Council as providing a ‘fair’, one star service that has promising prospects for improvement. Our judgements are based on the evidence obtained during the inspection and are outlined below.

Table 1 Scoring chart¹



Source: Audit Commission

¹ The scoring chart displays performance in two dimensions. The horizontal axis shows how good the service or function is now, on a scale ranging from no stars for a service that is poor (at the left-hand end) to three stars for an excellent service (right-hand end). The vertical axis shows the improvement prospects of the service, also on a four-point scale.

- 12 We have assessed the Council's administration of the Supporting People programme to be fair because:
- new services have been delivered for some user groups;
 - a clear fairer charging policy is in place, timely assessments are made and source of referrals is monitored;
 - service users are well involved in the review process;
 - there is evidence of good quality information at the point of contact;
 - an on-line directory listing all housing related support services is available;
 - there is corporate support for the Supporting People programme and it is helping to deliver priorities within the Community Strategy;
 - the five-year strategy is in place and links to the priorities of partners;
 - partnerships with health and probation are positive with clarity on shared goals;
 - there are clear budget monitoring mechanisms in place which are reported to the Commissioning Body and there has been a prudent approach to re-investment of the Supporting People grant;
 - payments to providers are accurate and timely;
 - providers receive a supportive service from the Supporting People team and speak highly of the team's advice and assistance; and
 - cross-authority work by the Supporting People team is well developed.
- 13 However, we found a number of weaknesses that need to be addressed. These include:
- although information has been produced, there was limited availability through customer access points at the time of the inspection;
 - progress to meet the needs of some of the most vulnerable members of society through the Supporting People programme has been slow, specifically travellers and people with HIV/AIDS;
 - there was a lack of clarity about provider representation on the Core Strategy Group at the time of the inspection, although this has since been addressed;
 - there is no co-ordinated approach to help facilitate consultation and communication with stakeholders;
 - there are delays in finalising service reviews with no completed reviews at the time of the inspection. This has impacted on Wakefield's ability to ensure that value for money is being delivered by the services;
 - performance reporting has been inconsistent and the Commissioning Body and Core Strategy Group have not always been receiving the information they need to enable them to drive the programme;
 - there has been a lack of clarity regarding the top priorities for service development and how these will be met, although work to address this took place following the inspection;

8 Supporting People | Summary

- the delay in implementing a replacement Supporting People IT system is negatively impacting on the work of the Supporting People team; and
- there have been limited contract negotiations outside the service review process through which issues of eligibility or unit costs could have been addressed.

14 We have judged that the Supporting People programme has promising prospects for improvement. We found the following strengths:

- there have been significant improvements in both corporate and departmental performance;
- new services have been delivered to some user groups and these are linked to priorities within the Community Strategy;
- there is an openness to learning from other authorities and partners;
- there is strong partnership working through the cross-authority group;
- a procurement and commissioning strategy is being developed;
- there is corporate commitment to supporting the development of services for BME groups;
- there is strong financial management of the Supporting People grant; and
- there is a strong implementation plan and supporting action plan for 2005 and 2006 with clear targets and costed actions. This should enable the Council to drive further improvement.

15 There are, however, some barriers to improvement:

- the corporate record of improvement has not been wholly transferred to the Supporting People programme;
- the Commissioning Body has not provided strong leadership to drive programme delivery. There are indications that this is now changing and that a more strategic approach is being taken, but these changes are not yet embedded;
- highlighted areas for improvements to the Supporting People programme have not been consistently actioned in a timely manner;
- there have been considerable delays in implementing a replacement IT system; and
- there is no plan in place to co-ordinate the approach to consultation and communication within the Supporting People programme.

Recommendations

- 16 To rise to the challenge of continuous improvement, organisations need inspection reports that offer practical pointers for improvement. In this context, the inspection team makes the following recommendations.

Recommendations
<i>With immediate effect</i>
<i>R1 Agree terms of reference for the Core Strategy Group which include clarity on membership.</i>
<i>R2 Ensure that any chair of the Commissioning Body or Core Strategy Group does not have any conflict of interest in undertaking the role.</i>
<i>R3 Address the issue of representation by providers on the Core Strategy Group ensuring that there is equality of access between internal and external providers and clear lines of communication between the Core Strategy Group and providers.</i>
<i>R4 Complete a review of the service review timetable ensuring that all service reviews will be completed by the end of March 2006.</i>
<i>R5 Update providers on the progress of their service reviews.</i>
<i>R6 Ensure that information on Supporting People is available at customer access points.</i>
<i>Within three months</i>
<i>R7 Strengthen performance management mechanisms to ensure the timely delivery of the Supporting People programme against performance measurement targets, ensuring that the Commissioning Body and Core Strategy Group have sufficient information to evaluate the success of the programme.</i>
<i>R8 Put in place mechanisms to ensure that positive practice is systematically shared with providers.</i>
<i>R9 Introduce an action plan for consultation and communication on Supporting People which compliments the departmental consultation and communication strategy and which includes mechanisms to involve all service user groups.</i>

Recommendations
Within three months
<i>R10 Ensure that providers are provided with support and training which ensures that they are able to offer services which are sensitive to the needs of all groups.</i>
<i>R11 Introduce clear procedures for dealing with contract non-compliance issues.</i>

- 17 We would like to thank the staff of the City of Wakefield Metropolitan District Council particularly Vicki Whyte who made us welcome and who met our requests efficiently and courteously.

Dates of inspection: 11 to 15 July 2005.

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Report

- 18 This report has been prepared by the Audit Commission (the Commission) following an inspection under Section 10 of the Local Government Act 1999, and issued in accordance with its duty under Section 13 of the 1999 Act.

Context

The locality

- 19 Wakefield is one of the five metropolitan districts in West Yorkshire. The District is a mixture of rural and urban areas serving a population of around 318,300. Over two-thirds of the area is open countryside, designated as Green Belt, surrounding the main centres of population in Wakefield City, the towns of Pontefract, Castleford, Knottingley, Normanton Featherstone, Ossett, Hemsworth, South Elmsall and numerous smaller communities.
- 20 The population of the district is 318,300. At 3.3 per cent, the percentage of the population who describe themselves as 'other than white British' is lower than the English average of 10.44 per cent.
- 21 Overall deprivation is high with Wakefield ranked 55 out of 354 English authorities where 1 is the most deprived. 31 of 209 super output areas are in the ten per cent most deprived in the country.

The Council

- 22 The Council comprises 63 councillors. The Labour group has control with 43 councillors and there are also 11 Conservative; six Independent and three Liberal Democrat councillors. A leader and cabinet model governs the business of the Council.
- 23 The Council's net revenue budget for the year 2005/06 is £360 million with the budget for Social Services and Health accounting for £87 million.
- 24 The Community Strategy 'Fast Forward' was launched in October 2004 with a vision to 'enable key organisations and agencies to work together with citizens to improve our quality of life'. Priorities for the strategy are to ensure that residents:
- are safe and feel safer;
 - are healthy and look after ourselves;
 - are part of a dynamic local economy;
 - are skilful and confident by investing in our people; and
 - live in attractive environments by improving our places.

- 25 The Council has been assessed as a 'fair' authority by the Audit Commission's Comprehensive Performance Assessment (CPA) and as being a two-star authority for social services by the Commission for Social Care Inspection (CSCI).
- 26 On 21 March 2005, the Council transferred its housing stock of around 32,000 homes to Wakefield and District Housing (WDH). The period leading up to the transfer was a period of major organisational change for the Council and in particular for areas such as Supporting People which have a significant interface with the housing service.

The service

- 27 The Council acts as the administering local authority (ALA) for the development and delivery of the Supporting People programme in its area.
- 28 The Supporting People programme subject to inspection is designed to meet the housing related support needs of vulnerable people, including homeless people, older people with support needs, people with a learning disability, people with mental health problems, those with substance abuse problems, refugees, travellers and offenders.
- 29 The total amount of Supporting People grant made available to the Council in 2004/05 was £7,332,753 which reduced to £6,963,434 for 2005/06 representing a reduction of five per cent. The Council also received £281,028 in 2004/05 to fulfil its role as the administering authority; this has reduced to £224,822 for 2005/06. The Council is making an additional contribution of £65,000 to support the administration of the grant.
- 30 Wakefield Metropolitan District Council was inspected in the third year of the Supporting People programme. This report therefore reflects the current context for the Council as it continues to deliver the programme and focuses on determining the effectiveness of current service delivery, the value for money presented by the contracted services and the outcomes for vulnerable people.

Government framework for delivery

- 31 The former ODPM set out the following structural arrangements for the governance, development and delivery of the Supporting People programme.
 - Accountable Officer and the Supporting People team: drive the whole process.
 - Inclusive forum: consults with service providers and service users.
 - Core strategy group: proposes strategic direction, service review procedures and timetables, and work needed to secure the effective and efficient delivery and development of the programme.
 - Commissioning body: agrees strategic direction, compliance with grant conditions, outcomes of service reviews and monitors the delivery and development of the programme.
 - Councillors: approve key decisions of the commissioning body.
 - Supporting People team: delivers the local programme.

- 32 Supporting People commissioning bodies are a requirement under grant conditions, except for local authorities with a CPA assessment of 'excellent'. Commissioning bodies must have senior representation from the administering local authority, the local health services (usually one representative from each PCT) and the area probation service. In two-tier areas, each district council is entitled to one representative. Each named representative has one vote although the administering local authority has a veto where it faces a demonstrable financial risk.

How good is the service?

- 33 The assessment was based upon the following key issues.

- Governance of the programme;
- Delivery arrangements, including strategy and needs assessments;
- Financial management and monitoring;
- Service reviews carried out by the administering authority;
- Value for money;
- User involvement;
- Partnership arrangements;
- Access to services, customer care and information;
- Diversity; and
- Outcomes for service users.

Governance of the programme

- 34 The structures through which the Supporting People programme is delivered are in place and membership of the Commissioning Body is at a senior level. Supporting People is clearly integrated into the work of the Council through the priorities set in the Community Strategy. However, although the Commissioning Body is now starting to adopt a more strategic approach, the Commissioning Body and Core Strategy Group have not been driving the programme as demonstrated by delays which have not been challenged, agreed actions which have not been implemented and a number of priority areas for investment which at the time of our inspection had not been articulated into a prioritised action plan.

Governance arrangements

- 35 Supporting People is integrated with the work of the Council through the Local Strategic Partnership (LSP). There is corporate support and ownership for the programme with a clear understanding of the contribution that Supporting People can make to the priorities agreed in the Community Strategy.

- 36 Portfolio holders are kept up-to-date on Supporting People issues through regular meetings and updates from officers; they attend inclusive forum events and were involved in the discussions around the development of the five-year strategy. Councillors are also updated on Supporting People developments within their wards.
- 37 However, although a seminar for all councillors was held in September 2003, mechanisms for updating them on an ongoing basis are less well developed. Councillors do receive all cabinet minutes and the Supporting People strategy has recently been signed off by the cabinet, but briefings are currently not well established.
- 38 A weakness common to both the Commissioning Body and Core Strategy Group has been that information has not been consistently available and requests made by members of the groups are not always acted upon. Examples of this include the following.
- A recent Core Strategy Group discussion on value for money led to information on both high and low costs being requested, but this information was not reported to the following meeting.
 - Minutes of the Commissioning Body meeting of 26 August 2004 included:
'the following topics were requested to appear on the next agenda and thereafter until satisfied. Dates for the rest of the meetings for the year ahead (2005). Reviews. Planning for inspection. Shadow Strategy and action planning'.
 - The subsequent meeting on 5 October 2004 included the agenda items but the following meeting on 20 January 2005 did not include an agenda item on reviews and a member of the group again requested this as a regular agenda item. The next meeting on 17 February 2005 again did not include agenda items. The meeting on 17 March included all the requested agenda items. This inconsistency does not assist these two bodies in their respective governance roles.

Commissioning Body

- 39 The Commissioning Body's role involves providing strong leadership, agreeing strategic direction and monitoring the delivery of the programme. There has been slow progress towards achieving a position where the Commissioning Body is setting the agenda through providing a strong strategic steer and ensuring the timely delivery of the programme. For example, progress against the 2004/05 Implementation Plan was not monitored and the 2005/06 plan was first discussed in July 2005.
- 40 The Commissioning Body meets and all partners attend consistently, with representation at an appropriate level of seniority. The Chair of the Commissioning Body provides a link to the LSP through the 'Health and Social well-being' sub-group of the LSP, for which she has responsibility for the 'Looking after Yourself' objective for the Council.

- 41 Terms of reference and a memorandum of understanding have both been agreed for the Commissioning Body. The terms of reference contain appropriate guidance on voting which is in line with grant guidance, but do not address how to deal with conflicts of interest (the terms of reference have been reviewed and amended since the inspection was on site). The memorandum of understanding which defines the relationship between the Council as administering authority and the Commissioning Body is a requirement of grant conditions and was signed in March 2005.
- 42 The chair of the Commissioning Body at the time of the inspection was the Director of Social Services and Health. However, on two occasions in the absence of the chair, the Accountable Officer for Supporting People has been nominated to chair meetings. It is not appropriate for the officer accountable for the programme to be chairing the meeting as this constitutes a potential conflict of interest. This has been acknowledged and the terms of reference have since been amended to reflect this.
- 43 The Commissioning Body is now starting to adopt a more strategic approach, having completed and signed off key policies and processes, including the development of the five-year strategy. It is starting to look at future commissioning arrangements and is allocating resources to support the strategic priorities of the Council and its partners.
- 44 At the time of our inspection the programme did not have clearly identified key priorities for service development. The five-year strategy sets out the gaps in services and the need for development of additional services, however it fails to clearly identify what the top priorities are and how these will be met. Subsequent to our inspection priorities have been given greater clarity and now include funding requirements.
- 45 Shared priorities for partners are articulated through the community plan. However, the Commissioning Body is not using these as a means to assess and demonstrate the effectiveness of the Supporting People programme.
- 46 The Commissioning Body now receives regular financial reports which are detailed and helpful but performance reporting on delivery of the programme is weak. It is not reported on a regular basis and there is no tracking of decisions to ensure that they are acted upon. This lack of stringent processes leaves the Commissioning Body in a weak position to drive the programme and ensure that delivery is timely and in line with the stated priorities.

Core Strategy Group

- 47 The Core Strategy Group works to draft terms of reference but these required updating at the time of the inspection. Membership is heavily weighted towards the Council and the terms of reference do not give sufficient guidance on the expected membership of the group. For example, it is stated that 'Consideration will also be given to include providers at appropriate times' but they are currently seen as core members of the group. Following our inspection, the terms of reference have been amended to address these observations.

- 48 The Health partner has at times struggled to ensure it has the capacity to attend the Core Strategy Group, with no meetings attended during the 12 months prior to our inspection. However, plans have been put in place to address this through collaboration between the two PCTs to ensure that at least one of them attends the Commissioning Body and the Core Strategy Group.
- 49 Providers are represented on the Core Strategy Group, although at the time of our inspection they were drawn from the supported housing liaison group which does not represent all providers. We spoke to a number of providers who were not aware of having formal representation. The supported housing liaison group has since been re-convened to enable it to be able to fully represent the sector.
- 50 There is a lack of transparency in the role of the Core Strategy Group from a provider perspective. Mechanisms for feedback have not been clearly established and there are no lines of accountability or mechanisms for ensuring two-way communication. For example, at the meetings there is no formal feedback from the provider representatives and minutes of meetings are not made available for all providers. As a result there is no clarity as to whose views the providers are representing at meetings.
- 51 The role of internal providers on the Core Strategy Group also lacked transparency and legitimacy as they had not been nominated alongside the two external representatives. This has now been clarified through the amended terms of reference.
- 52 Information on providers' performance has not always been reported to the Core Strategy Group and performance has not always been robustly challenged by the Group. For example, although overall performance of providers was good, performance at around 50 per cent against two indicators was not challenged at the Core Strategy Group meeting we attended.
- 53 Financial information is reported to the Core Strategy Group which is helpful and informative. A narrative report of key headline issues for the Group to be aware of in relation to financial matters is reported together with information on spend to date and any projected over- or under-spend for the current and previous financial years. This enables the group to maintain clear control on spending and to take future projections into account when looking at future service provision.
- 54 Cross-authority issues are well covered at the Core Strategy Group and the cross-authority worker is a member of the group. Cross-authority issues are discussed at each meeting which ensures that relevant issues including access to services across the area are kept on the agenda.

Accountable Officer

- 55 The Accountable Officer is an assistant director within the Social Services and Health directorate with responsibility for partnerships and commissioning. He has a good understanding of Supporting People and champions the programme through his extensive partnership involvement with partner organisations. His role as head of commissioning has also helped to facilitate close working with service commissioners.

Delivery arrangements

- 56 Supporting People is recognised corporately as contributing to agreed priorities and is linked to relevant strategies. The Supporting People team is well regarded by providers who see them as supportive and accessible. However, needs analysis across all groups is not complete with little progress in the understanding of some groups since the development of the shadow strategy in 2002. There has been a lack of communication with providers regarding the commissioning of services.

The Supporting People team

- 57 The Supporting People team is located within the commissioning and partnership arm of the Social Services and Health directorate and is made up of the following posts:

- Supporting People lead officer;
- review officer;
- assistant review officer;
- contract monitoring officer;
- research and development officer;
- senior administration and information officer; and
- clerical officer.

- 58 The Supporting People team is small and at the time of the inspection there were two temporary vacancies. In addition to the core team, two finance officers provide all the financial support for the programme and further advice and assistance is available to the team through the social services commissioners and contract managers.

- 59 Progress in developing the programme has been mixed. Progress made includes:

- payments to providers are accurate and timely;
- the team are seen as supportive by providers;
- the programme has remained within budget;
- 'fairer charging' assessments have been implemented;
- new services have been delivered; and
- training has been delivered for providers.

- 60 However, there are also a number of significant areas of work where progress has been slower including:

- work on completing service reviews;
- delays in implementing the replacement IT system; and
- using data from providers pro-actively at an operational and strategic level.

- 61 The team is held in high regard by service providers who see them as accessible, supportive and willing to work in partnership. Training events organised and run by the team are highly regarded. Team meetings take place regularly and staff receive regular appraisals and supervision focused on targets and the achievement of plans.
- 62 Delays in the implementation of a replacement IT system for Supporting People are limiting the Council's ability to easily meet deadlines for submitting returns to the Government department (formerly the ODPM). Implementation of the second phase IT system has slipped and has exceeded two deadlines for completion. An amended work plan has not yet been completed and a target date for implementation of the new system has not yet been agreed.

The five-year Supporting People strategy

- 63 All Supporting People administering authorities were required to submit a five-year strategy to the former ODPM by 31 March 2005 - Wakefield achieved this milestone. Development of the strategy began in November 2004 and the strategy was approved by the Commissioning Body in March 2005.
- 64 Targets for service development have been set within the five-year strategy across most service user groups but there is a lack of clarity as to the priority given to the numerous needs identified and how priorities will be funded. This has the potential to impede development until there is greater clarity on where any available funding will be directed.
- 65 Partners were able to influence and contribute to the development of the five-year strategy. The consultants involved in drawing up the strategy met with and interviewed a number of managers within the partner agencies to gain a perspective on key issues and gaps. In addition, they had details of all partner agency plans to ensure links were made to the five-year strategy. For example, the East Wakefield PCT had clear opportunities to influence strategy. It was discussed at the professional executive committee to ensure linkages were made to their other priorities including homelessness, mental health and substance misuse. This engagement has ensured that partners are confident that their priorities have been captured in the strategy.
- 66 Providers were also included in consultation through a series of client-based focus groups. However, they had limited time to comment between the draft and final stages of the strategy.
- 67 Commissioning managers representing the four partnership groups were also able to influence the strategy. However, service users without existing consultation fora were engaged to a much lesser degree in influencing the development of the strategy. A forum was held and 13 service users attended from groups that are often excluded, but it is not clear how the views of the wider group of service users and potential service users have been incorporated into the strategy.

- 68 The housing related support needs of many of the service user groups have been highlighted and incorporated into the five-year strategy with a noticeable gap being the lack of needs information on travellers and gypsies. Research to inform the needs of this group is now being planned through the cross-authority group with a needs assessment report due for completion by December 2006.
- 69 Delivery of the five-year strategy is through annual implementation plans. The 2005/06 implementation plan was introduced at the Commissioning Body meeting in July 2005, but not in a format that would enable the document to be used by the Commissioning Body as a performance tool. This was recognised at the Core Strategy Group meeting we observed and it was agreed that the plan would be re-drafted.

Service development

- 70 There have been a number of developments since the implementation of the Supporting People programme which have been in line with the priorities of the Community Plan, including:
- learning disabilities - 62 units of support for people resettled from a hospital setting;
 - teenage parents - four units of support;
 - victims of domestic violence - eight units of support; and
 - mental health - eight units of support.
- 71 Further investment has been made in short-term services which are in line with the priorities for the programme. However, there has been a lack of communication with providers regarding commissioning decisions for the short-term services, with no competitive or soft market testing to ensure that both existing and potential providers of services had the ability to develop services on a level playing field. The Core Strategy Group has recommended that the opportunity to apply for new temporary service contracts is offered to all providers.
- 72 Services are also commissioned under the Supporting People umbrella with non-Supporting People grant. One example of this is £60,000 in revenue funding and £20,000 capital funding from the Community Safety Partnership for new services for people with drug problems and people at risk of domestic violence. This is a positive outcome from the good links with the Community Safety Partnership.

Financial management and monitoring systems

- 73 There are robust systems of financial control and monitoring with regular reports to the Commissioning Body. A fairer charging policy linked to wider benefits maximisation work is in place and providers are satisfied with payment arrangements which are accurate and on time. Contract monitoring has been carried out but has not been consistently used to challenge under-performance and quarterly returns have not been analysed in order to inform future needs.

- 74 The Supporting People team is supported by two finance officers who are responsible for the administration of both the Supporting People grant and the administration grant.
- 75 The financial monitoring and reporting arrangements are clear and well developed. Regular budget monitoring information on both the Supporting People grant and administration grant is provided to the Supporting People lead officer as budget holder; monthly budget meetings take place between the budget holder, accountable officer and finance officer. The budget holder takes part in corporate budget clinics which form part of a scrutiny approach to budget management within the Council.
- 76 During 2003/04 and 2004/05 there was an under-spend of the grant with a cumulative under-spend of £874,000 by the end of 2004/05. As there was still uncertainty surrounding the level of grant for 2006/07 and a projected overspend of £65,000 for 2006/07 rising to £300,000 for 2007/08, there has been a prudent use of the under-spend. Funding has been given to a number of pilot schemes and to temporarily increasing the capacity of others; this has ensured that if there is a longer-term reduction in the level of grant, existing services will not be jeopardised.
- 77 As with the majority of Supporting People administering authorities, there has been a reduction in the amount of administration grant for 2005/06, and positively Wakefield has injected £65,000 from its general fund budget in order to sustain programme delivery. This shows further corporate commitment to the importance of supporting the delivery of this programme.
- 78 Risks in relation to payments to providers have been robustly addressed in preparation for migration to a replacement IT system for Supporting People. Payments will be migrated onto that system in the near future. Confidence has been gained through testing the new system with over 6,000 scenarios. In addition, the existing payment system could still be used to make payments if difficulties are encountered.
- 79 Service providers have not received an inflationary increase for two years. Providers were advised of their ability to appeal if this was likely to jeopardise their viability.

Fairer charging

- 80 Fairer charging was introduced by the Council for Supporting People from June 2004 with an offer to backdate any successful application to April 2003. For subsequent applicants this has now moved to a 20-week allowable backdate of grant. This both ensures that service users are not disadvantaged through late applications and safeguards the grant from large unplanned claims.
- 81 The fairer charging team has clear performance targets which include performance on contacting customers. Current performance data shows that 90 per cent of applicants are visited within seven working days. Visits to applicants include an offer to carry out wider benefits realisation work.

- 82 In the region of 300 fairer charging assessments have been carried out. Referral trends are monitored to ensure that there are no areas where referrals are not being made.
- 83 There has been training for providers on the fairer charging policy and basic information is available to providers and service users. The information to service users, however, does not give information to the applicant about direct access to an assessment but advises them to go through their support provider. This removes choice from the service user who may not want their support worker to be made aware of their request for financial assistance.

Contract monitoring

- 84 Information to providers on how their performance will be monitored lacks full transparency. Currently, providers are unaware of the levels at which underperformance triggers further investigation.
- 85 Providers do not receive any information or feedback regarding the performance information they have submitted and are unclear what it tells the Council or how it is used to assess how their services are performing.
- 86 Action to ensure that providers are complying with the conditions of their grant payments is not consistently taken in a timely manner. Mechanisms are in place to monitor whether performance workbooks are being returned from providers but there is no clearly defined policy on the nature and timing of actions flowing from non compliance issues. In one case, where a provider had repeatedly not returned workbooks, default notices were issued in November 2004 and March 2005 and eventually a review was triggered, but had not been completed at the time of our inspection and the grant was still being paid in full.
- 87 Monitoring of key performance indicators has been compromised due to IT difficulties and concerns about the reliability of the data until the testing of the new system has been completed. Mechanisms have been put in place to gather information on movers in and out of short-term services but this has yet to be analysed to inform judgements in relation to the overall performance of services.
- 88 Support has been provided for providers in the form of workshops and on-site support to ensure they are able to accurately complete and return performance workbooks. This has helped to ensure that workbooks are being consistently completed.

Summary

- 89 The Council has been slow in completing service reviews and at the time of our inspection no reviews had been finalised and the current timetable was behind schedule. As a result, any potential benefits resulting from the service reviews have not yet been realised.

Implementing the review programme

- 90 Guidance from the former ODPM requires administering authorities (ALAs) to review all services funded through Supporting People within three years of 1 April 2003; completing reviews by the end of March 2006. ALAs are required to produce a service review timetable together with a rationale to explain how the reviews have been prioritised. Progress with the service review timetable is submitted to the Government department as part of regular performance reporting.
- 91 Wakefield has been slow to complete any service reviews and, at the time of our inspection, were one of the few administering authorities nationally who had not completed any reviews. As a result of the slow completion of reviews, the opportunity to unlock funding to be re-directed to areas of unmet need has been delayed.
- 92 Within the Supporting People team there is one review officer, one assistant review officer and a monitoring officer post which, at the time of our inspection, was vacant. The review officer and assistant review officer have the skills necessary to undertake reviews and are supported in their work by commissioning managers and through the probation service. In order to bring independence to the process, Wakefield is also intending to take part in a cross-authority peer pilot exercise.
- 93 The service review process is central to ensuring that services are effective, provide good value for money and comply with Supporting People grant conditions. Until service reviews are concluded, contracting decisions that will influence the future shape of services and meet strategic priorities cannot be made.
- 94 The review timetable was originally set to carry out the reviews by service user groups with reviews beginning for the following client categories:
- older people;
 - domestic violence;
 - refugees;
 - generic services; and
 - offenders.
- 95 Subsequently, a revised timetable based on a risk assessment which takes into account cost was accepted at the Core Strategy Group meeting in December 2004 where it was reported that:
- 'ODPM guidance advised that high cost and high risk services should be brought forward in the review programme to ensure cost shunting had not occurred'*
- 96 The Core Strategy Group agreed that the report should be presented to the Commissioning Body for approval, but this has not happened. The team is however now working to the revised timetable which is based on a risk assessment, although the revised timetable has subsequently fallen behind schedule.

- 97 The position at the time of our inspection was that 47 reviews were underway with the first service review reports to be submitted to the Commissioning Body in October 2005, but with a recommendation that no decisions are made until the Government confirms the level of future grant. Additionally, reviews will only be submitted once all services for a particular needs group have been completed. Decommissioning decisions, however, will be made as reports are submitted to the Commissioning Body.
- 98 The delay in the Commissioning Body making decisions on any services is resulting in inevitable delays in implementing the priorities as agreed in the five-year strategy.
- 99 The approach to assessing value for money as part of service reviews has been agreed and has been published on the website and in a newsletter.
- 100 Information for providers regarding the review process was helpful. They received a process map which covered each stage of the review and included an appeals process as part of that map. One provider gave an example of the Supporting People team coming to their organisation to talk to staff in detail about the review process and to add further detail to the process map. However, service providers are not kept updated as to the anticipated dates they might expect an outcome from their reviews.
- 101 A quality assurance process is in place to look at review decisions. This comprises the Supporting People team, with the Social Services and Health Contracts Manager acting as an independent chair for the process. This will help to ensure that there is both consistency of approach within the team and external moderation to the process.
- 102 Providers were involved in the development of local eligibility criteria which were agreed by the Commissioning Body on 8 June 2005, although the Core Strategy Group was advised that stakeholders had until 10 June 2005 to respond to the final draft.
- 103 At the time of our inspection a service review appeals process was in the process of being agreed. This was to include the appointment of an independent chair for the appeals panel. This will help to add independence and transparency to the review process.
- 104 To date there have been limited attempts to review and redefine generic services provided through Supporting People which currently account for 4.9 per cent of the budget. The implementation plan for Supporting People includes an action to reclassify generic services to best reflect their contribution to the local strategic priorities with an action in place to complete this work by June 2005. Those discussions have not yet taken place with all providers and additionally there is some confusion as information in the cross-authority magazine for providers states that generic services are a priority for Wakefield - the Council accepts that this information is not correct. Work to define generic services within the district continues to be reflected in the revised implementation plan with a completion date of 31 March 2006 for the work.

Sharing information and improving practice

- 105** Providers found the workshops held by the Council beneficial in helping them to understand the eligibility criteria and Quality Assessment Framework. Providers also welcome the assistance they receive from the team when they are encountering difficulties. One of the key aims of the supported housing forum is to share good practice between service providers.

Value for money

- 106** Achieving value for money from legacy funded services still has to be addressed in practice due to the absence of any completed service reviews. There has been some, but limited use made of contract negotiations outside the review process where there are concerns about service costs or eligibility.

Service cost comparisons

- 107** The highest cost service is an accommodation based service for people with a learning disability. The unit cost of this service is £733.02 per week. The lowest cost service is £1.04 per week and is for older people with support needs.
- 108** The unit cost of the majority of services is below regional and national averages and the cost per head of the county's population is significantly lower than the average at £0.44 per person, compared to the Yorkshire and Humber average of £0.72 and the national average of £0.70.
- 109** Wakefield Council's average unit cost for all Supporting People services is £9.43 per week, which is below the regional average of £25.38 and the national average of £28.30. However, the cost per unit (excluding community alarms) shows a Wakefield Council average unit cost for all Supporting People services of £52.72 per week which is above the regional average of £32.87 and the national average of £34.71.
- 110** Services where the unit costs are lower than the regional and national averages include:
- older people with support needs;
 - people with a physical or sensory disability; and
 - Single homeless people (supported accommodation and floating support).
- 111** Services where the unit costs are higher than the regional and national averages include:
- homeless families;
 - people with learning disabilities (supported accommodation and floating support); and
 - mentally disordered offenders (floating support).
- 112** The data appendix at the end of this report provides further information and illustrates the variations in cost and provision of services against the regional and national averages.

Addressing value for money through service reviews

- 113 Value for money (VFM) issues were taken into consideration when drawing up the revised timetable for reviews but the impact of this has been negated by the lack of any completed reviews and the limited amount of contract negotiations conducted outside the review process.
- 114 Local eligibility criteria have been introduced and will be applied to all reviews regardless of their current status. This will ensure that all services will be reviewed using the same baseline for services which are eligible for grant.
- 115 Cross-authority work on benchmarking is well developed with refinements continuing to be made and Wakefield has adopted this model for assessing the cost and value of services. Although providers are aware of the VFM model adopted through information in the cross-authority newsletter, they are not universally aware of how their services sit within this framework.
- 116 Legacy services have yet to be fully tested to ensure they are providing value for money with the outcomes of any service reviews yet to be reported to the Commissioning Body. As a result, any inappropriate funding or potential efficiency savings cannot be identified to allow for any reinvestment to meet identified needs.

Addressing value for money through commissioning services

- 117 There has been a lack of communication with providers regarding the commissioning of additional short-term Supporting People services. The Council has used an informal approach to the procurement of additional services as a result of the under-spend. Arrangements to secure additional services were made with chosen providers but without all providers being able to express an interest or highlight potential areas for service development (see 'Service Development' above).

Service user involvement

- 118 The Commissioning Body has not been effective in ensuring that service users and potential service users across all service user groups are comprehensively included in consultation about its strategic approach, Consultation and involvement is not delivered via an agreed user involvement action plan.
- 119 Some service users groups have been indirectly engaged in the development of the programme through existing partnerships and the inclusion of commissioning managers on the Core Strategy Group. Additionally, a bi-annual inclusive forum has recently been introduced and service users are involved in service reviews. However, the range of service users directly consulted is limited and there are gaps in engagement.
- 120 User involvement in operational matters is being addressed through the service reviews where service user involvement is built into the review process via questionnaires and the opportunity to meet with review officers during validation visits. Where necessary, translation services have been provided and reviewing staff have been flexible in either visiting service users or arranging transport. It has been acknowledged that appropriate consultation methods need to be introduced to engage with people who have a learning disability but as yet action has not been taken to address this.
- 121 During our visits to services we found that service users are involved in developing their support plans and providers involved service users on a number of levels, including involvement in the staff interview process.
- 122 Outside of the partnerships for learning disabilities, mental health, older people and people with physical disabilities, there are some gaps in service user involvement at present. For example, groups are not in place to represent the views of young people and offenders and mechanisms and attempts to involve these service users have met with limited success. As a result, there are service users who are not being comprehensively reached through either direct or indirect consultation.
- 123 The Council's inclusive forum meets annually and has proved to be a useful forum for providers, but it has not been the most appropriate forum for service users. As a result, a customer forum has been established which meets bi-annually.

- 124 The March 2005 meeting of the forum aimed to involve service users in the development of the five-year strategy. Although we are advised that service users who attended the forum have commented positively on the methods of communication, only 13 out of a total of 14,500 attended. The service users who did participate in the forum received a letter of thanks, but did not receive any feedback on the outcome of their input to the development of the strategy.

Partnership arrangements

- 125 Partnerships with health and probation partners are positive, with clarity on shared goals, which are articulated through the Community Strategy. Cross-authority work is well developed and providers are complimentary about the operational support they receive from the Supporting People team. However, there is a need for more open engagement at a strategic level.

Providers

- 126 At an operational level there are constructive and effective relationships between the Supporting People team and service providers. Providers see the team as open and helpful both through formal training and in response to individual requests for assistance. This relationship is yet to be tested through difficult decisions regarding the future of services which will flow from the completion of the service reviews.
- 127 At the time of our inspection, robust mechanisms were not in place to systematically involve all providers at a strategic level of the programme. We encountered limited awareness of provider representation on the Core Strategy Group and although consultation has taken place on specific issues, such as the five-year strategy and eligibility criteria, this does not represent a comprehensive and systematic approach to engaging key stakeholders on an ongoing basis.
- 128 There has been a lack of communication with providers regarding the commissioning of short-term services. Some services were developed as part of the under-spend to meet identified needs. However, not all providers were given the opportunity to express an interest in developing new or existing services.
- 129 The lack of a constituted provider forum has limited the opportunities for better partnership working amongst providers. In the absence of a forum, opportunities for networking to ensure services are complimentary and offering the best support for vulnerable clients are limited and positive practice is not systematically shared. Providers are not aware of the details of other services, who they can and can't support, and who referrals could be made to. This can now be addressed through the re-constituted provider forum.

Health and Probation Partnerships

- 130** Health partner organisations are well informed and engaged in the Supporting People programme. Supporting People is high on their agenda with reports presented to Trust boards and executive committees. The board of the East Wakefield PCT has recently noted the five-year strategy and supported the health partner's contribution to the Supporting People programme. Operational staff are informed through their involvement with the partnership bodies and through the joint planning arrangements within social services.
- 131** The West Yorkshire Probation area has a lead officer for offender accommodation matters and an Assistant Chief Officer (ACO) in each district to take Supporting People forward at the local level. The ACO is supported by a specialist housing services manager who sits on all the Supporting People groups across West and North Yorkshire. Probation representation at the Wakefield Commissioning Body and Core Strategy Group has been good and Probation has played a full part in the development of the Supporting People programme.
- 132** The management of high risk offenders has featured in the development of the programme and relevant policies and processes have been established to integrate the Supporting People programme with the local multi-agency public protection arrangements (MAPPA). Providers are supported through information exchanges and will attend MAPPA panels when required. Where multi-agency management of high risk offenders takes place, Supporting People features as part of those arrangements. For offenders who pose a risk to the public, but are not identified as being at the highest level of risk, Supporting People provision has been established and is managed by providers working in partnership with the Probation service.

Cross-authority working

- 133** The Council is part of the West Yorkshire Cross-Authority Group which includes the neighbouring councils of Bradford, Calderdale, Kirklees and Leeds and has recently extended its group to include North Yorkshire and York. The group is chaired by West Yorkshire Probation Board which also manages the cross-authority worker. Meetings take place six-weekly and rotate around the region.
- 134** A regional operations group provides the operational emphasis for the cross-authority work and the Supporting People review officer and assistant review officer attend and contribute on a regular basis.
- 135** The cross-authority group has completed a number of successful joint initiatives to date including:
- the joint funding of a Supporting People cross-authority co-ordinator to assist the group with organising and implementing cross-authority working arrangements;
 - a benchmarking template for use in conjunction with local VFM assessments has been developed for collating data on Supporting People services by client group with analysis for most service user groups completed. This exercise has now been extended across the Yorkshire and Humberside region; and

- a West Yorkshire service review newsletter that shares progress reports and good practice relating to all aspects of the review process. This is circulated quarterly to Supporting People teams and service providers.

136 Cross-authority updates are regularly reported to the Core Strategy Group with the regional co-ordinator providing quarterly updates on the work of the group. Cross-authority issues are given an appropriate level of priority within the programme.

Access to services and information

137 Access to written information about services from customer access points was poor at the time of the inspection, although the Council has since reviewed and increased its availability. There are a limited range of leaflets and they do not carry information on how to obtain them in community languages, Braille or audio tape formats.

138 For service users, the Council's website contains an explanation of Supporting People, contact details, a directory of services, information on fairer charging and the names and contact details of providers. Helpfully, the web site is speech enabled for people who have a visual impairment or poor literacy.

139 The current edition of the 'Better Care: Higher Standards' charter which details access to health, social care and housing services for vulnerable people does not carry information on Supporting People, although a revised version was due to be available shortly after our inspection.

140 Mystery shopping exercises were carried out for a number of service user groups. All our requests for information and advice were answered promptly and courteously and without the need to refer any of our requests on.

141 A new service which brings together all housing needs services has been opened in a one-stop-shop which has improved access for homeless people and those threatened with homelessness.

142 The Social Services and Health Department has commissioned services to improve access to BME communities. Examples include a link worker scheme which acts as a conduit between members of BME communities and mainstream services; a mental health outreach service and a learning disability development worker.

Diversity

143 The needs of some of the most marginalised members of society have still to be understood in the context of delivering housing related supported; in some cases needs have been identified but not actioned. There has been a lack of progress since the shadow strategy first highlighted areas for action in 2002, although cross-authority research is underway. Positively, staff in the wider department have been employed to help under-represented groups to access services.

- 144 The five-year strategy demonstrates the need for housing related support for most eligible vulnerable people in the district, but there are still some gaps in knowledge which cover some of the most marginalised members of society, including travellers.
- 145 The areas where a need for development was highlighted in the shadow strategy included:
- black people and members of other minority ethnic communities:
 - implement an action plan that will achieve the improved take-up of Supporting People services by the BME communities in Wakefield;
 - people with HIV and AIDS:
 - to promote the sensitive delivery and monitoring of Supporting People services for people living with HIV and AIDS through training, monitoring and dissemination of models of good working practice;
 - refugees:
 - monitor all Supporting People services in a way that tests the integration of refugees into generic services; and
 - travellers:
 - to monitor the delivery of Supporting People services to both settled and current travellers.
- 146 None of the above actions from the shadow strategy have been implemented, although cross-authority research has been undertaken into the needs of homeless people which incorporated BME communities and people with HIV and AIDS. Cross-authority research into the housing related support needs of travellers is due to commence in January 2006.
- 147 Priorities highlighted within the 2005/06 implementation plan for the five-year strategy include:
- by June 2005 - 'action plan for the assessment and improvement of accessibility of Supporting People services for people from BME communities'; and
 - by September 2005 - 'to promote training and knowledge of support providers to meet support needs of people living with HIV in partnership with health and service providers'.
- 148 At the time of our inspection in July 2005, the action plan for the assessment and improvement of accessibility of Supporting People services for people from BME communities was not in place, which will adversely impact on the timeline for ensuring accessibility for potential service users from BME communities.
- 149 Under the 1995 Disability Discrimination Act, from 1 October 2004, anyone providing a service to the public has been required to tackle physical barriers to disabled people accessing their services. Currently, 56 per cent of the Council's public access points are compliant with the Disability Discrimination Act with a target to raise this to 97 per cent by March 2008.

- 150** Positively, staff have good access to interpretation facilities which have been used to facilitate service user engagement in the service review process. This has ensured that all service users have the ability to have an input into the review of the service they are receiving.

Outcomes for service users

- 151** Wakefield has commissioned new permanent and temporary services through Supporting People which are in line with priorities in the Community Strategy and service users we met spoke enthusiastically about how the support they have received has enhanced their lives. However, plans to address the needs of some of the most excluded groups are not well advanced.
- 152** Wakefield was successful in attracting one of the highest levels of pipeline funding nationally and as a result new services have been provided and include services for:
- women fleeing domestic abuse;
 - teenage parents;
 - people with learning disabilities;
 - people with mental health difficulties; and
 - offenders.
- 153** Outcomes for other minority groups such as BME communities, gypsies and travellers, people with HIV and AIDS have been less positive with actions to address their need not prioritised to date.
- 154** During our inspection we spoke to a random sample of service users in receipt of Supporting People funded housing support services. These service users reported considerable improvements in the quality of their lives which are directly attributable to receiving housing related support. In addition to directly benefiting the recipient, the support has clear benefits for the wider community and the longer-term social inclusion agenda.
- 155** Service users we met told us how receiving support had helped them. For example:
- a service user told us how her children had been on the Child Protection Register but the support she had received had helped her to such an extent that her children were not now on the Register and no longer had a social worker. The family was now looking forward to moving into their own home;
 - one resident had not been successful in remaining out of custody for more than six months over the whole of his adult life and had never before had his own settled accommodation. Now, he has not been before the courts for five years and is in settled accommodation and employment;
 - a service user told us that she was always getting into trouble before moving into supported housing. Now staff are helping her to turn her life around; she has made friends, started going to the gym and is generally getting her life back on track; and

- one service user told us that the support she has received has helped her to build up her confidence and to carry on living independently in her own home. She has started working as a volunteer and now has a goal to train to work with teenage parents.
- 156** The Commissioning Body has taken steps to maximise outcomes for service users with the Supporting People grant under-spend utilised to meet some of the identified gaps in services. Services developed have included:
- support for people with drug and alcohol addictions;
 - support to prevent families being evicted;
 - services for people with chaotic lifestyles;
 - floating support for teenage parents; and
 - support for people with a learning disability moving from a hospital setting.
- 157** Attempts have been made as part of the transfer agreement to WDH to ensure that there will be access to housing for vulnerable groups. A housing needs panel and multi-agency exclusion panel are in place to champion the cases of vulnerable applicants to WDH.
- 158** Currently, there is a reliance in most areas on accommodation-based support. This is of concern as there is a lack of move-on accommodation which jeopardises the ability to move service users at a time to fit in with their support planning and also gives rise to projects silting up. This limits access to support for potential service users who may be in need of housing related support but are unable to access accommodation. A number of schemes within the implementation plan have been prioritised to address this position. For example, £22,250 has been identified for 2005/06 to increase the volume and range of floating support services for people who experience homelessness.

Summary

- 159** Overall, we judge Wakefield Metropolitan District Council to be delivering a one-star service in its planning and delivery of the Supporting People programme. We have highlighted the following areas in reaching this judgement.
- 160** The structures through which the Supporting People programme is delivered are in place with the programme delivering new services which are linked to priorities within the Community Strategy and providers have a high regard for the support they receive from the Supporting People team. Financial arrangements for the programme are robust with a prudent approach to reinvesting savings and fairer charging arrangements are in place. The programme benefits from well developed cross-authority work.

- 161** However, the Commissioning Body and Core Strategy Group have not been strong in driving the programme with the communication of performance information weak and progress slow in a number of areas including the completion of reviews and the implementation of a replacement IT system to support the programme. The needs of all user groups are not yet fully understood and strategic development of the programme has not been influenced by the views of all service user groups. There has been a lack of communication with providers regarding the commissioning of services.
- 162** The programme through which all services will be reviewed before the end of March 2006 is slow in being delivered with no completed reviews at the time of our inspection. This in turn has impacted on the ability to address VFM considerations within services.

What are the prospects for improvement to the service?

What is the evidence of service improvement?

- 163** The Council has demonstrated that it responds to external challenge and has made significant improvement following its corporate assessment in 2002 with significant improvements in corporate capacity and a CPA assessment moving from 'poor' to 'fair'.
- 164** Within Social Services and Health, the Department has moved within two years from providing a poor, zero-star service and being placed under special measures to being a two-star service which for adult services has excellent prospects for improvement. CSCI noted in their 2003-04 Delivery Improvement Statement that there was:
- 'Clear evidence of strengthening strategic approaches which are resulting in continuing and substantial improvement on national priorities'.*
- 165** However, although corporately there is clear evidence that there is a track record of improvement this has not fully impacted upon the delivery of the Supporting People programme. For example, the lack of progress on completing reviews of legacy funded services has impacted on the ability to reconfigure services to reflect local priorities and meet identified needs. Also, recommendations from the review of the shadow Supporting People strategy have not been consistently implemented in a timely manner.
- 166** The new Supporting People services which have been developed are linked to priorities for the community articulated through priorities agreed by the LSP. These include schemes for teenage parents and women fleeing domestic violence and those we visited are delivering services which meet the needs of service users.

- 167 There have been clear outcomes for some groups of service users. For example, new services for teenage parents have proved invaluable, with young women clearly describing how their housing related support has stabilised their lives and reduced the need for ongoing involvement with Children's Services. Similarly, offenders have spoken of the stabilising impact that housing support has had on their lives, leading to a reduction in offending. In both these cases the benefits of Supporting People funding reach much further than just to the person being supported.
- 168 In looking at the evidence of service improvement we have also looked at the response to areas for improvement highlighted for the Supporting People programme. The shadow strategy for the delivery of Supporting People was produced in 2002 and overall was assessed by the former ODPM as 'good'. Within this were a small number of areas for improvement, most notably that the section on service quality and review needed urgent review, with areas for improvement including:
- 'There is no clear procedure for prioritising reviews; no evidence of an appeals procedure in place and no acknowledgement of risk/building in risk assessment to the review process'.*
- 169 The Council has been slow to respond to the above, although these three areas have now all been addressed they were not actioned until over two years after the weakness was highlighted, which is not timely. Additionally, the assessment highlighted that there was no overall sense of priorities and that:
- 'It is difficult to pull out a snapshot of the important and immediate priorities for action in the short-term'.*
- 170 Positively, subsequent to our inspection a clearly costed implementation plan has been developed with priorities for service development by user group and nature of the support identified along with the annual revenue requirement which would be needed until 2007/08.
- 171 Identified areas for improvement have not been consistently acted upon. For example, the observation that early in the programme the Commissioning Body was not properly constituted was acted upon, however, the need for a vision and action plan for involving service users and their carers was not.
- 172 Wakefield is a member of the West Yorkshire Cross-authority Group and through this forum the Supporting People team is actively learning from partners in the group. For example, work on regional benchmarking has been developed within the group and is now being used by the Supporting People Beacon authorities as an example of positive practice. The team has also shown that it looks outside to seek positive practice and then implements this learning. For example, the development of eligibility criteria included a considerable piece of work taking the positive elements of all available policies from other programmes. This ensures that when policies are introduced this does not happen in isolation to progress in the wider Supporting People field.

How good are the current improvement plans?

- 173** The Implementation Plan for Supporting People is the main plan for monitoring implementation of the Supporting People programme. The Implementation Plan for 2004/05 was not fully populated but the plan for 2005/06 which is designed to implement the five-year strategy has been revised so that it is now SMART². Within the plan, objectives are more outcome-focussed and progress towards achieving the action is noted which allows for performance management of medium and longer-term actions. A number of the completion dates have been revised and now represent a more realistic timescale. A monitoring action plan to support the implementation plan includes financial information and evidence required to confirm completion of the action.
- 174** The Supporting People Implementation plan feeds into the Commissioning and Partnerships Service Improvement Plan. The inclusion of priorities which flow from the Community Strategy into departmental plans and then into the service implementation plan is positive. However, the Council must ensure that any changes in one plan are agreed and reflected through the other linked plans - which have not always been the case. For example, the improvement of support for teenage parents is an action point in both the Community Strategy and the Commissioning and Partnerships Plan, but the planned completion dates differ. Similarly, Also, March 2005 was set as the target date within the Service Improvement Plan for completing the improvement of public information to ensure better access and focus on hard to reach groups. However, within the revised implementation plan there is an action to ensure access to information, assessment and Supporting People services for people from BME communities with a revised completion date of 31 March 2006.
- 175** Within the Social Services and Health directorate there is a high level consultation strategic framework document but currently there is no consultation and communication plan for the Supporting People programme. There has been recognition of the need to improve the level of service user involvement in the Supporting People programme and a bi-annual service user event has been agreed but without looking at this area more holistically the full benefits to be gained from the full involvement of all service user groups could be lost. Following our inspection there has been agreement to develop a consultation and communication action plan.
- 176** The need for robust risk assessments and contingency plans was highlighted in May 2003 and to address this a Supporting People risk management framework was agreed in June 2005. The register comprehensively assesses and ranks risks to the programme and is regularly monitored by the Commissioning Body. It is a positive step that the risks to the programme have now been formally considered and clearly identified but the implementation some two years after being highlighted has not been timely.

² SMART: specific, measurable, achievable, realistic and time -bound.

- 177 There has also been slippage in the implementation of the replacement IT system.
- 178 The West Yorkshire Cross-Authority Group has jointly funded a Supporting People cross-authority co-ordinator post. The cross-authority statement includes a number of priorities for work which we have also identified as areas for improvement for the programme in Wakefield, the completion of which will further enhance the Supporting People programme. These include:
- research on the needs of travellers;
 - undertaking a 'mystery shopping' exercise to identify informal exclusions that may be operated by service providers in order to challenge the use of blanket exclusion policies. It is also planned for this to identify training needs, raise awareness and increase the capacity of providers to work with certain client groups; and
 - assessing the need for and the viability of cross-authority arrangements for the joint commissioning, procurement or management of services.

Will improvements be delivered?

- 179 Corporately and within Social Services and Health there is strong leadership with a drive to improve the performance both corporately and within service areas. This is shown within Social Services and Health by the pace of change required to move from special measures to a two-star social services department within two years.
- 180 Where necessary, resources have been re-directed towards the Council's key priority areas. The Best Value Performance Plan for 2005/06 highlights an additional £28.8 million revenue being directed into priority services. Social Services and Health will benefit from £11.8 million of this.
- 181 The Council has become one of the pilots for Local Area Agreements and a submission to the former ODPM for a local public service agreement which includes a priority for reducing domestic violence and supporting victims was being drafted following our inspection. The submission links to one of the needs identified within the Supporting People strategy.
- 182 Within Supporting People, additional service developments have been determined in line with the strategic priorities of the LSP. At the time of our inspection the priorities stated in the five-year strategy were broad, with little indication of prioritisation. There had also been no costing of priorities and as a result there was a lack of clarity over the future focus of the programme. As highlighted earlier in this report, this has since been rectified by the introduction of a costed implementation plan.
- 183 The new outcome-focused implementation plan, together with agreed regular updates on critical areas of success for the programme, including progress on reviews, will help the Commissioning Body to give a clearer steer to the programme in future.

- 184 Plans have recently been developed to allow for councillors to be better informed in the future. Measures have been put in place to enable portfolio holders to provide updates to cabinet on their service areas, this will increase awareness of key issues within each directorate as all councillors receive cabinet minutes.
- 185 The Commissioning Body has agreed a procurement and commissioning strategy to ensure that future Supporting People services are procured through an open and transparent process which demonstrates value for money. Importantly, providers have been made aware of the approach being introduced; this was not the case in the earlier phases of the programme.
- 186 Following the introduction of the risk register, risks are now being reported to the Core Strategy Group. For example, a report has been presented on the risk posed by sole traders being unable to comply with service review requirements.
- 187 Although the Council has made slow progress in delivering its service review programme, it has clear plans to meet the March 2006 deadline and has secured additional resources to enable this to be achieved. However, the slow progress has impacted on improvements to the programme, including service quality and value for money that could have been achieved earlier.
- 188 The Council has put some building blocks in place to address the future needs of some hard to reach groups. For example, there has been a corporate commitment to supporting the work of some BME groups and researching future needs through the community cohesion team and the social services and health directorate. Within the Supporting People programme, the implementation plan includes actions to improve access to information, assessments and services for people from BME communities and there is also a cross-authority commitment to carrying out research into the needs of travellers.
- 189 Capacity is likely to be increased in the future with the introduction of the replacement IT system for Supporting People which will enable more comprehensive monitoring of performance returns and the provision of better management information.
- 190 The Supporting People grant is managed efficiently with regular reports now being brought to both the Commissioning Body and the Core Strategy Group. Forward projections on spend have been carried out and these, together with the uncertainty over future funding, have informed the decision to only commit funding for short-term schemes or to temporarily increase the capacity of existing services.
- 191 The introduction of the revised implementation plan highlighted earlier in this report is a positive change to help drive the programme, an area which has not been a strength of the programme in the past. The Council must however ensure that actions not captured in the implementation plan, but which are agreed by the Commissioning Body, are acted upon and progress is reported. Also, there are not yet any local performance indicators for the programme by which the success of the programme can be measured.

Summary

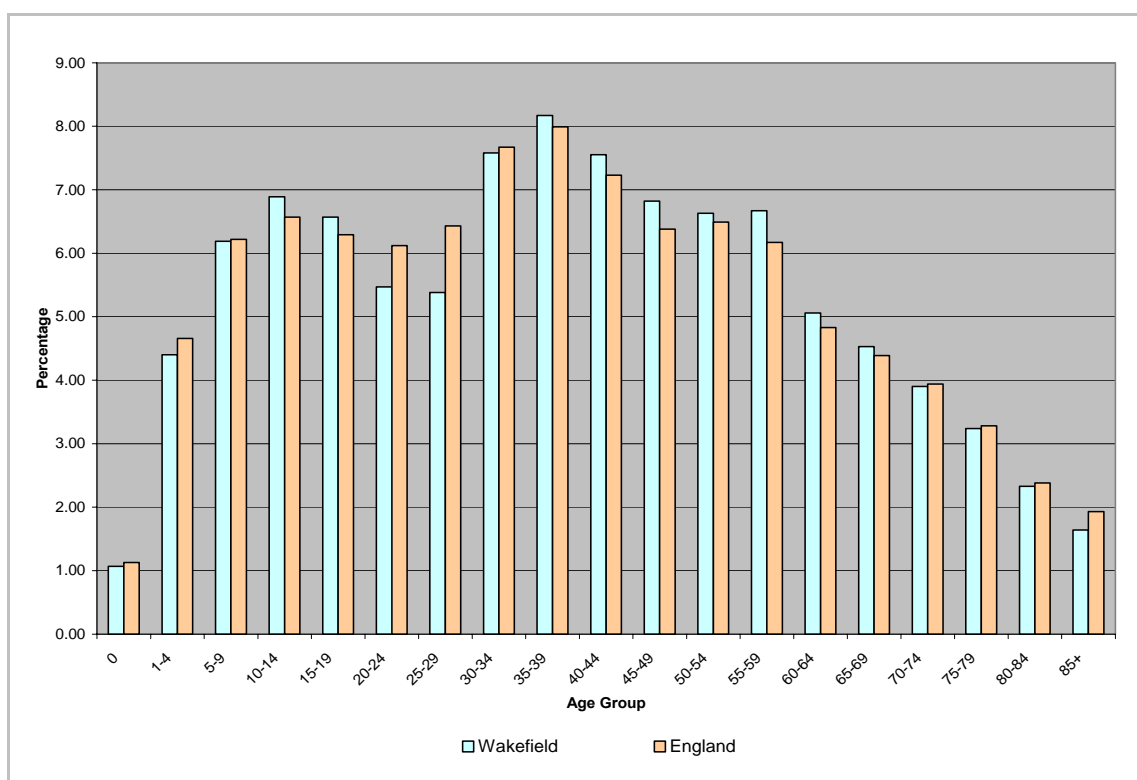
- 192 Overall, we have judged that Wakefield Metropolitan District Council's Supporting People programme has promising prospects for improvement.
- 193 The Council can demonstrate its ability to deliver improvement across a range of services, most notably social services, although positive practices in areas including performance management are not yet fully integrated into the delivery and development of the Supporting People programme.
- 194 The improvement plans that will drive the programme in the future have been recently revised and are now robust, with realistic and measurable targets.
- 195 The Council has demonstrated that it responds to external challenge and has made significant improvements, particularly in its social care services. At a service level, there are a number of examples of constructive partnership working and an openness to learning from other organisations, leading to improvements being implemented.
- 196 There has been good financial management of the programme and, although future resources are likely to be limited, the Council is now well placed to make best use of the funding available for the programme.
- 197 The service review programme should act as a driver for improvement and in this area progress has been relatively slow. However, progress has accelerated since the inspection and there have been a number of positive outcomes and improvements for service users.

Appendix 1 – Demographic information

- 1 This section includes demographic information relevant to Supporting People, comparing the Council and with England.

Measure	Wakefield	England
Population (mid-2003) ³	318,300	57,851,100
Percentage of the population aged 65+	15.61	16.41
Percentage from minority ethnic groups (all groups other than White – British)	3.31	10.44
Percentage unemployment (claimant count rate) ⁴	2.2	2.4
Deprivation Index (1 highest, 354 lowest) ⁵	55	-

Figure 1 Percentage of the population in each age group compared with England



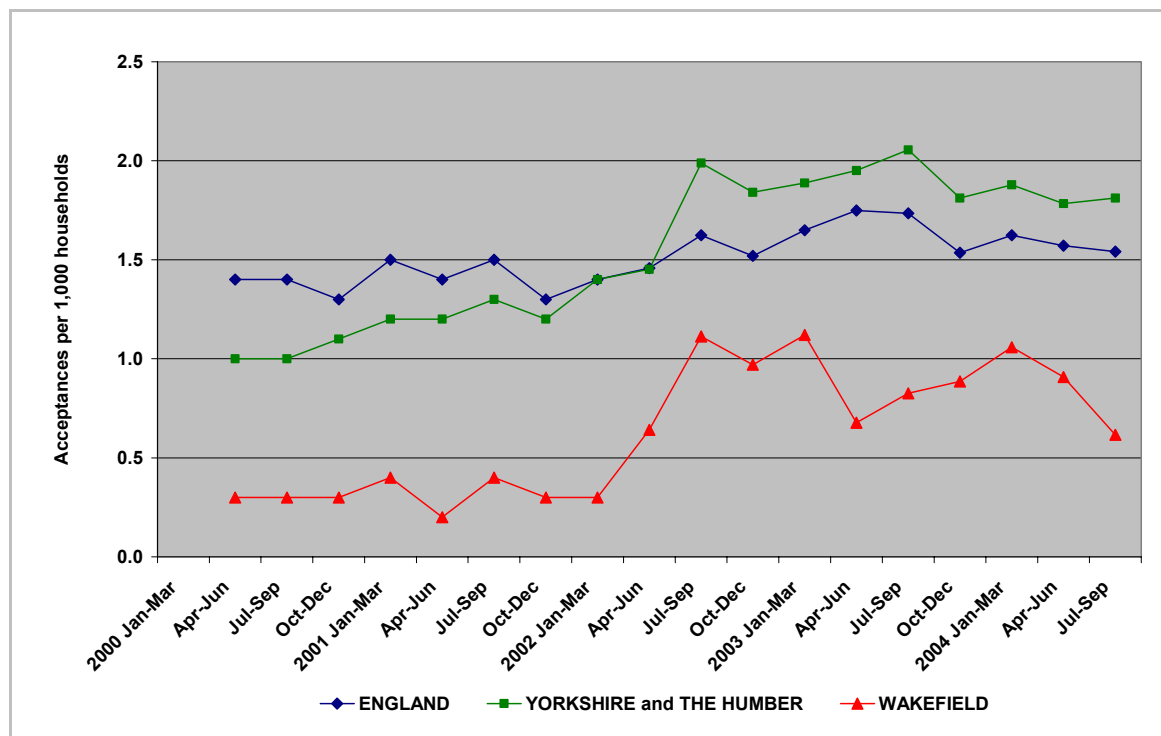
³ Source: mid-year population estimates (2003)

⁴ Source: claimant count with rates and proportions (May 2005)

⁵ Source: deprivation Index 2004, average ward score for the authority.

Figure 2

Households accepted as homeless between 2000 and 2004 compared with the region and England (acceptances per 1,000 households)



Performance information

2 This section highlights strong and weak areas of the Council’s performance in services that are relevant to Supporting People. We have used the following information to help us reach our judgements:

- data for services funded through the Supporting People programme;
- Comprehensive Performance Assessment scores;
- star ratings for social services;
- Performance Assessment Framework indicators for social services; and
- relevant best value performance indicators.

Supporting People data

Figure 3 Total service provision funded through Supporting People

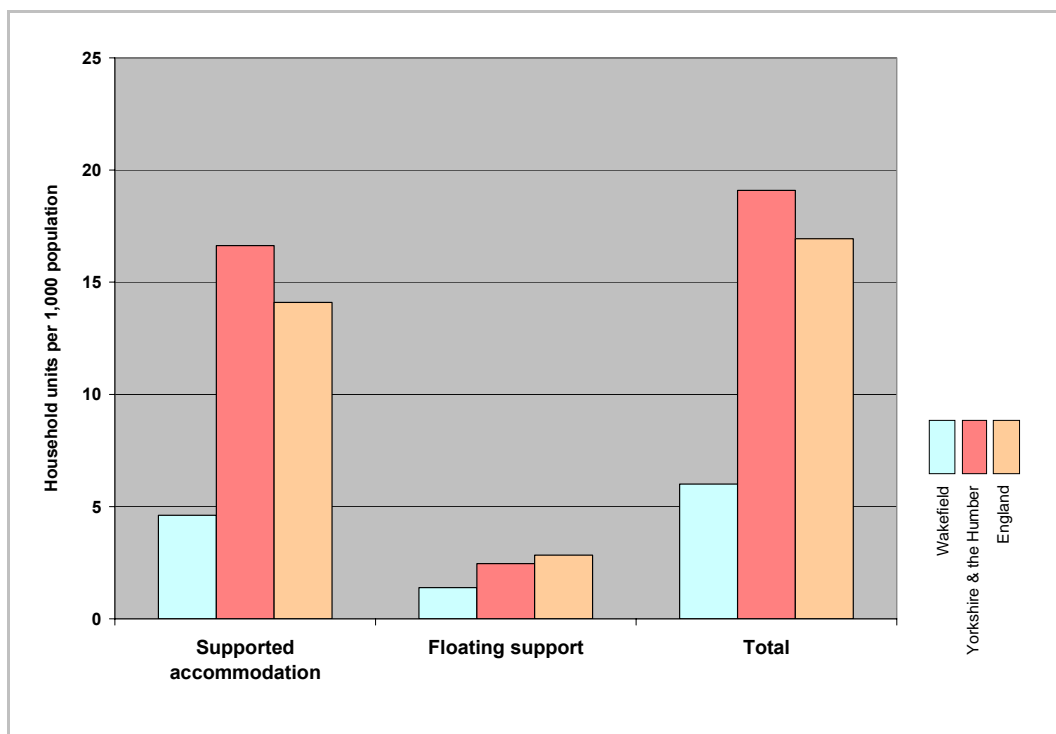


Figure 4 Services for older people with support needs compared with the region and England

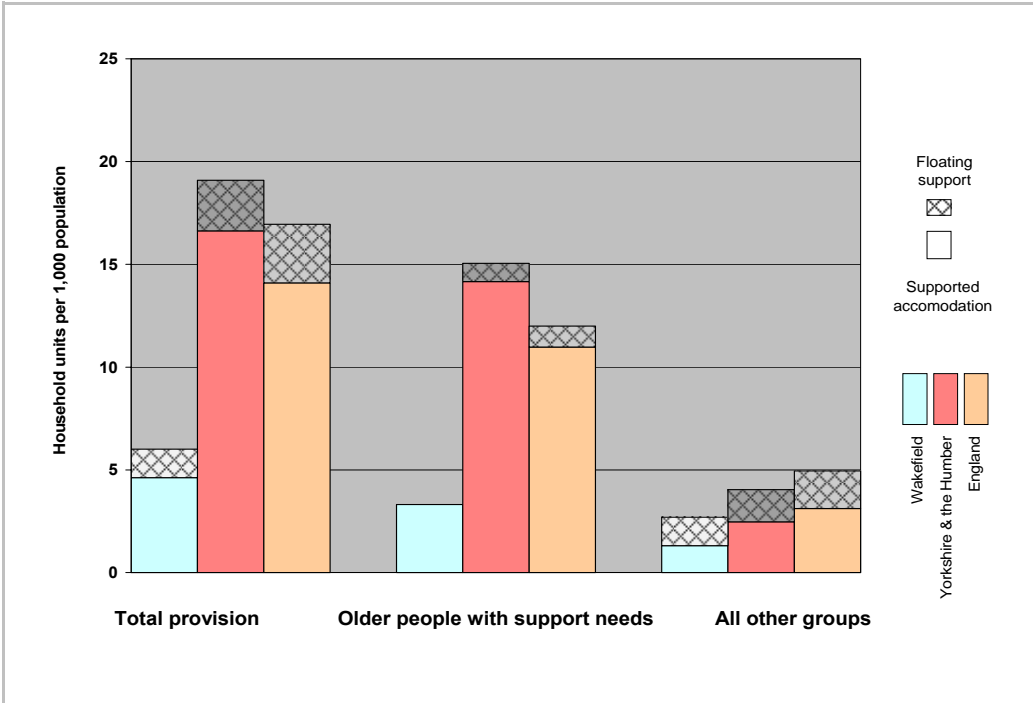


Figure 5 Services for other groups compared with the region and England

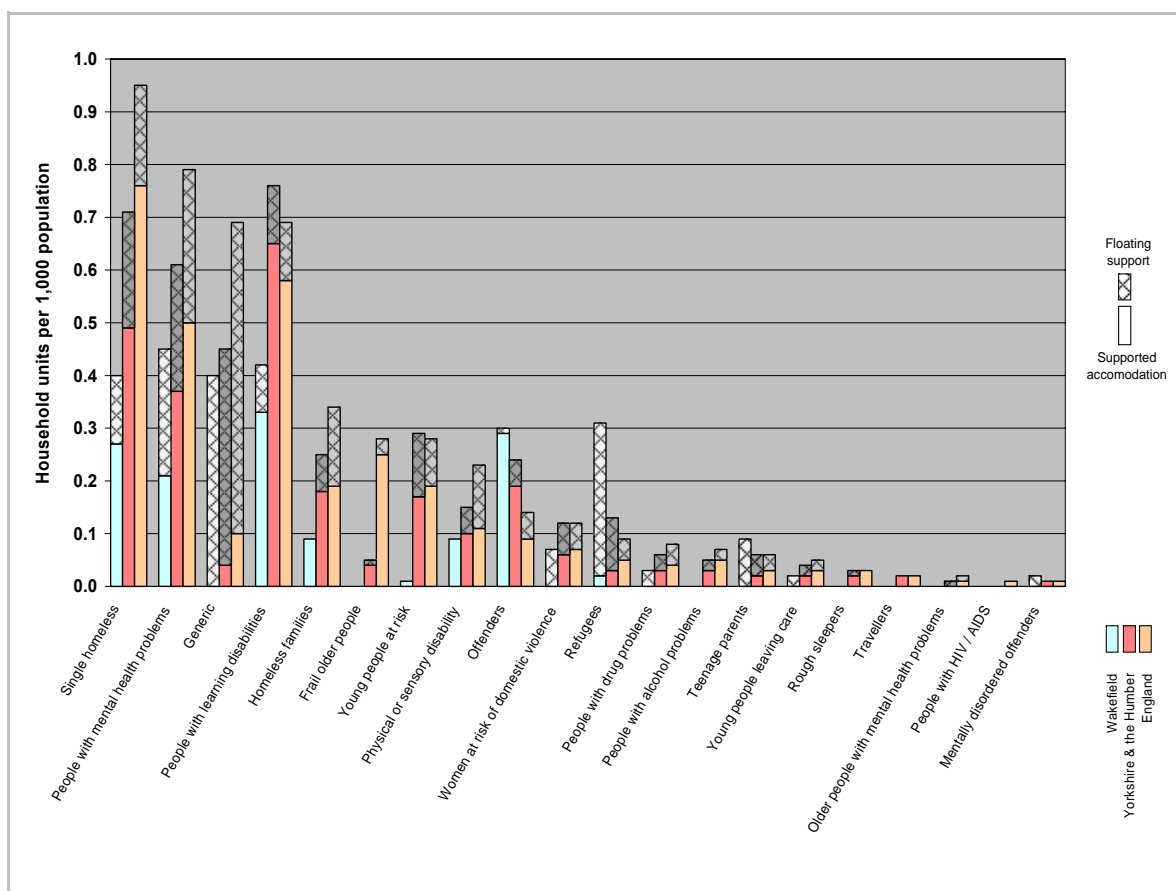


Table 2 Funding for Supporting People

Wakefield	2003/04	2004/05	2005/06
Final Supporting People grant	£ 7,208,089	£ 7,332,753	£ 6,963,434
Pipeline allocation	£ 669,008	£ 979,141	£ -
Administration grant	£ 302,031	£ 281,028	£ 224,822

Table 3 Unit costs of Supporting People services in 2003/04 (£ per week)

	Per head of population	Per unit	Per unit excluding community alarms	Per unit excluding community alarms and sheltered housing
Wakefield	£ 0.44	£ 9.43	£ 52.72	£ 87.77
Yorkshire and the Humber	£ 0.72	£ 25.38	£ 32.87	£ 100.47
England	£ 0.70	£ 28.30	£ 34.71	£ 76.37

Source: The data quoted is taken from ODPM sourced material 2003/04. This is the only data currently available. ODPM will be able to provide updated data from September 2005 and this will then be used

Figure 6 Unit costs of supported accommodation compared with the region and England

Labels show costs in the highest 25 per cent

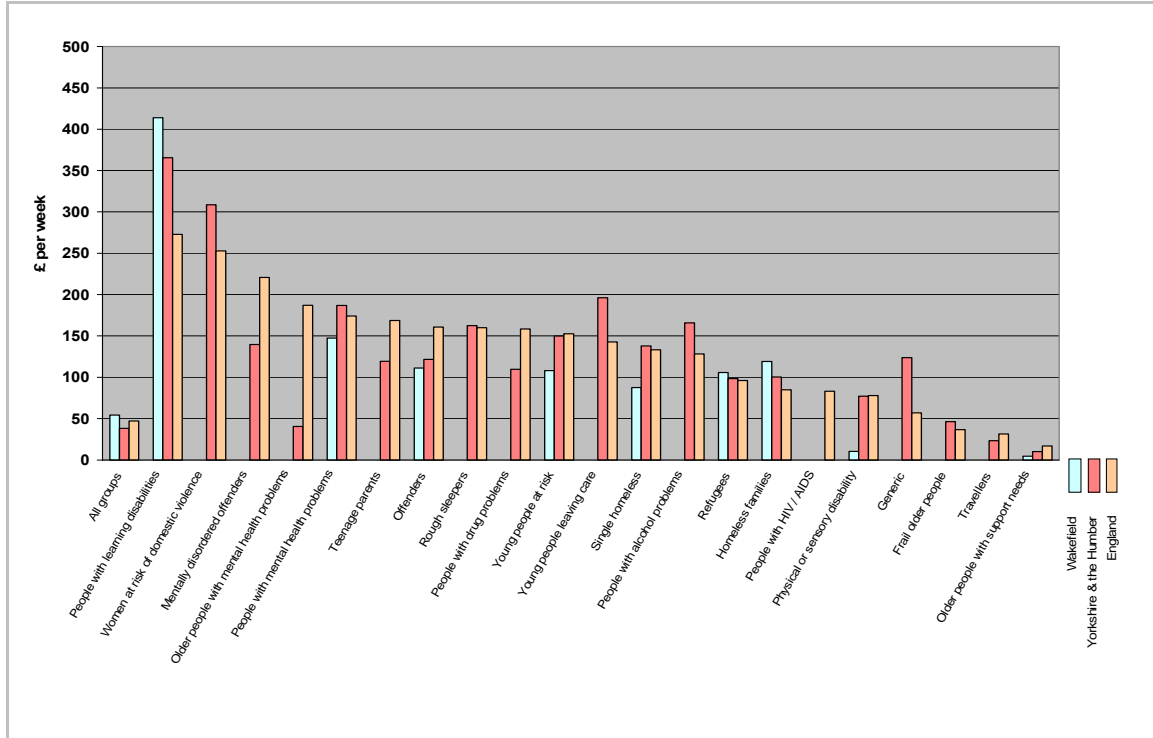


Figure 7 Unit costs of floating support services compared with the region and England

Labels show costs in the highest 25 per cent

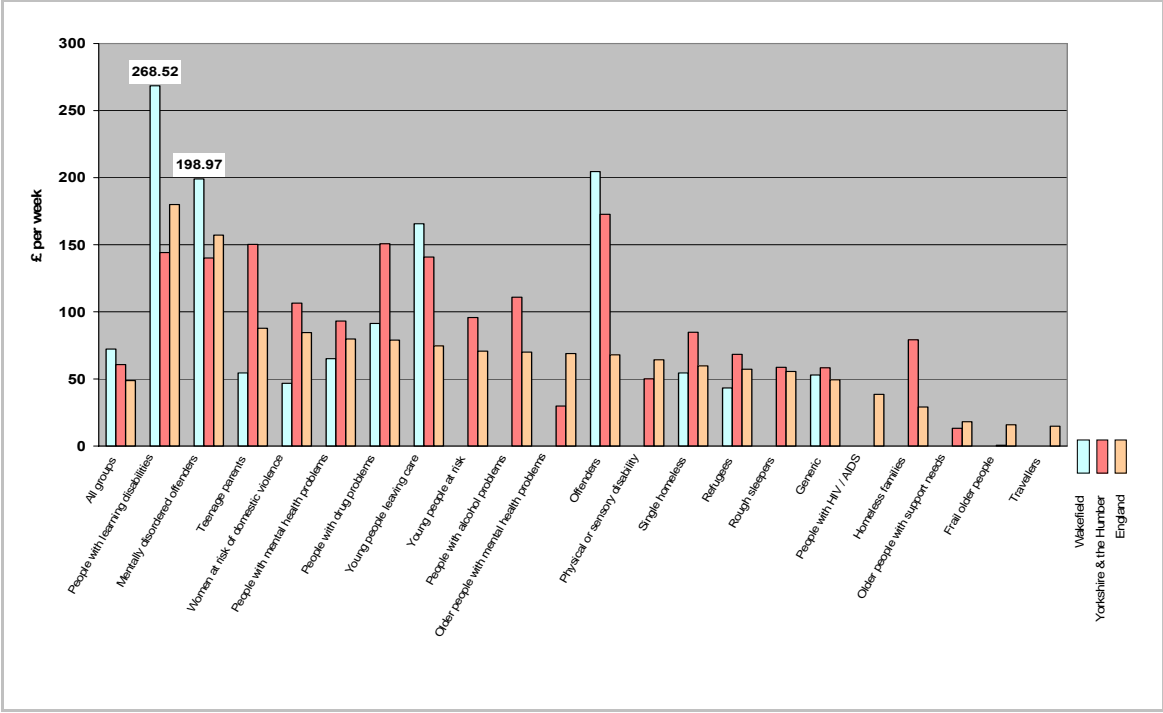


Figure 8 Supporting People grant per head of population per week compared with nearest neighbours, all metropolitan councils and all English councils (2004/05)

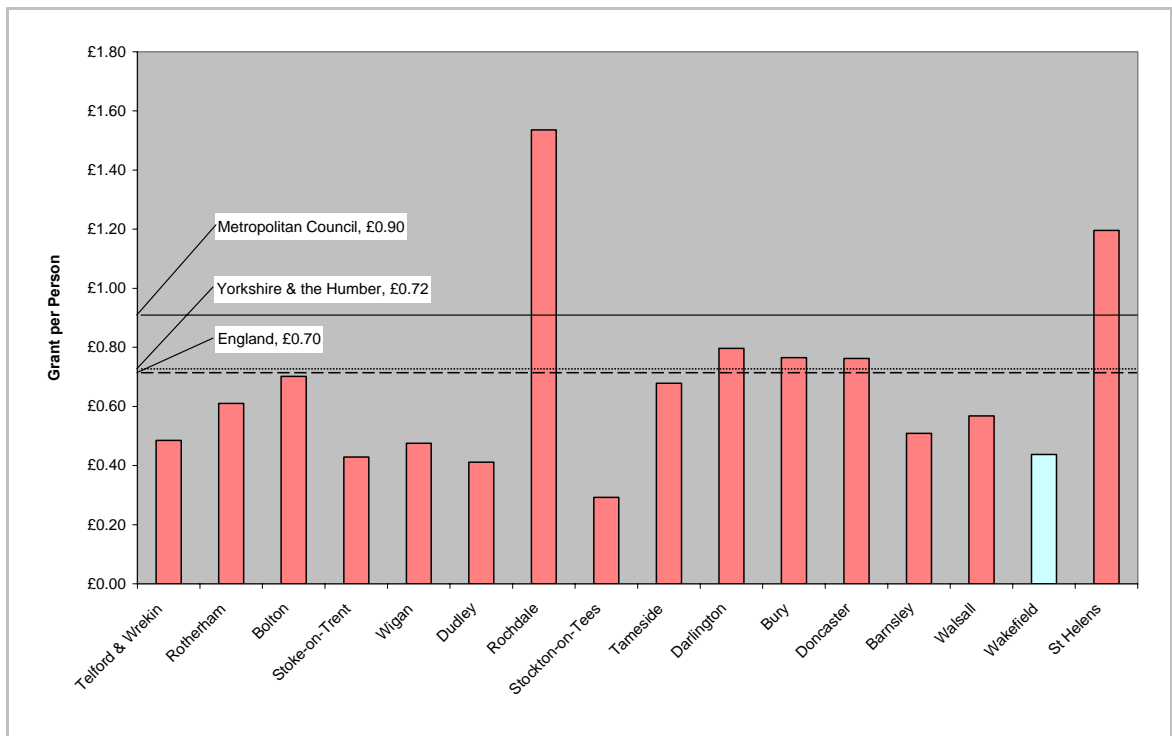


Figure 9 Pipeline allocation per head of population compared with nearest neighbours, all metropolitan councils and all English councils

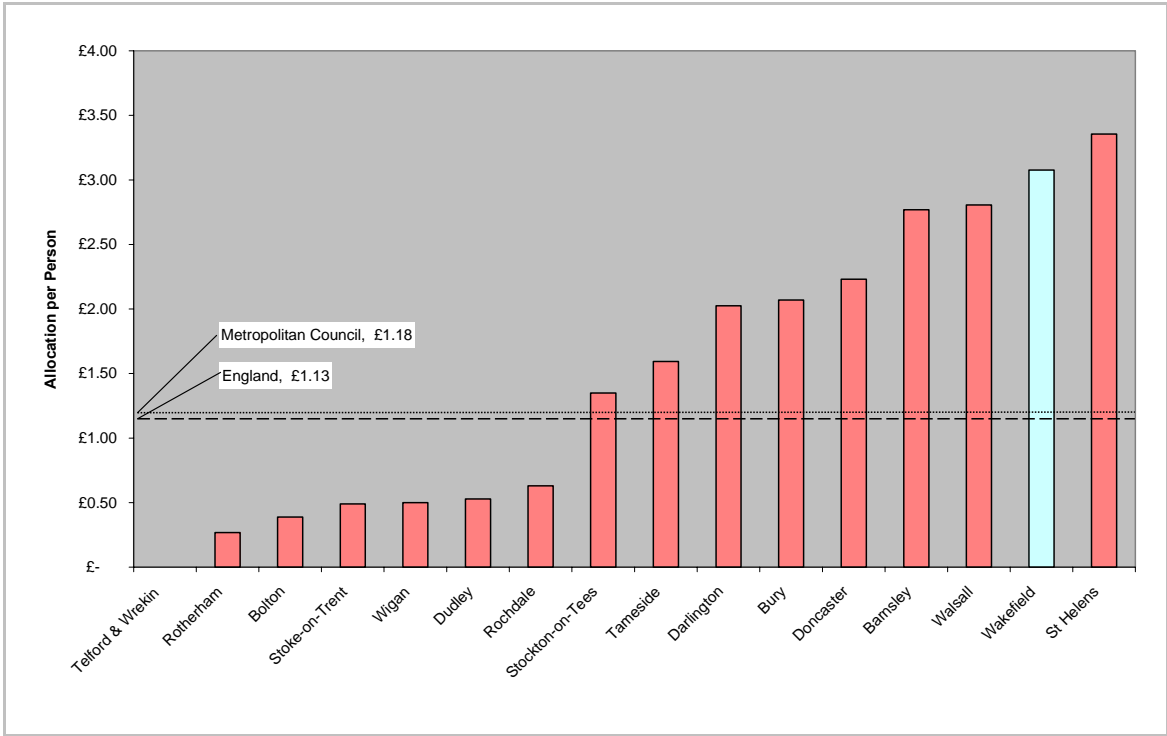


Figure 10 Share of spending between user groups (£000s)

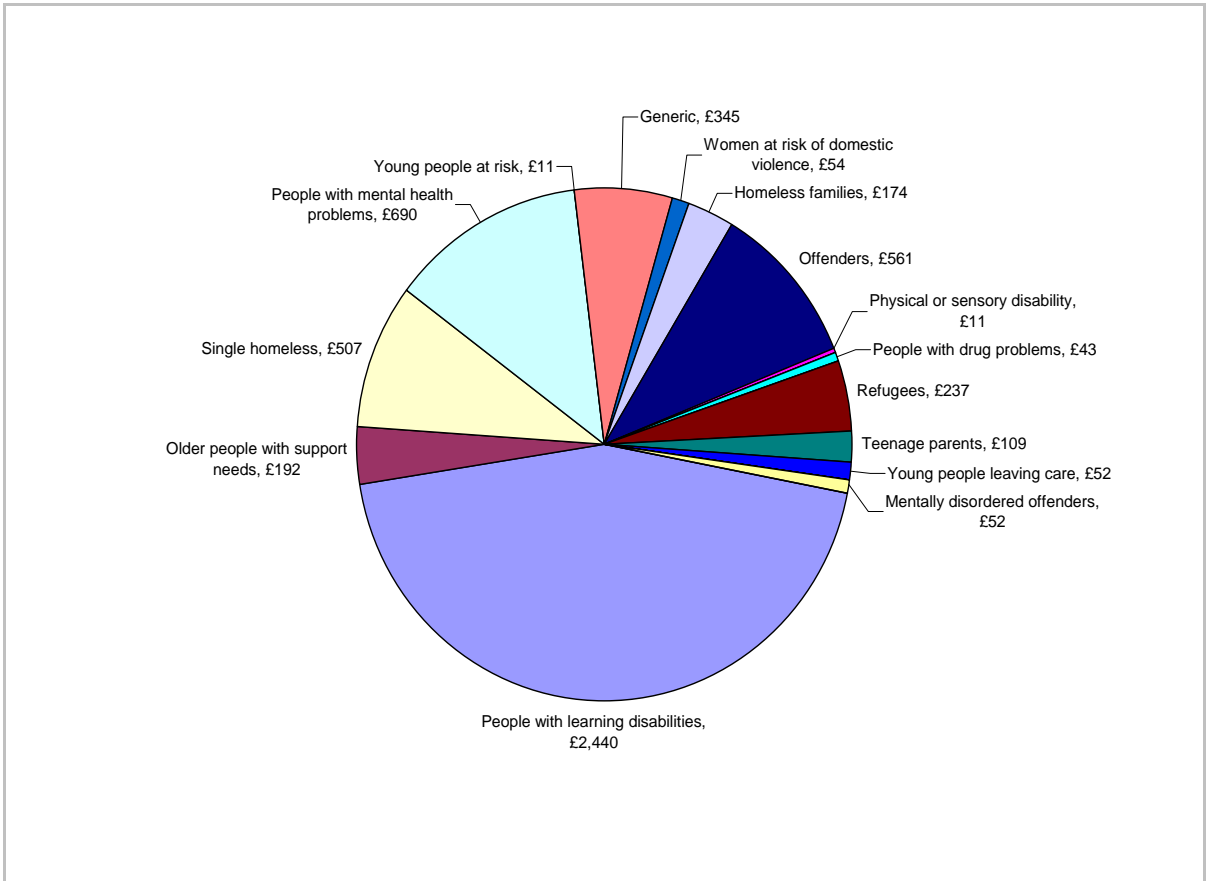


Figure 11 Share of spending between types of provider (£000s)

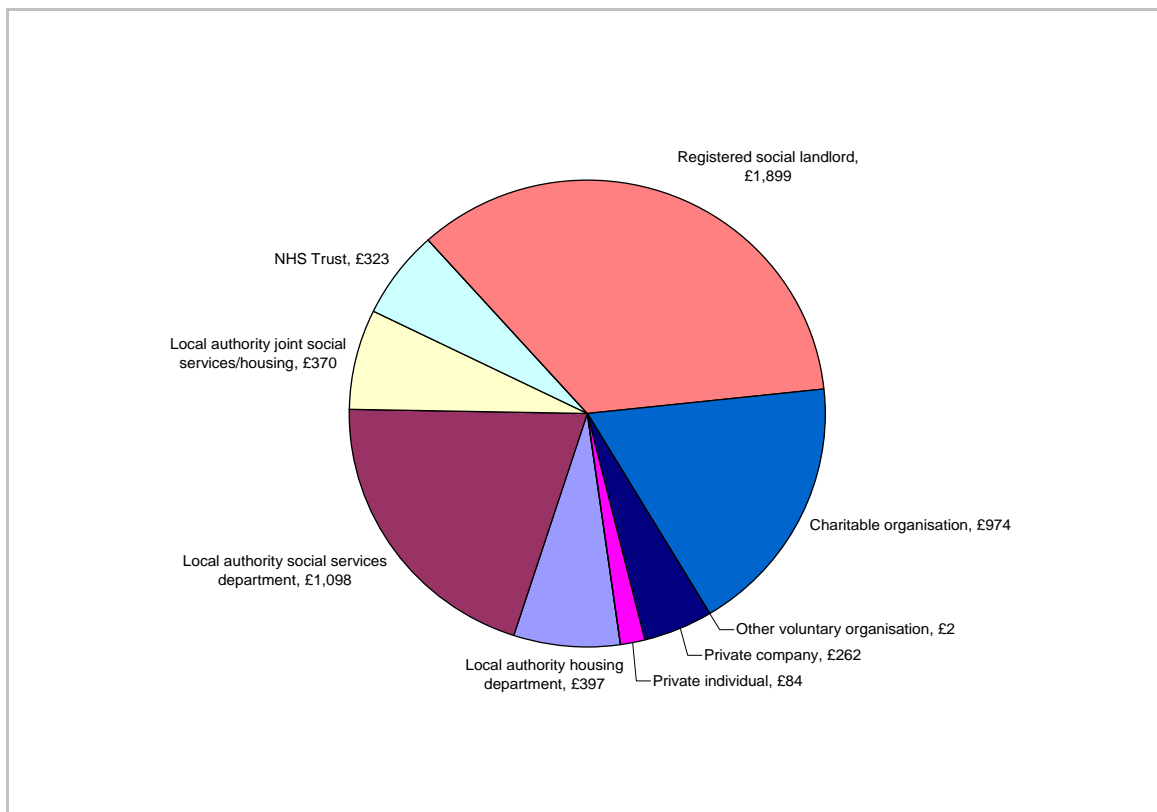


Table 4 Social Services star ratings November 2004

The table below shows the Social Services Inspectorate ratings of the Council's performance

Table header	Serving people well?	Prospects for improvement?	Performance rating (CPA equivalent)
Adults' Services	Most	Excellent	★★ (3)
Children's Services	Most	Promising	

Social services performance indicators

Table 5 Performance Assessment Framework indicators 2003/04

The table below shows how the Council's social services performed on indicators relevant to Supporting People

Wakefield	
Significantly above average (•••••)	<ul style="list-style-type: none"> • Adults with mental health problems helped to live at home (C31). • Admissions of supported residents aged 18 to 64 to residential/nursing care (C27). • Employment, education and training for care leavers (A4). • Physically disabled and sensory impaired users who said that their opinions and preferences were always taken into account (D57).
Above average (••••)	<ul style="list-style-type: none"> • % change on previous year in total emergency admissions to hospital (A5). • Admissions of older people to residential/nursing care (C26). • Adults and older people receiving a statement of their needs and how they will be met (D39). • Adults with physical disabilities helped to live at home (C29). • Adults with learning disabilities helped to live at home (C30). • Percentage of items of equipment and adaptations delivered within 7 working days (D54).
Average (•••)	<ul style="list-style-type: none"> • Adults and older clients receiving a review as a percentage of those receiving a service (D40). • Emergency psychiatric re-admissions (A6). • Older people helped to live at home (C32). • Delayed transfers of care (D41). • Physically disabled and sensory impaired users who said that they can contact social services easily (D58).

Wakefield	
Below average (••)	<ul style="list-style-type: none"> Adults and older people receiving direct payments at 31st March per 100,000 population aged 18 or over (C51).
Significantly below average (•)	<ul style="list-style-type: none"> -

Best value performance indicators

Table 6 Performance on relevant indicators in 2003/04 compared with metropolitan councils

The table below shows how the Council performed on best value performance indicators relevant to Supporting People

Wakefield	
Within the best 25 per cent	-
Average	<ul style="list-style-type: none"> The level of the equality standard for local government to which the authority conforms (BV2). Length of stay in hostel accommodation (BV183b). Domestic violence refuge places (BV176).
Within the worst 25 per cent	<ul style="list-style-type: none"> Energy efficiency of local authority owned dwellings (BV63). Length of stay in bed and breakfast accommodation (BV183a). Council homes which did not meet the decent homes standard (BV184a). Average time for processing new housing benefit claims (BV78a).

Appendix 2 – Documents reviewed

- 1 Before going on site and during our visit, we reviewed various documents that were provided for us. These included:
 - Supporting People shadow strategy;
 - Supporting People five-year strategy;
 - minutes of the commissioning body;
 - minutes of the core strategy group;
 - better care higher standards;
 - providers' newsletter;
 - Wakefield Community Plan;
 - service review information;
 - Housing Strategy; and
 - Homelessness Strategy.

Appendix 3 – Reality checks undertaken

- 1 When we went on site we visited a number of providers, building on the work described above, in order to get a full picture of how good the service is. These on-site reality checks were designed to gather evidence about what it is like to use the service and to see how well it works. Our reality checks included:
 - interviews and focus groups with key staff and providers;
 - visits to service providers;
 - analysis of batch 1 and batch 2 service provider information;
 - observations of a core strategy group meeting; and
 - reviewing the performance of customer advice lines.

Appendix 4 – Positive practice

‘The Commission will identify and promote good practice. Every inspection will look for examples of good practice and innovation, and for creative ways to overcome barriers and resistance to change or make better use of resources’. (Seeing is Believing).

Cross-Authority working

The Wakefield Supporting People team are part of a pro-active cross-authority group with a member of staff paid to lead the work of the group. The Council contributes funding to this post. This approach facilitates joint working including the sharing of good working practices, the formulation of benchmarking and the co-ordination of research work.