HALTON
BOROUGH COUNCIL

Supporting People Performance Report – Older People

Supporting People services provide support that enables older citizens in Halton to maintain their independence. Support services are provided to:

- **Older people who are frail who have a physical or mental illness**
- **Older people with support needs**

Supporting People – Performance Report – Older People

TABLE OF CONTENTS

Page

2. Introduction

Reporting performance and monitoring contracts primarily through performance indicators is no longer an acceptable position. Increasingly, local government authorities and Primary Care Trusts must be able to evidence to central government, department of health, inspection agencies and the public, that the money is being spent strategically and delivered to the public through services that are of high quality and outcome focussed around the client.

This performance report aims to provide a high-level performance summary of the Supporting People programme. The reporting requirements for Older People Services are shown in the table below.

Type of Service	No of Units	Client Record Form	NI142 (KPI1) Key Performance Indicators	Long Term Outcomes	Quality Assessment Framework
Floating Support	136	Required	Required	Required	Required
Dispersed / Community Alarms	105	Exempt	Not Mandatory	Exempt	Required
In-House, Integrated Lifeline Service		Exempt	Not Mandatory	Exempt	Required
Peripatetic Warden	1860 *	Exempt	Required	Required	Required
Extra Care	40	Exempt	Required	Required	Required
Sheltered	560	Exempt	Required	Required	Required
Private Adult Placement	1	Required	Required	Required	Required

* This service provides three levels of cover, the lowest level being alarm only, the middle level includes alarm, peripatetic warden and low level smart technology and the highest level provides alarm, peripatetic warden and full smart technology. There isn't any performance information being collected for this service at this time as it is currently undergoing changes. It is recommended that performance information be collected following consultation with the provider.

In terms of services in Halton, there is one dedicated Older Persons In-House Floating Support service offering 136 places. In addition there are five generic floating support services with 218 places which can also provide services for older people as identified from client record information. There are seventeen sheltered schemes with day time support from a scheme manager providing 560 units of accommodation, these services also have either their own in-house alarm systems or buy in from either the Integrated Lifeline service or other approved alarm service. There are four dispersed/community alarm providers providing support to 105 persons. Halton has one extra care scheme with 40 units of accommodation. The In-House integrate lifeline which includes the peripatetic warden service has capacity to provide services to 1,860 persons.

3. Financial benefits of the SP programme for Older People - £3.9m

The CLG commissioned research into the financial benefits of the SP programme and the results were issued on 6th July 2009 with an estimated total net saving of £3.4 billion for the national SP programme. A model has been issued which allows local authorities to input their own local data to assess the net financial benefits locally.

Information has been entered into this model for each of the SP client groups showing the number of units of support and the cost per unit for Halton BC. There is some fine-tuning to be carried out around these figures and the short-term bids have not been included at this stage. However, **the estimated total net financial benefit for Halton BC is around £9.9m per annum on a Supporting People spend of £6.6m.**

The model is based around the principle of estimating the costs that would be incurred if the preventative support services funded by SP were not available to each of the different client groups. The model currently has assumed costs for services such as residential care, housing, health services and those associated with crime.

Examples of the types of financial benefits for this particular client group are reductions in:
- costs for residential care,
- health service costs,
- costs associated with tenancy failure.

In addition to the financial benefits there are other uncosted benefits achieved by SP services. These include:
- improved quality of life including greater independence,
- improved health,
- reduced burden of care for carers,
- decreased fear of crime,
- increased participation in the community and decreased isolation.

For older people the estimated net financial benefits from the SP programme in Halton is **£3.9m**.

4. Outcomes
The Centre for Housing Research (CHR) collates outcome data, submitted by providers, for all service users in Halton Supporting People services.

4a. Long Term Outcomes Framework
Information collected for Older Peoples services is taken from a 10% sample, which is submitted throughout the year. Halton Supporting People (SP) has received outcomes data for service users residing in SP funded services between April 2008 & March 2009 from Centre for Housing Research (CHR), these outcomes are listed in section **4b**.

4b.
The Outcomes framework is broken down into five high-level outcome domains:
- Achieve economic wellbeing
- Enjoy and achieve
- Be healthy
- Stay safe
- Make a positive contribution

Sustained economic wellbeing	Number of Clients
Have maximised income – includes collecting correct welfare benefits	10
Have managed debt – have reduced their overall debt	1

Supported Enjoy and Achieve	Number of Clients
Have been able to take part in Leisure / Cultural / Faith/Information or Learning activities	8
Have accessed external services	6
Have maintained access to groups / family and friends	7

Supported to Be Healthy	Number of Clients
Have been supported to manage physical health	11
Have been supported to manage mental health	4
Have been supported to manage substance misuse	1

Supported to stay safe	Number of Clients
Have been supported to maintain accommodation	5
Have been supported with self harm issues	1

Supported to make a positive contribution	Number of clients
Have been supported to have choice & control and sustain Involvement	6

Please note that an outcome is captured where a support need has been identified in the clients support plan. Therefore not all outcome domains will apply to all clients.

5. Performance Indicators

Key performance indicators for short and long-term services are now included within the health and wellbeing section of the new National Indicator Set (NIS).
Performance information for NI142 is collected quarterly from Service Providers using a Communities and Local Government (CLG) performance workbook.

5a. National Indicator Set – NI142

The performance indicator NI142 is used to measure longer-term services performance in providing support to service users to maintain their independence within SP services. The target for long-term Older Peoples services in 2008/09 was set to enable 98.7% of service users to 'maintain independence' therefore being able to stay in their own homes thus avoiding a move into institutional care. Supporting People services for Older People achieved 99.05% out performing the agreed target. This equates to 688 service users currently receiving support and 44 who have regained their independence and no longer need support.

5b. Throughput

The performance workbook also enables collection of information relating to how many people are using the service and how many no longer require support as they have established independence. The following table highlights how the service users have exited the service.

Completed support programme	To independent housing	To sheltered housing	To long-term supported housing	Died	To a long-stay hospital or hospice	To a care home	To a nursing care home	Unknown / lost contact
1	8	11	1	44	1	10	3	2

Throughput information 2008/09 shows that SP services to older people are enabling service users to maintain their independence. A positive outcome for older people services is the increase in the number of service users dying in there own home, in 2004/5 the number was twenty-eight increasing to forty-four in 2008/09.
In 2008/09 sixty-five service users maintained their independence with only sixteen having to seek alternative service types.

6. Client Record (Fair Access) Data

The Centre for Housing Research (CHR) collates client level data, submitted by providers, for all new service users joining a Halton SP service. The exceptions are sheltered housing schemes, Peripatetic Wardens, Home Improvement Agencies and Community Alarms.

6a. Primary Needs - New Clients – Floating Support Services

During 2008/09 Supporting People services across Halton provided support to clients from four floating support services. Eleven clients identified primary need was 'Older People with support needs'. Three clients reported primary need was for 'Older People with mental health problems' and a further two clients had a primary need of 'frail elderly'.

Seventy-nine clients from Halton's in-house older peoples service had a physical or sensory primary need with sixty-nine of these clients having a 'Frail Elderly' secondary need the remaining were Older People with support needs.

Primary Need		Secondary Need	
Older People with Support Needs	11	Not Available	
Older People with Mental Health Problems	3	Not Available	
Frail Elderly	2	Not Available	
Physical or Sensory Need	79	Frail Elderly	69

6b. Referral Source of New Clients – Floating Support Services

The main primary need referral routes reported on the client records for older people during 2008/09 were as follows:

- Community Mental Health Team
- LA Housing Department
- Nominations
- Social Services
- Voluntary Agencies

7. Quality Assessment Framework (QAF)

Supporting People services are required to self assess against a stringent quality assessment framework. In 2003/04 many of the services were performing at the lowest level within the framework, which is level D. Following reviews and continuous monitoring to date SP has supported Providers to raise the level of service quality and all are achieving at least level C, with two older people services reaching B in all areas of the framework.

The QAF has recently been changed to allow Providers to be more innovative in the way they show how they work with service users at levels A and B of the framework. The refreshed QAF now has a link to 'every child matters' and includes the once supplementary outcome 'service user involvement' as a core element of the framework. The new QAF was piloted by a group of Halton Providers on behalf of Communities and Local Government and is now being implemented throughout Halton from October 09.

Providers have been given specialist training for the refreshed QAF, the outcomes framework, client records and key performance indicators NI141 & NI142 during April to July of this year. This appears to have been quite productive in helping organisations form processes and data quality when collecting information and identifying areas of best practice.