



# SP STRATEGIC REVIEW GUIDANCE FOR PROVIDERS

## **Introduction**

This Strategic Review Guidance for Providers in Merton sets out the key requirements under the Supporting People (SP) programme to be met by each service.

An Administering Authority's SP Team must assess both whether a service is strategically relevant and whether there is a demand for it. In this respect, the Merton SP Team will gather evidence in order to assess whether a service complies with the above-mentioned requirements. Whilst the Strategic Review is a discreet exercise it also informs the broader **Service Review**.

Each criterion (discussed below) under the Strategic Review will be assessed; in every case the Merton SP Team will decide whether the service: -

- complies;
- complies subject to an action plan;
- does not comply;
- should be investigated further because more evidence is required.

The Merton SP team will make objective judgements based on the available evidence and document these on a **Strategic Review Assessment Form**.

A questionnaire with step-by-step guidance notes has been developed for Merton Providers. Once completed and returned, the document will inform the SP Team's assessments of relevance and demand. Providers should read the following before completing the form: -

## **(i) STRATEGIC RELEVANCE**

### **1 The Service Meets Key Strategic SP Objectives.**

#### **1.1 The service contributes to meeting the priorities identified in the local SP strategy**

Merton's SP Strategy document<sup>1</sup> sets out the key objectives of the programme in the borough, taking into account the wider government agenda. Services will need to reflect the priorities identified in the strategy.

A key element of the Merton SP Strategy is the Cross Authority Statement reflected at paragraph 6.2 et seq of the document mentioned above. Consequently, it will be necessary to assess the extent to which a service also meets the cross authority needs contained within that statement. (Some SP services will contribute to the statement more than others eg, a sheltered housing scheme is unlikely to accommodate referrals from outside the host authority.)

#### ***The Merton SP Team's Assessment***

*Where the service does not meet the priorities outlined in the local SP strategy, consideration will be given to changing or remodelling the service.*

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<sup>1</sup> [Merton Supporting People Strategy 2005 - 2010](#)

**1.2 The service contributes to the wider government agenda for preventative services (eg, the service prevents service users from institutional care, homelessness, re-offending &c.)**

The service must contribute to the wider government agenda on preventative services. The service will also be assessed against appropriate local strategies: -

- Crime reduction strategy
- Homelessness Strategy
- Drug and Alcohol Strategy
- Strategy for Older People
- Strategy for Mental Health
- Domestic Violence Strategy
- Valuing People Strategy

The service statement should provide some evidence of the purpose of the service and whether it looks to meet the broader preventative strategies.

Referral data from the SP client record form can indicate whether the service is meeting priorities within such strategies (eg, clients who have been referred by Probation, or a Youth Offending Team, may indicate that the service is contributing to the crime reduction strategy).

The following example shows how evidence can be analysed by the SP team to assess whether a service is strategically relevant to *crime reduction*. A similar format can be used for other strategies.

Area	Examples of evidence
MAPP (Multi Agency Public Protection) arrangements	<ul style="list-style-type: none"> <li>• How many service users have been assessed under MAPP?</li> <li>• The service works in partnership with MAPP for duration of service involvement</li> </ul>
Youth Offending Team (YOT)	<ul style="list-style-type: none"> <li>• How many service users have been referred by YOTs (SP client record system)?</li> <li>• The service provides programmes for young people aimed at behaviour and attitudinal change on offending</li> </ul>
Probation/Prison Service	<ul style="list-style-type: none"> <li>• How many service users have been referred by these agencies</li> </ul>
Mentally Disordered Offenders (MDOs)	<ul style="list-style-type: none"> <li>• The service accepts referrals of MDOs or offenders with mental health problems</li> <li>• The service works with mental health services and criminal justice agencies to ensure agreed resettlement plan</li> </ul>
Prison Resettlement	<ul style="list-style-type: none"> <li>• Accepts referral of people in prisons or who have recently been released (SP client record form)</li> <li>• Work with specialist prison assessment and advice services</li> </ul>

Performance data on service outcomes will also indicate to the SP Team whether a service contributes to the preventative agenda (Key Performance Indicators 1 or 2 as appropriate) .

The Merton SP Team's Assessment

*The service aims and objectives, and the evidence to support whether these have been achieved, will be assessed to evaluate the extent to which the service contributes to achieving each strategy. The service should contribute to achieving at least one of the key preventative strategies. In some cases the service will address the priorities within more than one strategy.*

## **2 The Service Provides Housing Related Support Services.**

### **2.1 The service is provided to develop or sustain an individual's capacity to live independently in the accommodation or gain access to appropriate accommodation**

Service statement

A service statement is a statement of the aims and objectives of a service. The service statement should describe the primary purpose of the service as well as the types of services provided.

The service may provide care as well as housing related support. However the primary purpose of the service should relate to developing an individual's capacity to live independently in the accommodation or gaining access to appropriate accommodation.

Evidence of service outcomes

In the first instance, the SP team will analyse the Performance Indicator returns for the service being reviewed and so assess whether service users are, for example, achieving greater independence.

Other measures of outcomes could include management information showing the proportion of individual support plan objectives being achieved by service users.

Short-term services

When assessing the proportion of service users who have completed a planned move, the SP team will take account of the type of service provided (eg, whilst a Direct Access Hostel may have a low percentage of planned moves, there could still be indications that the service was helping service users gain access to appropriate accommodation).

Long-term services

The SP team will examine performance data to determine what happens to service users at the point when they ceased to use to service (eg, a high proportion of service users moving from sheltered housing to residential etc care might indicate that a service was not maximising the capacity of individuals to live independently).

The Merton SP Team's Assessment

The SP team will determine whether the primary purpose of the service meets this requirement based on evidence from the service statement and evidence concerning service outcomes.

**2.2 The service does not include the provision of general health and social care services or statutory personal care funded through SP grant**

Personal care

Personal care is defined as assisting people with bodily functions (this form of care is frequently provided in registered care etc homes or by domiciliary care services). Where these services are provided they must be funded from a source other than SP grant.

General social care

General social care services are intended to help people with their day-to-day lives. The provision of such care is not primarily intended to allow people to gain access to accommodation, or to maintain their accommodation. Where these services are provided they must be funded from another source.

In some cases the distinction between a housing related support service and a general social care service is not clear-cut. In assessing whether an activity is housing related support or social care it will be necessary to ask whether the service is intended to develop or sustain an individual's capacity to live independently or to help gain access to appropriate accommodation, eg: -

*A housing related support service may involve accompanying service users on initial visits (e.g. to hospital), with subsequent visits undertaken independently. In contrast, a social care service will involve routinely accompanying service users on such visits.*

In assessing whether social care services are being provided the following question should be asked, "*Does the person need this support whatever their housing circumstances?*"

Other services

Other services ineligible for SP grant may be provided, eg, housing management, training or education services. These also need to be identified by the service provider on the questionnaire.

Staffing input

The SP team will analyse Performance data on staffing levels in order to see, typically, how staff time is spent. Comparison with similar services, both in Merton and the neighbouring South West London boroughs, will indicate whether levels seem reasonable for the service actually being provided.

The number of hours attributable to each service user per week can also indicate whether the level of support being provided is reasonable (eg, a mental health

floating support service providing 20 hours support per service user per week might indicate that care is being provided).

#### Ancillary services

SP grant conditions allow for the payment of SP grant in respect of “occasional welfare services”. This provides for services that may be needed from time to time and which are ancillary to the main package of housing related support (eg, the provision of childcare in a women’s refuge which enables a service user to seek new accommodation).

Any ancillary services provided should be recorded on the questionnaire along with the number of hours involved (this may need to be averaged over a period of time). If the number of ancillary hours forms a high proportion of the total hours, this might indicate such services as being other than ancillary.

#### The Merton SP Team’s Assessment

*The SP team will identify whether services other than housing related support are provided and, if so, whether they are funded from another source. Where such other services are funded from another source then the service being reviewed will probably comply with this requirement.*

### **2.3 The support service does not include the provision of specialist counselling funded through SP grant**

Specialist counselling services are not eligible for SP grant (eg, counselling that is part of a drug or alcohol rehabilitation project delivered by therapeutic specialists).

#### The Merton SP Team’s Assessment

*The service statement may, for example, indicate that specialist-counselling services are provided. Where such evidence exists, the SP Team must satisfy itself that the cost of specialist counselling is not being met from SP grant.*

### **2.4 The service is provided to vulnerable people who require support**

#### Client group

The support service should be provided to one or more of the client groups defined by the SP programme (note: the SP client record system will collect client group data on new service users). Client data should indicate that the service is largely meeting the needs for which it has been commissioned.

#### Support needs

The provider should confirm whether the service operates a needs (& risk) assessment and support planning process.

#### The Merton SP Team’s Assessment

*The SP team will confirm whether the service continues to meet the needs for which it was originally commissioned. The Quality Assessment Framework (QAF) self-assessment carried out by the provider will indicate the existence of needs etc and support planning processes.*

### 3 The Service is Not Intended to Meet a Statutory Duty

#### 3.1 The support service should not be used to discharge statutory duties under Community Care legislation

Service users who are under the *Care Management Framework* are eligible for SP services, provided that the former are not used to discharge a statutory duty under community care legislation. Data concerning new service users, accepted under the care management framework, can be gleaned from the SP client record data.

*The Merton SP Team's Assessment*

*The SP team will determine what services are being provided or commissioned by the relevant authority in fulfilment of its duty under Community Care legislation. It should be noted authorities can use a community care budget to commission support providers to deliver social care services (ie to meet a statutory duty).*

#### 3.2 The support service should not be used to discharge statutory duties in relation to after-care services as a result of hospital discharge

**Section 117** of the Mental Health Act 1983 imposes statutory duties on social services **and** health authorities to provide after care services to people who have been discharged from hospital. Whilst such people are not denied services funded under the SP programme, authorities cannot use SP services to discharge their statutory duty to provide after care services under this Act.

By way of example, a person discharged from hospital can receive a SP floating support service, to help establish independent living, as well as regular after care visits from a Community Psychiatric Nurse (the latter so fulfilling the statutory duty to provide after-care services).

**The Care Programme Approach (CPA)** provides a *Care Management Framework* for those who are under the care of specialist psychiatric services, including those discharged from hospital. SP services must not be used to discharge statutory duties under the CPA.

The SP client record system provides data on the number of service users subject to the CPA. Some service users who are subject to a CPA will be also be discharged under Section 117.

*The Merton SP Team's Assessment*

*The SP team will determine the numbers of service users who have been discharged under Section 117 and those under the Care Programme Approach, together with the types of services they receive. (The existence of only SP services would indicate that authorities were not meeting their a statutory duties.)*

## 4. SP Grant Only Funds Housing Related Support Activities

### 4.1 SP grant should not fund general social care or health services

There are a number of sources of funding for general social care and health services. These include the following:

**Section 28 of the NHS Act 1977** mainly funds long-term social care or nursing services to people who are discharged from long stay hospital. This funding has mainly been used to re-provide services in the community for people with learning disabilities and people with mental health problems. The funding is also intended to provide services to those who may otherwise have entered long stay hospital (i.e. the successors of the discharged patients). The funding is available for housing associations and voluntary organisations.

**Section 64 of the Health Services and Public Health Act 1968** funds grants to voluntary organisations (including housing associations) whose activities consist of the provision, promotion or publicising of a relevant service. For the purposes of this section 'relevant service' is defined as a service which must be, or may be, provided by the Secretary of State for Health or a local authority by virtue of a relevant enactment (a list of health related Acts including the **NHS Act 1977**).

**Transferred Section 28a funding** involves a health authority (or Primary Care Trust) transferring funding to a social services authority under a Section 28a agreement.

**Social Services Community Care Funding.** Social Services authorities have powers under the **NHS and Community Care Act 1990** to fund community care provision including domiciliary care and residential care. This funding relates to a Social Services authority's statutory responsibilities for funding services to meet assessed needs.

**Social Services Grant Aid** can be provided by social services authorities to voluntary organisations. The funding is usually provided under **Section 65 of the Health Services and Public Health Act 1968** for a relevant (social care) service.

**Other funding.** Social services authorities can use other funding powers to provide grant funding to voluntary organisations.

#### De-registered Homes

Where a service has been deregistered, under the Registered Homes Act 1984 or the Care Standards Act 2000, it should continue to receive social care or health funding where general social care or health services are provided. Although SP grant can meet the costs of housing related support it should not fund general social care or health services.

#### The Merton SP Team's Assessment

*The replacement of social care or health etc funding by Transitional Housing Benefit/SP Grant could indicate that the latter is meeting the cost of general social care or health services. Where services ineligible for SP are provided, the cost of these must be met from other sources of funding.*

#### **4.2 The level of SP grant should reflect the level of housing related support provided.**

The provider will be required to complete Merton's *Value for Money* workbook. The SP Team will analyse the information submitted and compare costs against similar services both in and outside the borough.

*The Merton SP Team's Assessment*

*The team will determine whether the level of SP grant being paid is reasonable for the type of service provided. SP Contracts will need to be varied where an adjustment in grant is necessary.*

## **(ii) DEMAND**

### **5. The Service Meets a Demand for Housing Related Support**

#### **5.1 There is evidence of demand for the service type in respect of the target client group.**

In the context of the target client group, the purpose here is to determine whether there is a need for the type of service being delivered. The SP Team will be looking for evidence which demonstrates there are sufficient numbers of service users to justify the existing service model.

Effectively, the demand for a particular type of service will need to be compared against its supply.

Consideration will be given to broader demographic factors which can influence future demand for services (eg, population projections by age). Supply factors also need to be taken into account, such as the quality and location of services, together with the results of any research on the changing aspirations of service users (eg, older people staying longer in their own homes and moving into sheltered housing later in their lives).

*The Merton SP Team's Assessment*

*The SP Team will be looking at evidence from voluntary and statutory sources (including, where such exists, a Service Provider's own research) to confirm the level of demand for any given service type. This will embrace the analysis of other local research studies, demographic data, studies on changing aspirations and an understanding of the desirability of the services available.*

#### **5.2 There is evidence of demand for the service being reviewed**

The focus of this requirement is on the specific service being reviewed.

Whilst demand for services might be satisfied at a strategic level there may be factors which affect demand for a specific service (eg, a scheme which is located in a hard to reach area of the borough).

Waiting lists are a useful indicator of demand for a service, although not all providers maintain these.

The Merton SP Team's Assessment

*The SP team will scrutinise Performance Indicators for the service (via quarterly returns on PI Workbooks). Where evidence points to unacceptably low utilisation, the team will seek reasons as to why this might be so (factors could include poor accommodation standards, a restrictive allocations policy, a history of anti-social behaviour by service users etc).*

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General Note concerning 'Strategic Relevance and Demand'

*The Merton SP Team anticipates that many services will satisfy these requirements.*

*However, in some cases there may be persuasive evidence that a service does not satisfy all the requirements concerning strategic relevance and/or demand.*

*Examples could include: -*

- a service providing social and personal care, but not housing related support;*
- the level of SP grant is excessive when compared to the level of housing related support provided **and** the provider refuses to renegotiate the contract price;*
- there is over-provision of short/medium/long-stay services for the client group;*

*In such circumstances, the SP Team may recommend to the SP Commissioning Body that a service be decommissioned or remodelled.*