

# Outcome Form for Long-Term Services (Wider Pilot – May- June 2007)

## Provider and Service Details

National Client Record Provider ID: \_\_\_\_\_ 5 digit ID allocated by CHR Client Record Office  
National Provider ID: \_\_\_\_\_ 8 digit ID allocated by CLG

## Name of the Service Provider

Organisation Name: \_\_\_\_\_ SP Administering Authority: \_\_\_\_\_

Service Name: \_\_\_\_\_ Is service jointly funded? (Yes / No)

SP Service ID: \_\_\_\_\_

Service Type: (choose one) Support Plan Refused: (Yes / No)

Supported housing	
Sheltered Housing	
Very Sheltered Housing	
Peripatetic Warden	
Supported Lodgings	
Adult Placement	
Almshouses	

What was the level of involvement of the client in deciding outcomes? – Please choose one:

Agreed as part of regular review of support plan	
Other	
Please Specify	

## Date of Completion

Date Form Completed: \_\_/\_\_/\_\_

## Client Characteristics

Client/Tenant Code: \_\_\_\_\_

Enter age, sex, economic status of the client.

	Age	Sex	Economic status
		M or F	See list below
Client			

Categories for Economic status:

Description	Code	Description	Code
Retired	5	Not seeking work	6
Full-time work (24 hrs or more/week)	1	Full-time student	7
Part-time work (less than 24 hrs/week)	2	Long-term sick/disabled	8
Govt training/New Deal	3	Other Adult	0
Job seeker	4		

**Ethnic origin of client** (as defined by client):

White: British		Black/Black British: Caribbean	
White: Irish		Black/Black British: African	
White: Other		Black/Black British: Other	
Mixed: White & Black Caribbean		Chinese/Other ethnic group: Chinese	
Mixed: White & Black African		Chinese/Other ethnic group: Other	
Mixed: White & Asian		Refused	
Mixed: Other			
Asian/Asian British: Indian			
Asian/Asian British: Pakistani			
Asian/Asian British: Bangladeshi			
Asian/Asian British: Other		<i>Note: categories from 2001 UK Census</i>	

**User-defined ethnic coding (optional)** \_\_\_\_\_

**What is the client's religion? (Please choose one - optional)**

None		Muslim	
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)		Sikh	
Buddhist		Any other religion	
Hindu		Refused	
Jewish		Not Known	

**Is the service user a disabled person? Yes/No**

Please state the nature of the disability (please tick all that apply)

Mobility	
Visual Impairment	
Hearing Impairment	
Progressive disability/ Chronic Illness (e.g. MS, Cancer)	
Mental Health	
Learning Disability	
Other	

If Other, please state the nature of service user's disability \_\_\_\_\_

Client group by which the client is defined:

	Primary	Secondary (choose up to three)		
		1	2	3
Older people with support needs				
Older people mental health				
Frail elderly				
Mental health problems				
Learning disabilities				
Physical or sensory disability				
Single homeless with support needs				
Alcohol problems				
Drug problems				
Offenders or at risk of offending				
Mentally disordered offenders				
Young people at risk				
Young people leaving care				
Women at risk of domestic violence				
People with HIV/AIDS				
Homeless families with support needs				
Refugees				
Teenage parents				
Rough sleeper				
Traveller				
Generic / Complex Needs				

Is the Client intending this service to provide a home for life? Yes/No

## Achieve Economic Wellbeing

**1a) Does the client need support in relation to maximising their income? Yes / No**

**If No, please go to the next question – question 1b)**

Actual outcome for the client - Is the client now maximising their income? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in keeping appointments with benefit agency			
○ Assessment of benefits or similar applications pending			
○ Did not qualify for welfare benefit or other monetary benefits after being assessed			
○ Barred from assessment due to client's own actions			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need - List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with benefit agencies			
○ Limited funds for benefits award within benefit agencies (limited discretionary funds)			
○ Problems as a result of rules relating to access to public funds (common in DV provision)			
○ Difficulties gaining access to information and advice concerning financial welfare because of a lack of external resources			
○ Financial support inaccessible to client group			
○ Client group denied access to mainstream financial services			

<input type="radio"/> Other			
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If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**1b) Does the client need support in relation to managing any debt? Yes / No**

**If No, please go to the next question – question 1c)**

Actual outcome for the client -Has the client reduced their overall debt? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in making or maintaining arrangements			
○ Awaiting acceptance of debt management arrangement			
○ Awaiting results of legal action			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local debt management services			
○ Local debt management services are limited or unavailable			
○ Long waiting lists for local debt management services			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

**1c) Does the client need support in relation to paid work? Yes / No**

**If No, please go to the next question – question 2a)**

Actual outcome for the client -Is the client now in paid work? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
<input type="radio"/> Failed to engage with or had difficulties engaging with support			
<input type="radio"/> Difficulties in time-keeping or organisational skills			
<input type="radio"/> Lack of experience/qualifications			
<input type="radio"/> Client was refused paid work			
<input type="radio"/> Client unable to continue paid work due to health problems			
<input type="radio"/> Client not yet ready to address			
<input type="radio"/> Client has complex needs			
<input type="radio"/> Client unable to work to due loss of benefits combined with increased service/rent charges			
Service unable to meet the support need – List of reasons to choose from:			
<input type="radio"/> Capacity problems			
<input type="radio"/> Staffing levels			
<input type="radio"/> Lack of resources			
<input type="radio"/> Funding difficulties			
<input type="radio"/> Difficulties with support planning			
<input type="radio"/> Service restrictions			
Factors in the external environment - List of reasons to choose from:			
<input type="radio"/> Problems with local employment and/or careers services			
<input type="radio"/> Local employment or career services are limited or unavailable			
<input type="radio"/> Highly competitive local job market			
<input type="radio"/> Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

**2a) Does the client need support in relation to training and/or education? Yes / No**

**If No, please go to the next question – question 2b)**

(i) Actual outcome for the client - Has the client participated in their desired training/education? Yes / No

If Yes, does the client need ongoing support with this? Yes/No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in time-keeping or organisational skills			
○ Lack of experience/qualifications			
○ Client was refused course placement			
○ Client unable to continue training/education due to health problems			
○ Client not yet ready to address			
○ Client had complex needs			
○ Client unable to undertake training/education due to loss of benefits combined with increased service/rent charges			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local training/education services			
○ Local training/education services are limited or unavailable			
○ Course of training/education has not started by the time of client departure			
○ Waiting list for chosen training/education			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_



(ii) Actual outcome for the client – If qualification (s) applicable, has the client achieved this? Yes / No  
 If Yes, does the client need ongoing support with this? Yes / No

**If Not Applicable, please go to question 2b)**

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed the assessment for this qualification			
○ Awaiting results			
○ Client unable to continue training/education due to health problems			
○ Client unable to undertake training/education to due to loss of benefits combined with increased service/rent charges			
○ Client not ready to fulfil course requirements for qualification			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Course is no longer running			
○ Problems with training/education services			
○ Local training/education services are limited or unavailable			
○ Course is still in progress			
○ Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**2b) Does the client need support in relation to leisure/cultural/faith and/or informal learning activities?  
Yes / No**

**If No, please go to the next question – question 2c)**

Actual outcome for the client - Has the client participated in their chosen activities? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
<input type="radio"/> Failed to engage with support			
<input type="radio"/> Difficulties in time-keeping or organisational skills			
<input type="radio"/> Lack of experience/qualifications			
<input type="radio"/> Client was refused entry			
<input type="radio"/> Client unable to continue activity due to health problems			
<input type="radio"/> Client not yet ready to address			
<input type="radio"/> Client has complex needs			
<input type="radio"/> Client had difficulties with social relations			
Service unable to meet the support need – List of reasons to choose from:			
<input type="radio"/> Capacity problems			
<input type="radio"/> Staffing levels			
<input type="radio"/> Lack of resources			
<input type="radio"/> Funding difficulties			
<input type="radio"/> Difficulties with support planning			
<input type="radio"/> Service restrictions			
Factors in the external environment - List of reasons to choose from:			
<input type="radio"/> Local facilities are limited or unavailable			
<input type="radio"/> Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**2c) Does the client need support in relation to a range of work-like activities, e.g. unpaid work/work experience/work-like experience Yes/No**

**If No, please go to the next question – question 2d)**

Actual outcome for the client - Has the client participated in their chosen work-like activities? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in time-keeping or organisational skills			
○ Lack of experience/qualifications			
○ Client was refused entry			
○ Client unable to continue activity due to health problems			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need - List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Local opportunities for work-like activities are limited or unavailable			
○ Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**2d) Does the client need support in relation to contact with external services/groups/friends/family? Yes / No**

**If No, please go to the next question – question 3a)**

Actual outcome for the client - Has the client made contact with external services/groups/friends/family?

Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in time-keeping or organisational skills			
○ Client was refused contact			
○ Client unable to continue contact due to personal difficulties			
○ Client not yet ready to address			
○ Client has complex needs			
○ Client relations deteriorated			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local mediation services or related services			
○ Friends/ family unwilling to have contact			
○ Local services are limited or unavailable			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

**3a) Does the client need support in relation to primary health care? Yes / No**

**If No, please go to the next question – question 3b)**

Actual Outcome for the Client: Is the client managing their physical health better? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in time-keeping or organisational skills			
○ Client awaiting assessment			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local primary health care services			
○ Local primary health care services are limited or unavailable			
○ Access to primary health care services limited due to funding pressures			
○ Long waiting lists			
○ Primary health care services unwilling to provide services to the client			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

**3b) Does the client need support in relation to mental health services? Yes / No**  
**If No, please go to the next question – question 3c)**

Actual Outcome for the Client: Is the client managing their mental health better? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
<input type="radio"/> Failed to engage with support			
<input type="radio"/> Difficulties in time-keeping or organisational skills			
<input type="radio"/> Client awaiting assessment			
<input type="radio"/> Client was refused access to mental health services			
<input type="radio"/> Client not yet ready to address			
<input type="radio"/> Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
<input type="radio"/> Capacity problems			
<input type="radio"/> Staffing levels			
<input type="radio"/> Lack of resources			
<input type="radio"/> Funding difficulties			
<input type="radio"/> Difficulties with support planning			
<input type="radio"/> Service restrictions			
Factors in the external environment - List of reasons to choose from:			
<input type="radio"/> Problems with local mental health services			
<input type="radio"/> Local mental health services are limited or unavailable			
<input type="radio"/> Access to local mental health services limited due to funding pressures			
<input type="radio"/> Long waiting lists			
<input type="radio"/> Mental health services unwilling to provide services to the client			
<input type="radio"/> Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**3c) Does the client need support in relation to drug and/or alcohol services? Yes / No**

**If No, please go to the next question – question 3d)**

If Yes, does the client need ongoing support with this Yes/ No

Actual Outcome for the Client: Is the client managing their drug/alcohol use better? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in time-keeping or organisational skills			
○ Client awaiting assessment			
○ Client was refused access to drug/alcohol services			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with drug/alcohol services			
○ Local drug/alcohol services are limited or unavailable			
○ Access to local drug/ alcohol services limited due to funding pressures			
○ Long waiting lists			
○ Primary health care services unwilling to provide services to client			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

**3d) Is assistive technology / aids and adaptations helping the client to maintain independence Yes/No**

**If No, please go to the next question – question 4a)**

Actual Outcome for the Client: Is the client now able to manage independent living better as a result of the assistive technology/aids and adaptations? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
<input type="radio"/> Client continues to experience mobility and/or related problems that should have been resolved as a result of assistive technology/aids and adaptations			
<input type="radio"/> Client unable to correctly use the assistive technology/aids and adaptations			
<input type="radio"/> Client awaiting assessment or is in the process of obtaining the assistive technology/aids and adaptations			
<input type="radio"/> Client was refused access to the assistive technology/aids and adaptations			
<input type="radio"/> Client was not eligible			
<input type="radio"/> Client not yet ready to address			
<input type="radio"/> Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
<input type="radio"/> Capacity problems			
<input type="radio"/> Staffing levels			
<input type="radio"/> Lack of resources			
<input type="radio"/> Funding difficulties			
<input type="radio"/> Difficulties with support planning			
<input type="radio"/> Service restrictions			
Factors in the external environment - List of reasons to choose from:			
<input type="radio"/> The assistive technology/aids and adaptations have made no difference			
<input type="radio"/> Inefficiencies or difficulties with providers of the assistive technology / aids and adaptations			
<input type="radio"/> The assistive technology/ aids and adaptations services are limited or unavailable			
<input type="radio"/> Funding difficulties within the assistive technology/ aids and adaptations services			
<input type="radio"/> Long waiting lists			



○ The assistive technology/ aids and adaptations services are unwilling to provide services to client			
○ Client did not obtain assistive technology/ aids and adaptations			
○ Client obtained inappropriate assistive technology/ aids and adaptations			
○ Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**4a) Does the client need support in connection with safeguard from harm (this would be harm to others and themselves and being harmed by others)? Yes/No**

**If No, please go to the next question – question 4b)**

(i)Actual Outcome for the Client: Is the client avoiding self harm? Yes / No / Not Applicable

If Not Applicable, please go to section (ii)

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Client awaiting assessment			
○ Client was refused support			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local specialist support services			
○ Local specialist support services are limited or unavailable			
○ Long waiting lists for specialist services			
○ Specialist support services are unwilling to provide services to client			
○ Problems resulting from previous experience/ risk of DV/ abuse			
○ Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

(ii)Actual Outcome for the Client: Is the client avoiding causing harm to others? Yes / No / Not Applicable

If Not Applicable, please go to section (iii)

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Client awaiting assessment			
○ Client was refused support			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local specialist support services			
○ Local specialist support services are limited or unavailable			
○ Long waiting lists for specialist services			
○ Specialist support services are unwilling to provide services to client			
○ Problems resulting from previous experience/ risk of DV/ abuse			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

(iii)Actual Outcome for the Client: Is the client avoiding harm caused by others Yes / No / Not Applicable

If Not Applicable, please go to question 4b

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Client awaiting assessment			
○ Client was refused support			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with local specialist support services			
○ Local specialist support services are limited or unavailable			
○ Long waiting lists for specialist services			
○ Specialist support services are unwilling to provide services to client			
○ Problems resulting from previous experience/ risk of DV/ abuse			
○ Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_

**4b) Does the client need support in relation to maintaining their accommodation? Yes / No**

**If No, please go to the next question – question 5)**

Actual Outcome for the Client: Has the client maintained their accommodation? Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
Factors to do with client – List of reasons to choose from:			
○ Failed to engage with support			
○ Difficulties in time-keeping or organisational skills			
○ Client awaiting assessment			
○ Client was refused access to housing management services			
○ Client not yet ready to address			
○ Client has complex needs			
Service unable to meet the support need – List of reasons to choose from:			
○ Capacity problems			
○ Staffing levels			
○ Lack of resources			
○ Funding difficulties			
○ Difficulties with support planning			
○ Service restrictions			
Factors in the external environment - List of reasons to choose from:			
○ Problems with housing management services/ landlord			
○ Housing management services/ landlord unwilling to support client to help them maintain their accommodation			
○ Other			

If you answered 'External: Other' in any of the above, please give details (free text box) \_\_\_\_\_

**Make a Positive Contribution**

**5 Does the client need support in having more involvement and/ or control? Yes / No**

Actual Outcome for the Client: Does the client have more involvement and/ or control?\_Yes / No

If Yes, does the client need ongoing support with this? Yes / No

If yes, was this more involvement and control at: Service level or within the Wider community?

Please give details (free text box) \_\_\_\_\_

If the outcome did not happen, please provide reasons:

	Main reason	Second reason (optional)	Third reason (optional)
<b>Factors to do with client – List of reasons to choose from:</b>			
<input type="radio"/> Failed to engage with support			
<input type="radio"/> Difficulties in time-keeping or organisational skills			
<input type="radio"/> Difficulties in identifying need			
<input type="radio"/> Client demonstrated inappropriate displays of involvement and control			
<input type="radio"/> Client was refused access to services/activities that afforded more involvement and control			
<input type="radio"/> Client not yet ready to address			
<input type="radio"/> Client has complex needs			
<b>Service unable to meet the support need – List of reasons to choose from:</b>			
<input type="radio"/> Capacity problems			
<input type="radio"/> Staffing levels			
<input type="radio"/> Lack of resources			
<input type="radio"/> Funding difficulties			
<input type="radio"/> Difficulties with support planning			
<input type="radio"/> Service restrictions			
<b>Factors in the external environment - List of reasons to choose from:</b>			
<input type="radio"/> Activities relating to increased involvement and control are limited or unavailable			
<input type="radio"/> Authority not able to provide individual budget			
<input type="radio"/> Other			

If you answered ‘External: Other’ in any of the above, please give details (free text box) \_\_\_\_\_