



## Notice of meeting of

### **Executive Members for Housing & Adult Social Services and Advisory Panel**

**To:** Councillors Hogg (Chair), Sue Galloway (Executive Member), Sunderland (Executive Member), Bowgett, Fraser, Horton, Taylor, Wiseman, Mrs Mildred Grundy (Co-opted Non-Statutory Member) and Ms Pat Holmes (Co-opted Non-Statutory Member)

**Date:** Monday, 10 December 2007

**Time:** 5.00 pm

**Venue:** Guildhall

## **AGENDA**

### **Notice to Members - Calling In:**

Members are reminded that, should they wish to call in any item on this agenda, notice must be given to Democracy Support Group by:

**10:00 am on Friday, 7 December 2007**, if an item is called in *before* a decision is taken, *or*

**4:00 pm on Wednesday, 12 December 2007**, if an item is called in *after* a decision has been taken.

Items called in will be considered by the Scrutiny Management Committee.

**1. Declarations of Interest**

At this point Members are asked to declare any personal or prejudicial interests they may have in the business on this agenda.

**2. Minutes (Pages 1 - 6)**

To approve and sign the minutes of the meeting held on 29 October 2007.

**3. Public Participation**

At this point in the meeting members of the public who have registered their wish to speak regarding an item on the agenda or an issue within the Panel's remit can do so. Anyone who wishes to register or requires further information is requested to contact the Democracy Officer on the contact details listed at the foot of this agenda. The deadline for registering is Friday, 7 December at 5:00 pm.

**BUSINESS FOR BOTH EXECUTIVE MEMBERS**

**ITEMS FOR DECISION**

**4. Housing and Adult Social Services 2007/08 Service Plans and Budget Second Monitor (Pages 7 - 42)**

This report advises of progress against the service plan targets for Housing and Adult Social Services and the projected financial outturns for 2007/8, based on second quarter results, and seeks approval for budget virements exceeding £100,000.

**5. Housing and Adult Social Services Capital Programme 2007/08 Monitor 2 (Pages 43 - 52)**

This report presents the second quarter review of the 2007/08 Housing and Social Services Capital Programmes and seeks approval for budget variations.

## **BUSINESS FOR THE EXECUTIVE MEMBER FOR HOUSING**

### **ITEMS FOR DECISION**

6. **York Strategic Housing Market Assessment 2007** (Pages 53 - 62)

This report outlines key findings of the York Strategic Housing Market Assessment and asks the Executive Member to consider and endorse the broad policy issues arising from these.

7. **Upgrade of Communal TV Aerials** (Pages 63 - 68)

This report outlines the options available to upgrade the communal aerials to blocks of flats in preparation for the switch over to a digital reception in 2011 and advises of the procurement process to appoint the contractor for the delivery of the digital infrastructure to tenants in blocks of flats.

## **BUSINESS FOR THE EXECUTIVE MEMBER FOR ADULT SOCIAL SERVICES**

### **ITEMS FOR DECISION**

8. **Petition Relating to the Closure of Yearsley Bridge Day Centre** (Pages 69 - 72)

This report advises of the petition received relating to the Yearsley Bridge Day Centre closure, provides an update of progress on the closure plan and asks the Executive Member to consider whether a formal response to the petition is needed.

### **ITEMS FOR INFORMATION**

9. **Changes to Continuing Care and Funded Nursing Care** (Pages 73 - 82)

This report asks the Executive Member to note a summary of the new national framework for Continuing Health Care and Funding Nursing Care, the potential impact of the changes on Adult Social Services and action being taken to address these issues.

*Note: Agendas 1-4 to the above item have been made available on-line only, as they are too large to print with the agenda. Hard copies can be obtained from Democratic Services, if required.*

**10. Annual Performance Assessment of Adult Social Services 2006/07** (Pages 83 - 102)

This report informs the Executive Member of the outcome of the annual performance rating by the Commission for Social Care Inspection (CSCI) of adult social services in York.

*Note: The above item was originally listed on the Forward Plan for the January meeting and has been brought forward to this meeting, under informal Urgency procedures, to enable progress to be made at an early stage in tackling areas identified for development by the Assessment.*

**11. Any other business which the Chair considers urgent under the Local Government Act 1972**

Democracy Officer:

Name: Tracy Wallis

Contact details:

- Telephone – (01904) 552062
- E-mail – [tracy.wallis@york.gov.uk](mailto:tracy.wallis@york.gov.uk)

For more information about any of the following please contact the Democracy Officer responsible for servicing this meeting:

- Registering to speak
- Business of the meeting
- Any special arrangements
- Copies of reports

Contact details are set out above.

## About City of York Council Meetings

### Would you like to speak at this meeting?

If you would, you will need to:

- register by contacting the Democracy Officer (whose name and contact details can be found on the agenda for the meeting) **no later than 5.00 pm** on the last working day before the meeting;
- ensure that what you want to say speak relates to an item of business on the agenda or an issue which the committee has power to consider (speak to the Democracy Officer for advice on this);
- find out about the rules for public speaking from the Democracy Officer.

**A leaflet on public participation is available on the Council's website or from Democratic Services by telephoning York (01904) 551088**

### Further information about what's being discussed at this meeting

All the reports which Members will be considering are available for viewing online on the Council's website. Alternatively, copies of individual reports or the full agenda are available from Democratic Services. Contact the Democracy Officer whose name and contact details are given on the agenda for the meeting. **Please note a small charge may be made for full copies of the agenda requested to cover administration costs.**

### Access Arrangements

We will make every effort to make the meeting accessible to you. The meeting will usually be held in a wheelchair accessible venue with an induction hearing loop. We can provide the agenda or reports in large print, electronically (computer disk or by email), in Braille or on audio tape. Some formats will take longer than others so please give as much notice as possible (at least 48 hours for Braille or audio tape).

If you have any further access requirements such as parking close-by or a sign language interpreter then please let us know. Contact the Democracy Officer whose name and contact details are given on the order of business for the meeting.

Every effort will also be made to make information available in another language, either by providing translated information or an interpreter providing sufficient advance notice is given. Telephone York (01904) 551550 for this service.

যদি যথেষ্ট আগে থেকে জানানো হয় তাহলে অন্য কোন অর্ধাতে তথ্য জানানোর জন্য সব ধরনের চেষ্টা করা হবে, এর জন্য দরকার হলে তথ্য অনুবাদ করে দেয়া হবে অথবা একজন দোঅবী সর্ববরাহ করা হবে। টেলিফোন নম্বর (01904) 551 550।

*Yeteri kadar önceden haber verilmesi koşuluyla, bilgilerin terümesini hazırlatmak ya da bir tercüman bulmak için mümkün olan herşey yapılacaktır. Tel: (01904) 551 550*

我們竭力使提供的資訊備有不同語言版本，在有充足時間提前通知的情況下會安排筆譯或口譯服務。電話 (01904) 551 550。

اگر مناسب وقت سے اطلاع دی جاتی ہے تو ہم معلومات کا ترجمہ مہیا کرنے کی پوری کوشش کریں گے۔ ٹیلی فون (01904) 551 550

*Informacja może być dostępna w tłumaczeniu, jeśli dostaniemy zapotrzebowanie z wystarczającym wyprzedzeniem. Tel: (01904) 551 550*

### **Holding the Executive to Account**

The majority of councillors are not appointed to the Executive (38 out of 47). Any 3 non-Executive councillors can 'call-in' an item of business from a published Executive (or Executive Member Advisory Panel (EMAP)) agenda. The Executive will still discuss the 'called in' business on the published date and will set out its views for consideration by a specially convened Scrutiny Management Committee (SMC). That SMC meeting will then make its recommendations to the next scheduled Executive meeting in the following week, where a final decision on the 'called-in' business will be made.

### **Scrutiny Committees**

The purpose of all scrutiny and ad-hoc scrutiny committees appointed by the Council is to:

- Monitor the performance and effectiveness of services;
- Review existing policies and assist in the development of new ones, as necessary; and
- Monitor best value continuous service improvement plans

### **Who Gets Agenda and Reports for our Meetings?**

- Councillors get copies of all agenda and reports for the committees to which they are appointed by the Council;
- Relevant Council Officers get copies of relevant agenda and reports for the committees which they report to;
- Public libraries get copies of **all** public agenda/reports.

City of York Council

Minutes

---

MEETING	EXECUTIVE MEMBERS FOR HOUSING & ADULT SOCIAL SERVICES AND ADVISORY PANEL
DATE	29 OCTOBER 2007
PRESENT	COUNCILLORS SUE GALLOWAY (EXECUTIVE MEMBER), SUNDERLAND (EXECUTIVE MEMBER), BOWGETT, FRASER, TAYLOR, WISEMAN AND KIRK (SUBSTITUTE)
APOLOGIES	COUNCILLORS HOGG AND HORTON

---

### 29. **Declarations of Interest**

Members were invited to declare, at this point in the meeting, any personal or prejudicial interests they might have in the business on the agenda.

Councillor Fraser declared a personal non-prejudicial interest in Agenda Item 5 (Challenges for the Future Delivery of Social Care for Older People) as he was a Member of the retired section of Unison.

### 30. **Minutes**

RESOLVED: That the minutes of the last meeting of the panel held on 10 September 2007 be approved and signed by the Chair and Executive Members as a correct record.

### 31. **Public Participation**

It was reported that a Unison representative spoke on Agenda Item 5 (Challenges for the Future Delivery of Social Care for Older People). The need for consultation was understood but members of Unison were more apprehensive after reading the report and its detailing of the future of the in-house service, There was a belief that City of York Council was moving towards privatising all care services rather than keeping them with the Council. The Unison representative said that the standard of in-house care was second to none and that high quality care was worth paying for, it was important not to lose sight of keeping quality at the top of the list.

### 32. **Parking Enforcement Pilot within Housing**

Consideration was given to a report that requested Member's approval to pilot the use of an independent parking enforcement contractor operating on designated sites of housing land.

Opportunist parking on sites of land owned by Housing Services, but not governed by highways enforcement, had, over recent years, become an

increasing concern, leading to problems for both tenants and garage renters.

Members felt that people were not renting garages due to the problems of accessing them. Officers were asked whether other areas could be included in the pilot scheme and they advised that being a pilot scheme they had tried to include a combination of sites to enable evaluation of the pilot scheme and its successfulness. Discussions were had regarding why there was not an option in the report to use the Council's own parking enforcement service team. Officers explained that as the sites where the garages were situated were not public highways the Council's parking enforcement team would not be able to issue civil penalties.

Members were presented with the following options:

**Option 1** Pilot a parking enforcement service provided by an independent contractor on specific designated sites and review the outcome after a period of 12 months.

**Option 2** Maintain the existing arrangements.

#### Advice of the Advisory Panel

That the Executive Member for Housing be advised to:

- Approve option 1, to pilot for a period of 18 months using an independent parking enforcement contractor operating on the sites shown in Annex 1 to the report.

#### Decision of the Executive Member for Housing

RESOLVED: That the advice of the Advisory Panel be accepted and endorsed.

REASON: To resolve problems and complaints from tenants and garage renters.

### **33. Challenges for the Future Delivery of Social Care for Older People**

Members considered a report that set out how York's expenditure on social care for older people compared to other similar councils, what we could predict would be the impact on adult social care in the next fifteen years and a summary of the approaches that could be made to these challenges. The report also sought Members' approval for consultation to take place with stakeholders on the responses that could be made.

Information from the York Long Term Commissioning Strategy for Older People (YLTCS) suggested that by 2020 there would be an increase in the over 65 population in York of 31% (from 30,500 in 2001 to 40,000 in 2020), and within this number, an increase in the over 85s of 60%, (from 3,700 to 6,000). It was noted that persons over the age of 85 would be more likely to need support from health and social care services. All the evidence,



locally and nationally, is that offering timely practical help, and encouraging health and well being, will keep people active and independent for longer.

Members discussed the report and suggested that there would be advances in medicine and technological advances such as telemedicine and smart flats, that would become cheaper and more available in future years.

Members discussed joint working with the Primary Care Trust (PCT) and felt that the more progress that was made with this the better, especially in terms of supporting people in their own homes.

Members also discussed the following points:

- The fact that it was less than a year since the service had been restructured.
- Pros and cons of private sector providers.
- New advances in technology (smart flats, telemedicine).
- The fact that technological advances such as telemedicine could not replace human interaction.
- The fact that the private sector were 'marching ahead' and many people were attracted by superior looking houses and services.
- The working age adult population, in proportion, will drop and there will be less people to work and financially support the elderly.
- The last few years of a person's life would be the ones where they would be likely to need the most intensive care

### Advice of the Advisory Panel

That the Executive Members for Adult Social Services be advised to:

1. Note the report
2. Approve the instigation of a wide consultation on the options covered in the report.

### Decision of the Executive Member for Adult Social Services

RESOLVED: That the advice of the Advisory Panel be accepted and endorsed.

REASON: Because it is necessary to consider all options for opportunities for savings and reinvestment in line with the Long Term Commissioning Strategy.

## **34. Progress on the Accommodation and Support and Long Term Commissioning Strategies for Older People**

Members considered a report that provided them with a range of initiatives which were in progress and which would help deliver the objectives of the Long Term Commissioning Strategy for Older People by developing

support and accommodation within the community, and by linking service developments more closely with the Primary Care Trust (PCT).

Work was in progress to agree joint priorities for action, based on shared objectives, which could be mapped from the Long Term Commissioning Strategy to the PCT's recovery plans and draft commissioning intentions.

These priorities are likely to link to the outcomes identified within the Long Term Commissioning Strategy to:

- Reshape dementia and older peoples' mental health service to ensure more support within the community.
- Reduce hospital admissions and admissions to residential and nursing care by making best use of intermediate, transitional, fast response re-abling and rehabilitation services.
- Use technology to support independence and improve risk management for customers and patients.
- Develop an integrated health and social care approach to helping patients and customers manage their long term conditions.
- Develop community based preventative services and carer support which will improve health and well being.

Joint project groups would be set up, with staff from both the PCT and the Council, and where appropriate the GP commissioning group, to develop and deliver specific changes and measurable outcomes.

Members were presented with the following options:

- Option 1** To agree in principle to the joint priorities and proposed joint arrangements to deliver these.
- Option 2** To delay agreement until full details for the projects and oversight of the projects have been scoped and terms of reference are available.

### Advice of the Advisory Panel

That the Executive Member for Adult Social Services be advised to:

- Approve Option one as set out in the report.

### Decision of the Executive Member for Adult Social Services

**RESOLVED:** That the advice of the Advisory Panel be accepted and endorsed.

**REASON:** To support the development of partnership working and enable progress to be made in the delivery of strategic objectives for older people's services, without additional delay.

**35. North Yorkshire and York Safeguarding Adults Partnership Board  
(former Adult Protection Committee) Annual Report**

Members considered an information report regarding the work of the Safeguarding Adults Board (which had superseded the Adult Protection Committee) for City of York and North Yorkshire.

There had been an increase in cases of abuse to adults reported to the Council in the past year and this may be due to an increase in awareness rather than an increase in the number of adults being abused. The number of investigated cases had risen from 58 in 2005/6 to 70 in 2006/7. The Director of Housing and Adult Social Services reported that public concerns had been raised by some serious cases relating to care homes in other parts of the country. The Association of Directors of Adult Social Services have suggested to the Government that the legal framework to protect adults needed to be strengthened.

Members discussed reasons why people did not report cases of abuse. For instance; the situation where a carer was causing the abuse. It was noted that in this situation a person may feel vulnerable and concerned about there being a detrimental effect on their future care if the carer were to be reported.

Advice of the Advisory Panel

That the Executive Members for Housing and Adult Social Services be advised to:

- Comment on the work of the Safeguarding adults Board and the issues highlighted in this report.

Decision of the Executive Members for Housing and Adult Social Services

RESOLVED: That the advice of the Advisory Panel be accepted and endorsed.

REASON: To improve the Council's response to vulnerable people affected by abuse.

CLLR SUE SUNDERLAND  
EXECUTIVE MEMBER FOR HOUSING

CLLR SUE GALLOWAY  
EXECUTIVE MEMBER FOR ADULT SOCIAL SERVICES

CLLR CHRIS HOGG  
Chair of Advisory Panel  
The meeting started at 5.00 pm and finished at 6.15 pm.



---

**Meeting of the Executive Members for Housing and Adult Social Services and Advisory Panel**

10<sup>th</sup> December 2007

Report of the Director of Housing and Adult Social Services

**2007/8 Service Plans and Budget 2<sup>nd</sup> Monitor report**

**Purpose of Report**

1. To advise the Executive Members of progress against the service plan targets for housing and adult social services and the projected financial outturns for 2007/8 based on second quarter results.

**Performance Overview**

2. This report gives an overall summary of performance with more detail for each service plan area set out in the annexes. These cover:
  - Housing Revenue Account (Landlord services)
  - Housing General Fund
  - Corporate Services
  - Older People and Physical Disability
  - Mental Health
  - Learning Disabilities
3. The annexes show progress in relation to the key objectives (Critical Success Factors) and the performance targets as well as a more detailed breakdown of expenditure. (Where performance figures are only available annually they are not shown in the quarterly updates.) Some of the highlights are set out below in this summary report.
4. There are some transitional issues associated with analysing adult social care data from the new Frameworki system that replaced ISIS after the first quarter. There has been a recent software upgrade and at the time of publication not all the data was validated and available. Consequently, for this monitor, a composite data set for adult social services has been produced rather than for each service plan (Annex 7). Similarly, we do not yet have a breakdown of the key human resources performance by service area so one departmental set of figures has been produced.
5. Performance on **Housing Landlord services** – there has been continued improvement on letting empty homes beyond the target for this year with the average now less than 20 days; average times to complete urgent and

non-urgent repairs have continued to reduce; we are on course to hit the target for rent recovery. The revised tenants' satisfaction survey is currently underway and interim results will be available in the New Year.

6. In relation to **Housing General Fund activities** – the development of 19 'eco excellent' homes is underway on 5<sup>th</sup> Avenue and Victoria Way; the development partner for the redevelopment of the 100 Discus Bungalows has been agreed (Tees Valley/York Housing Association/Southdale Homes) which will ultimately result in 60 new bungalows, 40 extra care sheltered homes, 49 other affordable homes and 49 homes for sale on the open market.
7. In terms of **Corporate Services** – there has been agreement to adopt the Health and Safety Executive's Stress Management Standards in our work on reducing staff absence; work on other issues has resulted in a significant overall reduction in sickness absence so far this year; agreement has been reached with North Yorkshire and York Primary Care Trust and the York Practice Based Commissioning Group on the shared priorities for joint working.
8. In terms of **Adult Social Services** – the number of 'reimbursable' days associated with delayed discharges from acute hospital beds (i.e. delays attributable to the council's responsibilities) have fallen since the first quarter; the transfer of home care customers in the West area to the fourth long term care provider (Riccall Care) was achieved within timescale; the second phase of the Mental Capacity Act changes have been implemented; numbers of wardens call customers are increasing significantly; work has begun with NYYPCT on an overarching mental health commissioning strategy; a positive inspection was carried out by the Health Care Commission of the Oak Rise Assessment and Treatment Centre for people with a learning disability; work continues on the development of personalised plans for all customers using Huntington Road and Yearsley Bridge day centres with feedback to customers and their families due to be completed in December.
9. There are concerns about some of the Quarter 2 performance indicators related to adult social services. The reduction in the number of people receiving direct support from the council has had an impact on the figures in the scorecard at Annex 7 and the proportion of intensive care related to the population as a whole. However, there is still some validation needed of the figures now loaded on to Frameworki and so the end of year position may be different.
10. The annual performance assessment of adult social care for 2006/7 was embargoed until 29<sup>th</sup> November and will therefore be reported formally to the January meeting. A verbal report on the star rating will be given at this meeting.

### **Financial overview**

11. **Housing Revenue Account** - The original 2007/08 budget reported to members on 11th December 2006 had a working balance of £5,453k. After a number of budget adjustments, including the allocation of recharges and insurances, the balance on the HRA is now estimated to be £5,641k. This

review indicates a net overspend of £64k which, together with the budgeted balance of £5,641k, now gives a total estimated balance on the HRA of £5,577k.

12. **Housing General Fund** - The original budget estimate for Housing General Fund approved by Members was £1,202k. After approval of savings and growth and other approvals including insurance and recharge adjustments, the approved Housing General Fund budget is now £1,302k. This review indicates a forecast underspend of £15k compared to the approved budget of £1.3m.
13. **Adult Social Services** - The original budget estimate for Adult Social Services approved by Members was £32.3m. After approval of savings and growth and other approvals including insurance and recharge adjustments, the approved budget is £34.2m. This review indicates an overspend of £262k compared to the approved budget of £34.2m, an increase of 0.8%.
14. **Growth and Savings** - As part of the budget process members agreed growth items across Housing & Adult Social Services of £1,720k. In order to balance the council's overall budget, savings of £1062k were also agreed. This review indicates that all growth and savings are currently on target with the exception of the savings in Learning Disability Services.
15. The Director has been given delegated authority to transfer available resources of up to £100k from one budget heading to another within the agreed delegation scheme. Individual budget holders use these virement rules so that any avoidable overspends can be met by identifying, or curtailing expenditure within other budget heads. Virements to report within this quarter are as follows:

	Description	Variation £'000
	Virements within HASS to reflect current spending pressures	-176
	• Corporate Services	+65
	• Housing	+91
	• Learning disabilities	-8
	• Mental health	+28
	• Older People & Physical Disabilities	

16. The first monitoring report presented to members on the 10<sup>th</sup> September 2007 reported a net general fund overspend of £173k. The overall departmental position is now a projected, net general fund overspend of £247k. The Departmental Management Team will be working to bring the overall General Fund expenditure back within budget by the end of the year – which should be achievable given the low percentage of overall spend that the projected overspend represents.

17. However, Members should note the continued pressures in Learning Disabilities due to the increase in both the number of customers (young people coming into adult services and older people living longer) and the complexity of their needs. This trend is set to continue for the foreseeable future and is a part of a national pattern (an 11% increase in the number of adults in England with a learning disability is expected in the period 2001 to 2021). Ways of accessing income from alternative sources, e.g. Independent Living Fund and NHS Continuing Care, are currently being used with some success by the learning disabilities team. However, it is very unlikely that this will bring the service back within its overall approved budget.
18. It is also worth noting that whilst the overall position is a significant improvement on the position in previous years, it is dependent on some areas under spending. Should these under spends not be achieved the departmental overspend could increase above the figures quoted here. The budgets will continue to be monitored closely to identify any problems at an early stage.
19. As part of the 2007/08 budget report a possible contingency item for £280k was identified in respect of the repayment of customer contributions towards health care costs. It was expected that the formal request for contingency would be included in this monitoring report however the final costs are not yet known. Once all the work has been completed on the assessment of individual customers the additional cost and contingency request will be reported to the Executive.

### **Consultation**

20. There has not been any specific consultation on this report but elements of the service plans will have been consulted upon.

### **Options**

21. Options are not part of this report which is intended to set out the summary position after the second quarter of 2007/8.

### **Corporate Priorities**

22. The service plan reflects many of the council objectives and priorities, and many of the actions related to council objectives and initiatives. Specific links can be made to the following:

#### **“Outward facing”**

- Improve the actual and perceived condition and appearance of city’s streets, housing estates and publicly accessible spaces
- Reduce the actual and perceived impact of violent, aggressive and nuisance behaviour on people in York
- Improve the life chances of the most disadvantaged and disaffected children, young people and families in the city



- Improve the quality and availability of decent affordable homes in the city
- Improve the health and lifestyles of the people who live in York, in particular among groups whose levels of health are the poorest.”

**“Improving our organisational effectiveness”**

- Improve our focus on the needs of customers and residents in designing and providing services
- Improve the way the Council and its partners work together to deliver better services for the people who live in York

## **Implications**

### **Financial**

23. These are set out in paragraphs 10 to 18 above. Financial regulations require a detailed explanation of any budget variation in excess of £50k and those above £10k where the variation is greater than 2% above the budget heading. A detailed financial analysis of each service plan is set out in the attached annexes to the report.

24. **Other Implications**

#### **Human Resources (HR)**

None arising specifically from this report.

#### **Equalities**

None arising specifically from this report.

#### **Legal**

There are no immediate implications to report.

#### **Crime and Disorder**

There are no immediate implications to report.

#### **Information Technology (IT)**

None arising specifically from this report.

#### **Property**

None arising specifically from this report.

#### **Other**

None

## **Risk Management**

25. This report focuses on high level issues that the Executive Members should be aware of and therefore does not analyse more detailed risks that would be dealt with through service planning.

## Recommendation

26. That the Executive Members

- note and comment on the content of this report and
- agree the virement between £100k and £250k outlined in paragraph 15.

Reason : So that the Executive Members are briefed on the projected performance and financial outturns for adult social services based on the second quarter of 2007/8.

**Author:**

Bill Hodson  
Director of Housing and Adult  
Social Services  
Tel. 554001.

**Chief Officer Responsible for the report:**

Bill Hodson  
Director

**Report Approved**

Bill Hodson  
Director

**Date** 14<sup>th</sup>November 2007

**Report Approved**

**Date** 14<sup>th</sup>November 2007

**Specialist Implications Officer(s)**

None

**Wards Affected:** *List wards or tick box to indicate all*

**All**

**For further information please contact the author of the report**

**Background Papers:** None

**Adults & LD Joint Service Plan for 2007/08**

<b>Measure</b>		<b>2006-07</b>	<b>Oct-07</b>
DP - LD 18-64	Direct Payment recipients	-	18
DP - MH 18-64	Direct Payment recipients	-	1
DP- PD 18-64	Direct Payment recipients	-	56
DP - All 65+	Direct Payment recipients	-	48
C51	Adults and older people receiving direct payments per 100,000	76.75	80.78
C29	Numbers of people (18-64) with physical/sensory impairments help to live at home per 1,000	4.58	4.07
C30	Adults with learning disabilities helped to live at home C30	2.23	2.66
C31	Number of people 18-64 with MH problems whom authority helps to live at home, per 1,000 adults	2.17	1.95
C32	Number of people aged 65+ whom authority helps to live at home, per 1,000 adults aged 65+	86.51	76.75
Sitrep	Local: reported numbers of delayed discharges which attract reimbursement (Not bed days)	-	1
BV53	Households receiving intensive home care per 1,000 pop 65+	9.29	7.41
C72	Older People aged 65 or over with supported admissions on a permanent basis in the year to residential or nursing care per 10,000 of the population aged 65	59	26.72 (Sept. YTD)
C73	18-64 PD with supported admissions on a permanent basis in the year to residential or nursing care per 10,000 of the population aged 65	1.33	0.50 (Sept. YTD)
BV56 Equip only	% items of equipment and adaptations delivered with 7 working days YTD	92.84	95.74%
<b>HASS Figures (Includes Housing) Performance Indicators</b>		<b>2006/07</b>	<b>Qtr 2 only 2007-08</b>
	<b>HR</b>		
HR - 1	Days Lost through Sickness	21.11	4.27
HR - 2	Days Lost for stress related illness	4.9	0.96
HR - 3a	Days Lost to Shorter term sickness	N/A	2.39
HR - 3b	Days Lost Long term Sickness	N/A	1.88
HR - 4	All staff Turnover	12.91%	4.52%

This page is intentionally left blank

---

## HRA Service Plan 2007/2008 - Monitor 2

### Analysis

#### Achievements since August 2007

1. Specific achievements during the period include:
    - The council Executive has approved the Discus Board recommendation for the partnership of Tees Valley / Southdale Homes and York Housing Association to be the developer partners. The site at St Anne's will be vacant and ready for redevelopment by the end of March 2008. Temporary moves are being organised for residents that wish to move back into a new bungalow and further consultation will be arranged for residents and the wider community in December.
    - The assessment of the impact of the 2006 changes to the Allocations Policy is underway however the recent submission for CLG funding to support a sub regional approach to Choice Based Lettings has impacted on the scope and timetable of this work.
    - Managers now booked on the 'Future Leadership ' programme which is specifically tailored for local government. Training Forum is now established and designing an induction programme for all new staff in Housing, also agreeing actions from Staff Conference feedback. *(this achievement relates to both HRA & Hsg general fund service plans)*.
    - All staff attended the annual Staff Conferences held in October and the results of the staff satisfaction survey were fed back to staff. Themes of the day were customer care and staff involvement in development and improvement of the service. *(this achievement relates to both HRA & Hsg general fund service plans)*.
    - Housing Improvement Plan has been reviewed and reported to HSMT in November. Monitoring system now in place mirrors the Housing Strategy and reported on an exceptions basis. *(this achievement relates to both HRA & Hsg general fund service plans)*.
    - A group has been established to develop a Value for Money (VFM) strategy. Work has started on a self assessment against the VFM Key Line of Enquiry, and a gap analysis of current practise. *(this achievement relates to both HRA & Hsg general fund service plans)*.
    - Work underway to develop a Training Plan for HASS including specific actions for housing. This is based on information from recent information from PDRs and skills – over 90% of PDR's have been completed across the service. *(this achievement relates to both HRA & Hsg general fund service plans)*.
-

- 
- HASS Project Management Toolkit has been launched in Strategy and Enabling and staff will review current projects in line with the principles of the tool kit. *(this achievement relates to both HRA & Hsg general fund service plans).*
  - Housing Services have recently accessed the Learning and Skills Council 'train to gain' funds to run Customer Service NVQ level 2. In cooperation with Yorkshire and Humberside Training based in York a pilot group of Customer Service assistants have been selected who are eligible for funding.
  - Income management team will be using mobile working technology with a view to a 3 month pilot mobile working for 3 months starting in December. Key success factors to be identified to enable the pilot to be evaluated.
  - The contract for the redevelopment of Peasholme has started on site and is due for completion in July 2008. A community liaison group is to be formed to facilitate community cohesion and support the success of the project.
  - Work started on self assessments against 2 further KLOEs – income management and tenancy services.
  - End to end review of the repairs review has been launched to all staff involved in the service. The project team has been involved in the 'check' process which is due to end in November. Next stage will be recommendation on what changes need to be implemented.

### **Critical Success Factors (CSFs)**

#### **Remain on Target to meet the Decent Homes Standard by 2010**

2. Remain on track to meet decent Homes by 2010 with an annual review of the business plan costs.

#### **Improved Performance across all landlord functions**

3. At the end of October BVPI 66a (rent collected as a % of the actual debt) was 93.44% which was comparable with last years performance of 92.80% and suggests that the target of 97.85% will be achieved.
  4. Void management has continued to show an improvement in performance with the cumulative void turn around time down from 25.06 days last year to 19.78 days at the end of September There are still some elements of the new voids process that need to be implemented and these are being considered by Housing and Neighbourhood Services.
  5. In the first half of 2007-8 to the end of September, 88.59% of urgent repairs were completed in government timescales, compared to 83.56% in 2006-7
-

### **Improve tenant satisfaction and opportunities for participation**

6. The Tenant Compact has been launched at the annual Federation event in October. This event was organised by the Federation which itself has been re launched following the recent capacity building work that has recently been completed
7. Customer Expert Panels are to be established to allow more focused work with customers on specific areas of the housing service. Funding has been identified for a post to support and coordinate the panels.

### **Sign up to the RESPECT standard for housing Management**

8. A gap analysis has been completed on the 6 commitments and work is starting around targeting estate improvement and using estate walk abouts to identify community priorities. The main gaps identified have been around a coordinated corporate approach and methods of consultation which are being considered by the ASB Steering group.

### **Roll out Customer Service and Working with Colleagues standards across housing, and embed in induction, training and monitoring**

9. Work continues on embedding the standards into the culture of the service with a review of standard letters and having a standardised approach to email. Approval has been given to appoint a post to work on the development of DMS.

### **Areas for Improvement**

10. Further work still needs to be carried out to ensure that the repairs partnership results in eradicating duplication within the service.

### **Financial Summary**

11. The table below sets out the variations in accordance with the financial regulations

	<b>Approved Budget £'000</b>	<b>Variation £'000</b>	<b>Variation %</b>
Repairs and Maintenance  Jobs General - high demand particularly in relation to plumbing and roofing work.	4,465	+186	+4.17

	Approved Budget £'000	Variation £'000	Variation %
General Management			
Housing Operations – savings mainly due to staff vacancies offset by use of temporary staff.	2,510	-60	-2.39
Asset Management-			
Discus Bungalows – project expenditure to be reimbursed from land sale receipt	545	+31	+5.69
Additional one off staffing costs		+13	+2.39
Caretaking – saving due to vacancies	204	-34	-16.67
Provision for Bad Debt – lower than forecast provision for rents bad debt, mainly for current tenant arrears, offset by increase in provision required for rechargeable repairs bad debt.	152	-47	-30.92
Housing Subsidy Payment – decrease in subsidy receivable due to lower than forecast interest rate and reduction in rental constraint allowance	5,354	+38	+0.71
- partly offset by reduction in loan interest payable	1,131	-10	-0.88
Fees and Charges			
Cooker rental – lower number of cookers rented than forecast	-111	+27	+24.32
Sheltered Housing – mainly due to lower contribution required from HRA for transitional SP customers	-456	-13	-2.85
Leaseholder Charges – higher than forecast rechargeable works	-87	-13	-14.94
Supporting People – reduction in income lower than forecast	-825	-60	-7.27



	<b>Approved Budget £'000</b>	<b>Variation £'000</b>	<b>Variation %</b>
<b>Other Minor Variations</b>	-18,523	+6	+0.03
<b>Net change in working balance</b>	<b>-5,641</b>	<b>+64</b>	<b>+1.13</b>
<b>Variation in Turnover</b>	<b>62,252</b>	<b>+229</b>	<b>+0.37</b>

## Balanced Scorecard

12. Performance indicators that are measured on an annual basis only have been excluded from the balanced scorecard in this first monitor but will be included in the outrun report.

## Customer Based Measures

Description	2006/7 Outturn	2007/8	
		Annual Target	Current Performance
Urgent repairs completed within Government timescales	83.56%	98%	88.59%
Average time taken to complete non-urgent repairs	9.68 days	8 days	8.76 days
% of external calls answered in 20 seconds	91.30%	95%	92.66%

## Process Based Measures\*

Description	2006/07 Outturn	2007/08	
		Annual Target	Current Performance
Average time taken to re-let local authority housing.	24 days	21 days	19.78 days
% of minor adaptations installed within 20 days of assessment	67.27% (4 months data)	To be set once a full year data available	82.27%
% of major adaptation completed with 60 days of assessment	7.14% (4 months data)	To be set once a full year data available	17.39%

(\*Local process measures are being developed by the Housing Services Management Team on gas servicing but quarterly data was not available in time for this report)

**Finance Based Measures**

---

<b>Description</b>	<b>2006/07 Outturn</b>	<b>2007/08</b>	
		<b>Annual Target</b>	<b>Current Performance</b>
Rent collected by the authority as a proportion of rents owed on Housing Revenue Account (HRA) dwellings	97.46%	97.86%	92.66%
Rent arrears as a proportion of the rent roll	2.59%	2.05%	3.61%
Rent lost through voids	1.04%	0.90%	0.56%

---

## **Housing General Fund 2007/2008 - Monitor 2**

### **Analysis**

#### **Achievements from August 2007**

1. Specific achievements during the period include:
  - A Sub Regional Loans Officer has been appointed to facilitate, market and promote the take up of Home Appreciation Loans across York and North Yorkshire.
  - The agreed percentage of affordable housing on the Terry's site has demonstrated that high levels of affordable housing can be provided on mixed use sites.
  - The development of affordable 'eco excellent' (eco homes very good standard) homes has started on 5<sup>th</sup> Avenue and Victoria Way. This will deliver 19 affordable homes.
  - Work underway to develop a Training Plan for HASS including specific actions for housing. This is based on information from recent information from PDRs and skills audit – over 90% of PDRs have been completed across the service.
  - The council Executive has approved the Discus Board recommendation for the partnership of Tees Valley / Southdale Homes and York Housing Association to be the developer partners. The site at St Anne's will be vacant and ready for redevelopment by the end of March 2008. Temporary moves are being organised for residents that wish to move back into a new bungalow and further consultation will be arranged for residents and the wider community in December.

### **Critical Success Factors (CSFs)**

#### **Successful development and completion of Peasholme and Arc Light Resettlement Projects**

2. The new Arc Light is due to be completed in April 2008 and is progressing well on site. The council has secured £3k worth of training through the Chartered Institute of Housing 'Leadership for Places of Change' programme funded from CLG as a result of our successful partnership approach to this project.
3. The contract for the redevelopment of Peasholme has started on site and is due for completion in July 2008. A community liaison group is to be formed to facilitate community cohesion and support the success of the project.

#### **Maximise affordable housing on planning gain sites (target 50%)**

4. Negotiations with developers regarding delivery of the 50% target, however there have been recent successes at negotiating a higher % than initial

financial appraisals indicated. Work continues assessing the impact of assess the impact of introducing social housing grant to increase both the numbers of homes and the quality

### **Respond to the findings of the Housing Market Assessment**

- 5 A report to the December EMAP details the findings and policy implications of the SHMA.

### **Identify resources, commission and analysis results of Private Sector Stock Condition Survey**

6. The survey work has been awarded to David Adamson Associates and will be delivered within budget. The final report is due March 2008 and will provide the evidence base for the Private Sector Renewal Strategy due for completion in June 2008.

### **Development of a new Homelessness Strategy**

7. Extensive consultation is ongoing with service users, staff and stakeholders. An Executive Steering Group has been established with representation from all the key areas of homelessness.

### **Areas for Improvement**

8. The 50% affordable housing target remains a challenge however it is essential that work continues to maximise all opportunities to meet this target.

### **Financial Summary**

10. The table below sets out the variations in accordance with the financial regulations.

		Budget £'000	Variance £'000	Variance %
a)	<u>Howe Hill Hostel</u>			
	Saving due to employee vacancies (-£27k) and lower repair costs (-£11k) offset by increased expenditure on utilities and equipment (+£13k)	285	-25	-8.77
	Higher occupancy than forecast(-£40k) and increased SP income (-£11k)	<u>-258</u> 27	<u>-51</u> -76	-19.77

		Budget £'000	Variance £'000	Variance %
b)	<u>Travellers Sites</u>  Mainly due to increased repair costs and reduction in supporting people grant.	-38	+56	+147.37
c)	<u>Other Minor Variations</u>	1,313	+5	+0.38
	Total Housing General Fund	1,302	-15	-1.15

### Balanced Scorecard

11. Performance indicators that are measured on an annual basis only have been excluded from the balanced scorecard in this first monitor but will be included in the outturn report.

### Customer Based Measures

Description	2006/07 Outturn	2007/08	
		Annual Target	Current Performance
% of customers satisfied with grants service	98%	95%	100%
% of service requests first response within 3 working days	99.9%	95%	99.7%
% of minor adaptations installed within 7 days from assessment BVPI	96%	96%	98.54%

### Process Based Measures

12. All Housing General Fund process based measure are reported on an annual basis.

### Finance Based Measures

Description	2006/07 Outturn	2007/08	
		Annual Target	Current Performance
Take up of Home Appreciation Loans	0	6	0 (but 2 in process)

This page is intentionally left blank

## HOUSING AND ADULT SOCIAL SERVICES SERVICE PLANS 2008 MONITOR 2 CORPORATE SERVICES

### 1 ACHIEVEMENTS

The following areas should be noted

- Established a 'General Framework for information sharing for York and North Yorkshire' in September 2007. Subsequent Information Sharing Agreements have been agreed for Community Equipment, and work is underway on Warden Call and Mental Health services to improve handling of customer information. Eight training sessions booked for staff on information sharing.
- Adopted the Health and Safety Executive's Stress Management standards in our programme of work to reduce the level of staff absence in HASS. A stress awareness week is due to be held on 19-26<sup>th</sup> November and a questionnaire issued to 800 staff. The Attendance Management Steering Group will then develop an action plan in response to the outcomes.
- Established a multi-agency steering group to lead a campaign on improving nutrition and hydration in care settings, supported by a programme of training and awareness raising.
- A consultation event was held on the 9<sup>th</sup> November to share a draft Physical Disability Strategy. The event was well attended and provided useful views and comments to be incorporated into the Strategy.

### 2 CRITICAL SUCCESS FACTORS (CSF)

The following are the CSF identified in the Service Plan together with a comment on their current position.

#### 2.1 Replacement of the Social Care Recording System

Work has continued to embed the first phase of Frameworki following its implementation in July 2007. A revised plan for Phase 2 of Frameworki has been agreed by its Board. Urgent work on developing the capability within Frameworki to deliver all the required performance information reports has been delayed by the time required to design the technical programmes involved. Some data will be available in December (probably too late for its this second quarter monitoring report) with all data expected to be available at the year end in March 2008.

#### 2.2 Improved partnerships with internal and external stakeholders

Significant progress has been made to reach agreement with the NYYPCT for a structure for Joint Commissioning and an agreed agenda that was approved

by members at the October EMAP meeting.

The shared priorities for joint working were also agreed with the York Practice Based Commissioning Group of GP's and these are as follows:

- Prevention/carer support
- Telecare/Telemedicine
- An Intermediate Care/Transitional Care/Fast Response Review
- Long Term Conditions
- Older Peoples Mental Health

Joint Working Groups are now being planned for the above.

### 2.3 Supporting People Programme (SP)

The refresh of the SP Strategy (2007/08) is out for consultation prior to it being considered at the December meeting of the SP Commissioning Body. A user group has been established and its representatives attend the SP Core Strategy Group.

The programme of reviews of service and the accreditation of new providers are both on schedule and links have been developed with the Council's procurement team to enhance the procurement knowledge and skills within the SP team.

### 2.4 Workforce Development

A dedicated focus on attendance management from within the Human Resources Team has supported operational managers to reduce the levels of long term absence, particularly in Adult services. Support to managers is underway in the implementation of the new Corporate Attendance at Work policies and procedures.

### 2.5 White Paper Implementation and Modernising Services

Members agreed at the October EMAP meeting to a period of consultation on the 'challenges for the future delivery of social care for older people'. Planning is underway for this major exercise and will contribute to the challenges ahead on how to configure our services and promote a prevention agenda to meet expected future demands. The outcomes of the consultation will be reported back to the March 2008 EMAP meeting.

## **3 AREAS FOR IMPROVEMENT**

The delay introducing a Workforce Development Plan is being addressed by re-prioritising some dedicated HR staff time to produce a draft plan to be considered at a February 2008 meeting of the Directorate Management Team.

A strong focus on reducing the levels of staff absence is now showing a consistent downward trend in levels of absence but we are entering the winter



months where a flu outbreak could jeopardise this improvement. Levels of short term absence have risen slightly when compared with the same period in 2006/07, and so this has become a target for action.

As reported earlier in the Annexe a key priority for improvement in the final two quarters of 2007/08 is the production of full performance information reports from the new Frameworki system.

#### **4 NEW EXTERNAL PRIORITIES OR DEMANDS**

The HASS Portfolio Board manages the competing demands for modernisation etc by reviewing the priorities for large projects and the allocation of capacity and resources. Corporate Services functions of Finance, HRr, Planning IT etc are crucial to the successful delivery of projects.

The proposed savings targets for 2008/09 will require a re-prioritising of the HASS portfolio of projects together with the requirements from Corporate Support Services.

New national procedures and guidance on the handling of complaints have required response from our complaints team in helping to shape the guidance via consultations and now producing new draft procedures currently being reviewed by Legal Services.

The proposed new national performance indicator set for social care is now published for consultation.

#### **5 SIGNIFICANT ORGANISATIONAL ISSUES**

The following issues have impacted on the achievement of the service plan:

Due to limited capacity we have been unable to draw together the individual services business continuity plans into an overall HASS Business Continuity Plan. Efforts are being made to re-prioritise existing capacity to address this work before the end of January 2008.

#### **6 PROSPECTS FOR THE NEXT PERIOD**

The consultation on “Challenges for the Future Delivery of Social Care for Older People” will require considerable time resources to ensure that we engage and involve all stakeholders in this exercise during January and February 2008.

Initial scoping work is underway with our Advice and Information Service, its stakeholders and the [easy@york](mailto:easy@york) team. Subject to the go ahead for Phase 2 of [easy@york](mailto:easy@york) this project will need to design a customer access model for each of the three main A & I service stakeholders, (housing, adults services and childrens services) to improve the current services and post 2010 within the new Hungate Customer Contact Centre.

## 7 Budget

The table below sets out the major variations

CORPORATE SERVICES	Budget £'000	Variation £'000	Variation %
IT team – staffing vacancies	372	-30	-8.1
Staff advertising – recruitment is lower than anticipated plus savings have been achieved by using alternative methods such as 'job fairs' at the job centre.	128	-58	-45.3
Other budgets	1744	0	0
<b>Total Corporate Services</b>	<b>2244</b>	<b>-88</b>	<b>-3.9</b>

### Corporate Services performance monitoring 2007/8

Customer based improvements	07/08 Q2	07/08 Q1	2006/7 outturn	2007/8 Target	2008/9 Target	2009/10 Target
All: % of visitors seen by an officers within 10 minutes	94.5%	96%	90%	92%	95%	95%
% of visitors referred to the correct officer within a further 10 minutes	96.9%	90.7%	90%	92%	95%	95%
(All) answer external calls in 20 seconds or less	97.5%	97.95	96.5%	97%	97%	97%
(All) respond to external emails and correspondence within 10 working days	99.3%	99.4%	96%	97%	97%	97%
(Complaints) Increased number of customer complaints dealt with within time <sup>1</sup>	79.7%	82	75%	93%	95%	95%
(SP) Service users who are supported to establish and maintain independent living	99.15	98.75	Average 98.8%	98%	98%	98%
(SP) Service users who have moved on in a planned way from temporary living arrangements	79.68	67.29	Average 72.8%	73%	75%	75%
Process Based improvements	07/08 year to date		06/07 outturn	2007/8 Target	2008/9 Target	2009/10 Target
(IT)System available to all existing users of ISIS	4 <sup>th</sup> July		On target for 30/6/07	2 July 07	-	-
(IT)Longer-term support arrangements for system in place	4 <sup>th</sup> July		On target for 30/6/07	2 July 07	-	-
Social care IT system rolled out to non ISIS users	Estate managers trained Sep				√	

	07					
Management information requirements form new systems reviewed and outputs adjusted	Reports mapping under way Oct 07				√	
Delivery of training sessions on Information Security	4 sessions planned Dec 07			8 sessions during the year		
<b>Staff based improvements</b>	<b>07/08 year to date</b>		<b>06/07 outturn</b>	<b>2007/8 Target</b>	<b>2008/9 Target</b>	<b>2009/10 Target</b>
Average staff sick days below Departmental and Council wide average (in days/FTE)	4.27 (HASS total) (+2.06 compared to corporate)	4.49	6.8	√	√	√
Level of turnover of staff is comparable to other similar authorities with a target over the next five years to achieve the level of best practice authorities	4.52 (HASS total)	4.21%	15.17%	10%		

This page is intentionally left blank

## Older People & Physical Disabilities

### Achievements

1. The following achievements should be noted.

- The new customer data information IT system (framework) and electronic social care record has been successfully introduced with significant commitment from all parties. The change is a major alteration in the working patterns for all care management and occupational therapy staff. It has meant the learning of new IT skills as well as the alteration in the way that the workflow is managed.
- Along with the new system the format used is that of the Single assessment. The links that are now made electronically between different parts of the social care system through a customer record have considerably improved communication at that level.
- The current stage in the development of the system does not allow for the production of management reports as yet and whilst it has been anticipated that the level of performance against key targets will have dropped since the first quarter, the figures are not yet available to confirm this. The drop has been anticipated because the new system inevitably slowed performance when being introduced and despite its benefits in providing a single data base, it does capture more information, takes longer to complete and will therefore have a negative impact on certain areas of performance. Some additional resource has been allocated to maintain performance and this has started to take effect although but it is proving to be more difficult than in previous times to recruit to short-term contracts and agency staff are being used. This provides less time for the activity given the additional costs.
- The average number of reimbursable hospital delays has dropped from the first quarter to the second quarter.
- The review of the York & Selby Carers Centre service is nearing completion led by City of York council in conjunction with the PCT and North Yorkshire Council. A revised service specification is currently being drawn up for consultation.
- The transfer of home care customers to a fourth long term locality home care provider in the West area was successfully achieved on time.
- There has been agreement with the PCT to work on five priority work-streams as indicated to Members in October.
- The Social Care Manager working with the Fast Response Team has now been appointed to lead this team and a replacement is being sought. The appointment of a Social care Manager to the Non-acute Rehabilitation Units run by the Hospital Trust has been well received and discharge delays from these units is starting to reduce.

- Work has started with the Care Services Efficiency Development to improve efficiency in some of the processes used for referral and assessment.
- Collaboration with the PCT has resulted in the production of a draft mental health strategy for older people.
- Work is underway within the CYC services to revise procedures & improve services in respect of:
  - End of life
  - Medication
  - Respite provision

### **Critical Success Factors (CSF)**

2. The following are the CSF identified in the service plan and a comment on their current position

#### ESCR- electronic record keeping

- 2.1 This has been introduced with the new data base system. All new documents are being scanned into the data base in order to develop electronic records. Over time historic records will be scanned and files removed from offices for archiving. This plan is on target. All care Management staff are now using the electronic system as their primary record for customers.

#### Planning for modernisation of Disability day services & development of strategy for Long-term conditions

- 2.2 The modernisation of day services continues through the planning to re-provide services from Huntington Road. Each customer of HRDC has now completed an individual session to identify the day activities they wish to pursue in future. Alongside this work is underway with the customer committee to identify the community resources in which these opportunities can be realised. Alternative locations for some specific services and resources are being located.

A consultation day to support the development of a strategy for the development of services for people with a physical disability or sensory impairment was held in November and further work on the strategy is planned in readiness for a document to be produced by the end of the financial year.

Work with primary care and Primary Care Trust colleagues has continued to improve the links required to support people with long-

term conditions. Staff from the organisations have attended a workshop held by the Care Services Improvement Partnership.

#### Development and implementation of first part of 3-year section of long-term commissioning plan.

2.3 An extensive consultation will be held to consider the options that the City should pursue for managing the additional demographic demands as the strategy is implemented.

2.4 The key components that the strategy has focused on to date are:

- i **accommodation & support planning**- a report on this was approved by the Executive Member in October. The emphasis on working with the PCT will help shape joint commissioning plans in this area.
- ii **prevention & diversion** from intensive support. A prevention strategy is currently being prepared and will be brought to Members at a later stage. This is also a priority area for working with the PC.
- iii **implementation of telecare**- The support technology, some equipment and procedures are now in place. A demonstration room has been set up in Haxby Hall and a public launch has been held. This was linked with an initiative organized through the Fall prevention strategy. There are currently 15 people in receipt of telecare.
- iv **support to carers** – the flexible carer support scheme continues to be highly successful in its appeal, ut there have been problems in the completion of the carer assessments required for people to get access to the funding. Work is underway to review the process and ensure adequate resources are available for the assessments.

#### Implementation of Mental Capacity Act

2.5 The second phase of the Mental Capacity Act has been implemented with the required changes in procedure & guidance for staff. A third component of the Act will be implemented in October next year when the amendments made through the Mental Health Amendment Act are implemented. These will relate to situations where the Mental capacity Act is to be applied to ensure an individual without capacity living in a care environment is not being deprived of their liberty. This may have an impact on the resources required to implement the Act.

## 4. Budget

The table below sets out the major variations

OLDER PEOPLE & PHYSICAL DISABILITIES	Budget £'000	Variation £'000	Variation %
Community Support – continued effect of overspend from previous years.	712	+301	+42.3
In House Home Care-continued underspend as some teams within the service have been unable to recruit to their full establishment.	4020	-332	-8.3
Direct Payments – customer base has remained at 06/07 levels. Virement has been done to bolster this budget but still small overspend.	<u>636</u>	<u>+75</u>	<u>+11.8</u>
	5368	+44	+0.8
Residential & nursing – projection based on current customer base remaining constant.	4170	-82	-2.0
Grant and contracted services under spends – Not all grants will be spent in their entirety and some small contracts have ceased.	543	-18	-3.3
Locality Social Care teams - use of agency staff in teams to assist as new electronic social care record system is implemented and deal with backlog of work.	1854	+74	+4.0
Intermediate Care Rapid response – saving due to renegotiation of the contract	62	-11	-17.7
Elderly Persons Homes –overspending on pay (£309k) due to levels of sickness plus continued pressure of staffing to minimum CSCI standards. This is offset by overachievement of income (£241k). An exercise has been undertaken to determine whether the existing budget is sufficient to be able to staff all homes at the appropriate CSCI levels. Income levels have risen due to more challenging needs of customers allowing CYC to take higher proportion of the attendant benefits.	2488	+68	+2.7
EPH repairs and maintenance – overspend representative of previous year's position and the effect of the Repairs partnership. Also some homes are having to upgrade outdated equipment (e.g. Oakhaven's alarm system, £15k).	92	+65	+70.7
Meals Service – additional one off staffing costs	6	+34	+566.7
Mobile Wardens and Warden Call – £40k staffing overspend and £20k equipment overspend more than offset by overachievement of income (£100k).	316	-40	-12.7
Yorkcraft – budget overall under spending due to combination of staffing vacancies (£34k), increased WORKSTEP income (£23k) and savings on materials (£11k)	470	-68	-14.5
Huntington Road day Centre (HRDC) – service due to stop in its current guise in May 2008 and any vacancies no longer being filled.	415	-20	-4.8



Transport – cost of maintaining the fleet has risen due to cost of new contract with ABRO plus previous years invoices being received belatedly and not reserved for. May be potential to claw back this overspend through a grant which allows organisations transporting certain social care customers to reclaim fuel duty paid (see below).	578	+45	+7.8
Other under spends reported on staffing and premise costs	942	-75	-8.0
Other budgets	3394	0	0
<b>Total Older people &amp; Physical Disabilities before action plan</b>	<b>20698</b>	<b>+16</b>	<b>+0.1</b>
Reclamation of Fuel duty paid backdated to April 2002		-44	
<b>Total Older people &amp; Physical Disabilities after action plan</b>		<b>-28</b>	<b>-0.1</b>

This page is intentionally left blank

## Mental Health

### Achievements

The following area should be noted.

- A draft overarching Mental Health strategy is now being completed. This will cover the whole of the NYYPCT area and will have specific area plans, one of which will be for the City of York and will be implemented through local joint commissioning and the local integrated mental health service.
- The Partnership arrangements and agreement are currently being revised with a view to completion early in the new Year.
- The new customer data information IT system (framework) and electronic social care record has been successfully introduced with significant commitment from all parties. The change is a major alteration in the working patterns for all care management and occupational therapy staff. It has meant the learning of new IT skills as well as the alteration in the way that the workflow is managed.
- The current stage in the development of the system does not allow for the production of management reports as yet and whilst it has been anticipated that the level of performance against key targets will have dropped since the first quarter, the figures are not yet available to confirm this.
- Budgets are currently on target for an underspend. However there remain risks in respect of increased Council contributions that may be required to support placements of people currently supported within one specific establishment.

### Critical Success Factors (CSF)

23. The following are the CSF identified in the service plan and a comment on their current position

#### ESCR- electronic record keeping

This has been introduced with the new data base system. All new documents are being scanned into the data base in order to develop electronic records. Over time historic records will be scanned and files removed from offices for archiving. This plan is on target. All care Management staff are now using the electronic system as their primary record for customers.

#### Development of Joint Health & Social care Mental Health Strategy

The Mental Health strategy that is being developed will reflect:

1. That there will be an agreed overarching Mental Health Commissioning Strategy in place with accompanying detail to reflect the separate needs of:
  - People of working age
  - Older people
  - The different localities within York/North Yorkshire
2. The current Partnership agreement involving all three parties in the commissioning and provision of services in York and Selby will be revised to reflect the required commissioning and integrated service plans across the whole NYYPCT area.
3. The work on these will be completed by 2008.

Improve staff retention and workforce planning in terms of Approved Social Workers (ASWs) and Approved Mental Health professionals (AMHPs) from 1 April 2008

- There has not been significant turnover of staff in this quarter.

Implementation of Mental Capacity Act

The second phase of the Mental Capacity Act has been implemented with the required changes in procedure & guidance for staff. A third component of the Act will be implemented in October next year when the amendments made through the Mental Health Amendment Act are implemented. These will relate to situations where the Mental capacity Act is to be applied to ensure an individual without capacity living in a care environment is not being deprived of their liberty. This may have an impact on the resources required to implement the Act.

A steering group chaired by the PCT but involving all key stakeholders including the acute hospital sector will be established to develop an ongoing training strategy that will reflect the differing needs of staff and oversee good practice with regards to the Acts implementation and performance management.

Prepare for the impending mental Health Act Amendment Bill

Guidance associated with the Bill has only recently started to be circulated. This will have significant implications for 2008 as the Bill is expected to be implemented from October 2008. There are clauses included in the Bill that cover the Deprivation of Liberty of people needing protection in Registered homes that will have significant implications when implemented.

A Local Implementation Group is to be established by the Primary Care Trust across the North Yorkshire and York area.

#### 4. Budget

The table below sets out the major variations

MENTAL HEALTH	Budget £'000	Variation £'000	Variation %
Community Support – continued overspend from previous years.	26	+34	+130.8
Residential & nursing – underspend based on current customer levels remaining constant.	1281	-165	-12.9
Social Work Team and Rehab and Recovery Team – posts still remain vacant as difficulty in recruiting staff within certain teams continues.	484	-39	-7.3
22 The Avenue – underspend due to staff vacancies	80	-25	-31.3
Other budgets	331	0	0
<b>Total Mental Health</b>	<b>2202</b>	<b>-195</b>	<b>-8.9</b>

This page is intentionally left blank

## **Learning Disabilities**

### **Achievements**

The following areas should be noted:

As part of the National Health Care Commission and CSCI joint report on failings in learning disability services (July 06, Cornwall Report) the Integrated Partnership received a visit to Oak Rise Assessment and Treatment Centre. This visit audited against the Commission's standards and found only very minor issues that needed addressing. These are all well underway. The positive report was a great credit to the staff working in this area.

We have recruited a Social Care Manager specifically to review and support carers of people with learning disabilities. This should help to improve the performance in the number of carers' assessments offered.

Work continues to progress on modernization of day services, particularly with the Yearsley Bridge Centre. Planning permission has now been given for the hydrotherapy pool which is a key reprovision priority for this programme. We have responded to the need of more flexible respite services by opening a day respite service at weekends as a small initial project; should this be successful we shall look to roll this out in the next financial year.

### **Critical Success Factors (CSF)**

#### The discharge of in-patients on the long-stay units in Health

The last phase of closure remains within the project planned time-scale and outcomes for those people to be discharged from NHS in-patient care by 2009/10.

#### To increase the number of people in work

This remains static at this time.

#### Increase the number of people using individualized budgets or direct payments

More people are using individualized budgets through the direct payment system.

#### Review and improve financial management information systems

Continued applications for the continuing health care income have again resulted in an extra £52,000 of money being brought back into the system.

#### Improve joint planning and working with key partners

Continued to forge strong links with the PCT new structure and have now a Liaison Manager for the Governance arrangements to the service (through the LD Management Board).

### Areas for Improvement

Reviews becoming more person centered.

Very positive meetings with stakeholders on person-centered reviews are continuing. Outcomes for a new way of working should be available in the new year.

### Budget

The table below sets out the major variations

LEARNING DISABILITIES	Budget £'000	Variation £'000	Variation %
Community Support – an increase in the number of customers with more complex care needs receiving intensive support in their own homes.	445	+526	+118.2
Residential & nursing – small overspend mainly due to a greater number of complex cases than anticipated and budgeted for.	4328	+32	+0.7
Direct Payments – overspend due to increased take up of direct payments above the level budgeted for.	140	+20	+14.3
Transportation of clients – continued overspend from previous year. Work is ongoing to bring the costs back within the approved budget.	122	+56	+45.9
Individual Day Services – due to a reduction in income received.	65	+15	+23.1
Other budgets	3936	0	0
<b>Total Learning Disabilities before Action plan</b>	<b>9036</b>	<b>+649</b>	<b>+7.2</b>
Secure additional Continuing Health Care funding for customers meeting the criteria		<b>-100</b>	
<b>Total Learning Disabilities after Action plan</b>	<b>9036</b>	<b>+549</b>	<b>+6.1</b>





---

## Meeting of the Executive Members for Housing and Adult Social Services and Advisory Panel

10<sup>th</sup> December 2007

Report of the Director of Housing and Adult Services

## Housing and Adult Social Services Capital Programme 2007/08 Monitor 2

### Summary

1. This report presents the second quarter review of the 2007/08 Housing and Social Services Capital Programmes and the resources available to support them. The report also recommends that the Executive Members approve the variations.

### Background

2. The approved Housing Capital Programme for 2007/08 is £9,453k with £4,656k funded through the MRA, the approved Social Services Capital Programme for 2007/08 is £646k of which £311k is funded from grant income to give a net programme of £335k. Annexes 1 and 2 set out the relevant detailed cost centres
3. Staff have reviewed the programme of investment projects during the first half of 2007/08 and the resources needed to fund them. Any minor variations have been agreed within delegated powers.

### Consultation

4. There has been no consultation carried out to produce this report.

### Options

5. As this report is for information, no options have been included.

### Analysis – Housing Capital Programme

6. **Modernisation of Local Authority Homes**, there have been minor variations resulting in an underspend of £18k, this is due to underspends of £13k on asbestos and £5k on demolition.

## 7. Table 1. Repairs to Local Authority Properties,

Scheme	Approved Budget 2007/08 £k	Revised Costs 2007/08 £k	(Under)/Overspend 2007/08 £k	Slippage into 2008/09 £k
Re roofing works	521	192	(329)	329
Installation and Replacement of Heating Systems	1,204	1,571	367	
<b>Total</b>	<b>1,725</b>	<b>1,763</b>	<b>38</b>	<b>329</b>

8. There is a major variation resulting in a projected increase in expenditure of £367k within the Installation and Replacement of Heating Systems project. This is resulting due to large numbers of predominantly old Back Boiler units failing their annual gas service. This issue has increased since first quarter review however the servicing project is now in the latter stages. These boilers are predominantly due for replacement within the current 4 year capital programme and hence this work is not additional to the programme but is simply being brought forward into a larger 2007/08 project. A number of additional operational processes have been brought into place to monitor and manage this process to its optimal minimum.
9. To fund this increase in heating costs it is recommended to reduce the roofing budget within 2007/08 to balance this years capital programme with a complimentary increase in the roofing project next year so that the 2 year roofing spend remains balanced. In practical terms as the roofing contract has not begun this will mean running it between January and June rather than January and March.
10. There is also a minor variation resulting in a reduction of projected expenditure of £51k, this is the affect of reductions of £15k on Structural Works and £38k on Communal Access Flooring and an increase Security Lighting of £2k.

## 11. Table 2 Assistance to Older and Disabled People,

Scheme	Approved Budget 2007/08 £k	Revised Costs 2007/08 £k	(Under)/Overspend 2007/08 £k
Discus Bungalows	120	10	(110)
<b>Total</b>	<b>120</b>	<b>10</b>	<b>(110)</b>

12. The Discus Bungalow budget was to provide disabled adaptations for those customers relocating permanently from the bungalows, less residents have

currently relocated than the budget provision predicted hence an underspend of £110k has arisen.

**13. Table 3. Miscellaneous,**

Scheme	Approved Budget 2007/08 £k	Revised Costs 2007/08 £k	(Under)/Overspend 2007/08 £k
Buy-Back Scheme	0	100	100
<b>Total</b>	<b>0</b>	<b>100</b>	<b>100</b>

14. There is a requirement for a new scheme in the 2007/08 Capital Programme, Barmby Close, a street in Clifton-Without has a number of properties on it where residents own their homes however legally the HRA has a buy-back scheme in place. It is understood this street came into CYC ownership from Ryedale Council under Local Government Reorganisation. A resident of Barmby Close has requested we buy-back this property (the clause is this is valued at Market value minus 30%) and hence CYC are legally obliged to do so.

15. Negotiations have been held with Yorkshire Housing who have agreed to purchase this property from us and manage it as social housing as they have done with a number of others on the street, therefore the recommendation is to sell the property and hence balance the costs within the year.

**16. Table 4. Modernisation of Local Authority Homes (MRA Scheme),**

Scheme	Approved Budget 2007/08 £k	Revised Costs 2007/08 £k	(Under)/Overspend 2007/08 £k
Tang Hall	2,070	2,211	141
Clifton	272	209	(63)
<b>Total</b>	<b>2,342</b>	<b>2,420</b>	<b>78</b>

17. The increase in the Tang Hall Tenants Choice scheme is mainly resulting from an increase in unit costs predominantly central heating over the scheme whilst the reduction in Clifton has been realised mainly due to a low uptake from residents choosing to have works undertaken.

18. There are also minor variations of reductions in Miscellaneous backfills by £17k and Nether Poppleton by £20k.

19. Members have been provided with updates on the Arclight redevelopment through the Capital Programme Monitor Reports. The project continues to progress well on site with a completion date of May 2008. Staff from Arc Light and council Resettlement Team are taking part in the Places of Change Leadership programme funded by CLG specifically for those partnerships with schemes which are part of the Hostel Capital Improvement Programme.

## **Analysis – Social Services Capital Programme**

20. The Social Services Capital Programme for 2007/08 stands at £646k of which £311k is funded from grant income to give a net programme of £335k including such programmes as the Community Equipment Loans Service, Disability Support Programme and improvements to a number of care homes. There are currently no variations in this budget.

### **Corporate Objectives**

21. The Capital Programme contributes to the Corporate Aims of meeting and exceeding the Government's Decent Homes Standard by 2010 as well as improving the health, well being and independence of York residents through grants, adaptations and independent living.

### **Implications**

#### **Financial**

22. The Approved Housing Capital Programme for 2007/08 is £9,453k. The outcome of the minor variations agreed within officers delegated authority and the variations outlined in the report result in a nil affect in position hence the Programme for 07/08 will stand at £9,453k with £4,697k funded through the MRA.

23. It was originally estimated that there would be 35 Right to Buy sales during the current financial year at an average sale price of £72k. To date there have been 19 sales at an average price of £96k. Whilst it is unlikely that 35 sales will be achieved, as the average price has increased the overall level of capital receipts should still be achievable.

**Human Resources (HR)** none

**Equalities** none

**Legal** none

**Crime and Disorder** none

**Information Technology (IT)** none

**Property** none

**Other** none

### **Risk Management**

24. This reports follows the due process and presents the current outturn position and does not request decisions from a number of options hence does not contain risk.

## Recommendations

25. To inform the Executive Members who are requested to note

- the progress on schemes
- approve variations in tables 1, 2, 3 and 4.
- note minor variations made under officers delegated authority.
- To agree to the Buy-Back and further disposal of 2 Barmby Close as recommended in paragraphs 13 to 15.
- Recommend the variation in table 1 to the Executive (all variations over £250k requiring Executive Approval)

## Contact Details

### Author:

Mark Grandfield  
Asset Manager  
Community Services  
01904 553733

### Chief Officer Responsible for the report:

Steve Waddington  
Head of Housing Services

Report Approved  Date 22/11/07  
Steve Waddington  
Head of Housing Services

Report Approved  Date 22/11/07

Wards Affected: *List wards or tick box to indicate all*

All

For further information please contact the author of the report

## Annexes

*Annex 1 – Housing Capital Programme 2007/08*

*Annex 2 – Social Services Capital Programme 2007/08.*

This page is intentionally left blank

**HOUSING CAPITAL PROGRAMME 2007/08 TO 2010/2011**

CAPITAL SCHEME DETAILS							TOTAL	PROFILED					LATEST	LATEST	LATEST	LATEST	
COST CENTRE	START YEAR	RO	TOTAL UNITS	IN YEAR UNITS	REVISED IN YEAR UNITS	TOTAL SCHEME COST £'000	EXP TO 31/03/07 £'000	EXPENDITURE 24/10/07 £'000	EXP TO 24/10/07 £'000	COMMITMENTS 24/10/07 £'000	TOTAL SPEND £'000	BAL OF ESTIMATE £'000	ESTIMATE 2007/2008 £'000	ESTIMATE 2008/2009 £'000	ESTIMATE 2009/2010 £'000	ESTIMATE 2010/2011 £'000	
<b>A MODERNISATION OF LOCAL AUTHORITY HOMES</b>																	
1 Safety and Security																	
a) Communal Entrance Security Doors	F777	04/05	MH	154	37		184	37	60	16	37	53	7	60	25	33	29 finished
b) Scooter Stores at Sheltered Schemes	F702	05/06	MH	3	3		123	15	47	4	10	14	94	108	0	0	0 No change req'd
c) Burglar Alarms	F704	05/06	MH	189	43		90	16	13	0	0	0	16	16	18	19	21 No change req'd
d) Window Replacement	F705	05/06	MH				94	72	6	1	21	22	0	22	0	0	0 finished
e) Sheds & Garages	F786	04/05	MH	183	42		125	17	24	25	0	25	0	25	23	27	33 finished
f) Asbestos	F735	06/07	MH				135	0	21	9	2	11	11	22	36	38	39 updated
g) Demolitions	F790	06/07	MH				19	14	6	5	0	5	0	5	0	0	0 finished
							<b>770</b>	<b>171</b>	<b>177</b>	<b>60</b>	<b>70</b>	<b>130</b>	<b>128</b>	<b>258</b>	<b>102</b>	<b>117</b>	<b>122</b>
<b>B REPAIRS TO LOCAL AUTHORITY PROPERTIES</b>																	
3 Re-roofing Works																	
4 Structural works	F701	07/08	MH	43	10		2,653	455	149	27	0	27	165	192	869	559	578 No change req'd
5 Installation and Replacement of Heating Systems	F772	RP	MH	1,947	444		260	0	38	0	0	0	50	50	67	71	72
6 Insulation	F734	07/08	MH	248	62		6,559	1,453	931	1,090	151	1,241	330	1,571	1,113	1,121	1,301 No change req'd
7 Communal Access Flooring	F782	04/05	MH	825	250		112	0	7	0	0	0	26	26	28	29	29 No change req'd
8 Internal Communal Security Lighting	F787	04/05	MH	828	250		419	67	86	38	24	62	0	62	98	81	111 finished
9 External Communal Areas	F727	06/07	MH				402	105	60	0	0	0	72	72	83	64	78 No change req'd
10 Stairlifts	F716	07/08	MH	11	5		216	49	34	35	0	35	5	40	46	38	43
11 Non trades feasibility	F739	07/08	MH	0			59	0	17	6	9	15	14	29	30	0	0 No change req'd
12 Re-rendering	TBA	09/10	MH	110	50		15	0	15	0	0	0	15	15	0	0	0 No change req'd
							480	0	0	0	0	0	0	0	0	214	266 No change req'd
							<b>11,175</b>	<b>2,129</b>	<b>1,337</b>	<b>1,196</b>	<b>184</b>	<b>1,380</b>	<b>677</b>	<b>2,057</b>	<b>2,334</b>	<b>2,177</b>	<b>2,478</b>
<b>C ASSISTANCE TO OLDER &amp; DISABLED PEOPLE</b>																	
13 Adaptations for the Disabled																	
Council Adaptions																	
Discus Bungalows	F760	RP	RA			550	1,250	240	140	67	54	121	139	260	250	250	250 No change req'd
14 Occupational Therapy Capitalised Salaries - Community Services	F761	06/07	RA				47	10	70	0	0	0	10	10	27	0	0 amended
	F736	RP	AT				369	73	41	36	0	36	35	71	73	75	77 No change req'd
							<b>1,666</b>	<b>323</b>	<b>251</b>	<b>103</b>	<b>54</b>	<b>157</b>	<b>184</b>	<b>341</b>	<b>350</b>	<b>325</b>	<b>327</b>
<b>D HOUSING GRANTS &amp; ASSOCIATED INVESTMENT</b>																	
15 Grants																	
a) Mandatory DFG	E702	RP	RA			110	3,080	652	258	312	186	498	115	613	605	605	605 No change req'd
b) York Repair Grant	E720	RP	RA			140	2,507	565	255	344	143	487	0	487	485	485	485 No change req'd
c) Landlords Housing Grant	E713	RP	RA			4	340	20	0	0	40	40	40	80	80	80	80 No change req'd
d) Decent Homes Grants	E707	04/05	RA			60	341	55	0	20	38	58	12	70	72	72	72 No change req'd
e) Capitalised Salaries - Community Services	E714	RP	RA				395	83	46	40	0	40	38	78	78	78	78 No change req'd
f) Energy Efficiency Grant	E701	06/07	RA			150	547	107	15	0	50	50	60	110	110	110	110 No change req'd
g) Security Grant	E712		RA			40	160	0	5	2	4	6	34	40	40	40	40 No change req'd
							<b>7,370</b>	<b>1,482</b>	<b>579</b>	<b>718</b>	<b>461</b>	<b>1,179</b>	<b>299</b>	<b>1,478</b>	<b>1,470</b>	<b>1,470</b>	<b>1,470</b>
<b>E MISCELLANEOUS</b>																	
16 Homeless Hostel	E730	04/05	TS				426	139	143	95	27	122	165	287	0	0	0 No change req'd
17 Travellers	E703	06/07	BW				402	205	197	74	0	74	123	197	0	0	0 No change req'd
18 Contribution to Affordable Housing	E733	07/08	DJ				38	0	0	0	0	0	38	38	0	0	0 No change req'd
19 Bungalow Buy Back	F710	07/08	MG				38	0	0	0	0	100	100	0	0	0	0 No change req'd
							<b>904</b>	<b>344</b>	<b>340</b>	<b>169</b>	<b>27</b>	<b>196</b>	<b>426</b>	<b>622</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>HOUSING CAPITAL PROGRAMME</b>							<b>21,885</b>	<b>4,449</b>	<b>2,684</b>	<b>2,246</b>	<b>796</b>	<b>3,042</b>	<b>1,714</b>	<b>4,756</b>	<b>4,256</b>	<b>4,089</b>	<b>4,397</b>
<b>MAJOR REPAIRS ALLOWANCE SCHEMES</b>																	

**HOUSING CAPITAL PROGRAMME 2007/08 TO 2010/2011**

	COST CENTRE	START YEAR	RO	TOTAL UNITS	IN YEAR UNITS	REVISED IN YEAR UNITS	TOTAL SCHEME	PROFILED EXP TO			COMMITMENTS 24/10/07 £'000	TOTAL SPEND £'000	BAL OF ESTIMATE £'000	LATEST ESTIMATE	LATEST ESTIMATE	LATEST ESTIMATE	LATEST ESTIMATE
							£'000	31/03/07 £'000	24/10/07 £'000	24/10/07 £'000				2007/2008 £'000	2008/2009 £'000	2009/2010 £'000	2010/2011 £'000
<b>A MODERNISATION OF LOCAL AUTHORITY HOMES</b>																	
<b>1 Tenants Choice Modernisation</b>																	
a) Miscellaneous Backfills	F700	RP	MH	500	125		4,939	156	664	315	5	320	802	1,122	1,179	1,220	1,262
b) Capitalised Salaries - Housing	F793	RP	MH				1,606	294	184	151	0	151	164	315	324	332	341 No change req'd
c) Tang Hall	F765	RP	MH	566	237		8,099	2,287	1,259	1,351	8	1,359	852	2,211	2,416	1,185	0 No change req'd
d) Foxwood	F720	06/07	MH				0	0	0	0	0	0	0	0	0	0	0
e) Horsman Avenue	TBA	08/09	MH	0	21		237	0	0	0	0	0	0	0	237	0	0 No change req'd
f) Clifton	F732	06/07	MH	82	8		1,272	338	50	-191	0	-191	400	209	0	0	725 No change req'd
g) Askham Richard	TBA	08/09	MH	25			25	0	0	0	0	0	0	0	25	0	0 No change req'd
h) Nether Poppleton	F740	07/08	MH	20	20		126	0	167	126	0	126	0	126	0	0	0 finished
i) Miscellaneous	TBA	09/10	MH	51			527	0	0	0	0	0	0	0	0	527	0 No change req'd
j) Walmgate	F741	07/08	MH	21	21		190	0	190	1	1	2	188	190	0	0	0 No change req'd
k) Acomb	TBA	09/10	MH	57			739	0	0	0	0	0	0	0	0	59	680 No change req'd
l) Villages	TBA	09/10	MH	30			319	0	0	0	0	0	0	0	0	319	0 No change req'd
m) Clementhorpe	TBA	09/10	MH	43			461	0	0	0	0	0	0	0	0	461	0 No change req'd
n) Holgate	TBA	09/10	MH	22			252	0	0	0	0	0	0	0	0	252	0 No change req'd
o) City	TBA	10/11	MH	26			353	0	0	0	0	0	0	0	0	0	353 No change req'd
p) Lowfield	TBA	10/11	MH	135			1,226	0	0	0	0	0	0	0	0	0	1,226 No change req'd
q) Delwood	F730	06/07	MH				329	329	0	21	0	21	-21	0	0	0	0 finished
							<b>20,700</b>	<b>3,404</b>	<b>2,514</b>	<b>1,774</b>	<b>14</b>	<b>1,788</b>	<b>2,385</b>	<b>4,173</b>	<b>4,181</b>	<b>4,355</b>	<b>4,587</b>
<b>2 Other Modernisation</b>																	
a) Kitchens	F769	04/05	MH	20	5	0	116	49	10	0	0	0	16	16	16	17	18 No change req'd
b) Installation and Replacement of Heating Systems	F772	RP	MH	753	231		1,735	0	0	0	0	0	508	508	420	466	341 No change req'd
							<b>1,851</b>	<b>49</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>524</b>	<b>524</b>	<b>436</b>	<b>483</b>	<b>359</b>
<b>TOTAL MAJOR REPAIRS ALLOWANCE SCHEMES</b>							<b>22,551</b>	<b>3,453</b>	<b>2,524</b>	<b>1,774</b>	<b>14</b>	<b>1,788</b>	<b>2,909</b>	<b>4,697</b>	<b>4,617</b>	<b>4,838</b>	<b>4,946</b>
<b>GRAND TOTAL CAPITAL &amp; MRA</b>							<b>44,436</b>	<b>7,902</b>	<b>5,208</b>	<b>4,020</b>	<b>810</b>	<b>4,830</b>	<b>4,623</b>	<b>9,453</b>	<b>8,873</b>	<b>8,927</b>	<b>9,343</b>
<b>HOUSING ASSOCIATION SCHEMES</b>																	
1 Arclight Capital	E732	05/06	DJ				0	0	0	794	0	794	751	1,545	0	0	0 No reply rec'd
Arclight Income							0	0	0	-1,545	0	-1,545	0	-1,545	0	0	0 No reply rec'd
							<b>0</b>	<b>0</b>	<b>0</b>	<b>-751</b>	<b>0</b>	<b>-751</b>	<b>751</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
HRA							13,649	2,623	1,765	1,359	308	1,667	1,089	2,756	2,786	2,619	2,927
MRA							22,551	3,453	2,524	1,774	14	1,788	2,909	4,697	4,617	4,838	4,946
GFND							8,236	1,826	919	887	488	1,375	625	2,000	1,470	1,470	1,470
							<b>44,436</b>	<b>7,902</b>	<b>5,208</b>	<b>4,020</b>	<b>810</b>	<b>4,830</b>	<b>4,623</b>	<b>9,453</b>	<b>8,873</b>	<b>8,927</b>	<b>9,343</b>



CAPITAL SCHEME DETAILS		TOTAL														
COST CENTRE	START YEAR	RESP. OFFICER	REVISED IN YEAR UNITS	Scheme COST £'000	EXP TO 31/03/07 £'000	PROFILED EXP 24/10/07 £'000	TOTAL EXP 24/10/07 £'000	COMMITMENTS 24/10/07 £'000	TOTAL SPEND £'000	BALANCE OF ESTIMATE	2007/08 £'000	2008/09 £'000	2009/10 £'000	2010/11 £'000		
1	Community Equipment Loan Service (committed)															
	W746															
a)	Purchase of Equipment	RP	SL	35	355	85	52	37	0	37	53	90	90	90	90	No change req'd
b)	Capitalised Salaries				60	15	9	7	0	7	8	15	15	15	15	"
	Total cost of scheme				415	100	61	44	0	44	61	105	105	105	105	
2	Modernising EPHs to meet national standards (committed)															
	W751															
a)	Oliver House	04/05	TS	1	20	20	0	0	0	0	0	0	0	0	0	
b)	Windsor House	04/05	TS	1	305	298	4	-6	7	1	6	7	0	0	0	No change req'd
c)	Capitalised Salaries				0	0	0	0	0	0	0	0	0	0	0	
	Less resources				-100	-100	0	0	0	0	0	0	0	0	0	
	Total cost of scheme				225	218	4	-6	7	1	6	7	0	0	0	
3	Morrell House (committed)															
	W762															
a)	Snagging and Repairs	04/05	TS	1	60	40	13	13	0	13	7	20	0	0	0	No change req'd
	Total cost of scheme				60	40	13	13	0	13	7	20	0	0	0	
4	Relocation of Hebden Rise Day Centre															
	W756															
a)	Building Contract	04/05	TS	1	7	-2	5	0	4	4	5	9	0	0	0	No change req'd
b)	Fixtures and Fittings and Misc	04/05	TS	1	0	0	0	0	0	0	0	0	0	0	0	
	Total cost of scheme				7	-2	5	0	4	4	5	9	0	0	0	
5	Information Management Improvements (committed)															
	W760															
a)	Personal Computers	05/06	PW	150	198	107	53	1	0	1	90	91	0	0	0	No change req'd
	Less Resources (Capital Grant)				-198	-107	-53	0	0	0	-91	-91	0	0	0	"
	Total cost of scheme				0	0	0	1	0	1	-1	0	0	0	0	
6 a)	Disability Support Programme															
	W761															
	RP	RA	130	401	101	56	36	44	80	20	100	100	100	100	100	Checked
	Total cost of scheme				401	101	56	36	44	80	20	100	100	100	100	
7	DOH Grant Improving the Care Home Environment for Older People															
	W764															
a)	External Providers	07/08	DM		160	0	93	40	0	40	120	160	0	0	0	No change req'd
	DOH Grant	07/08	DM		-160	0	-160	-160	0	-160	0	-160	0	0	0	"
b)	Haxby Hall	07/08	MB		6	0	4	2	0	2	4	6	0	0	0	"
	DOH Grant	07/08	MB		-6	0	-6	-6	0	-6	0	-6	0	0	0	"
c)	Oliver House	07/08	MB		5	0	3	4	0	4	1	5	0	0	0	"
	DOH Grant	07/08	MB		-5	0	-5	-5	0	-5	0	-5	0	0	0	"
d)	Woolnough House	07/08	MB		20	0	12	6	0	6	14	20	0	0	0	"
	DOH Grant	07/08	MB		-20	0	-20	-20	0	-20	0	-20	0	0	0	"
e)	Windsor House	07/08	MB		5	0	3	0	0	0	5	5	0	0	0	"
	DOH Grant	07/08	MB		-5	0	-5	-5	0	-5	0	-5	0	0	0	"
f)	Willow House	07/08	MB		24	0	14	0	0	0	24	24	0	0	0	"
	DOH Grant	07/08	MB		-24	0	-24	-24	0	-24	0	-24	0	0	0	"
	Total cost of scheme				0	0	-91	-168	0	-168	168	0	0	0	0	
8	22 The Avenue Improvements															
	W770															
	07/08	TS		94	0	1	3	0	3	91	94	0	0	0	0	No change req'd
	Total cost of scheme				94	0	1	3	0	3	91	94	0	0	0	
TOTAL SOCIAL SERVICES CAPITAL PROGRAMME					1,202	457	49	-77	55	-22	357	335	205	205	205	
TOTAL SOCIAL SERVICES CAPITAL PROGRAMME: GROSS EXPENDITURE					1,720	664	322	143	55	198	448	646	205	205	205	
: INCOME					-518	-207	-273	-220	0	-220	-91	-311	0	0	0	
: NET (AS ABOVE)					1,202	457	49	-77	55	-22	357	335	205	205	205	

This page is intentionally left blank



---

**Meeting of the Executive Members for  
Housing and Adult Social Services and  
Advisory Panel**

**10 December 2007**

## **York Strategic Housing Market Assessment 2007**

### **Summary**

1. The report outlines key findings of the York Strategic Housing Market Assessment (SHMA) and considers the broad policy issues arising from them. It suggests these policy issues be used to inform future housing strategy, service planning and improvement and be considered as part of the Sustainable Community Strategy review and Local Development Framework (LDF) process.

### **Background**

2. A strategic housing market assessment is an essential part of the evidence base for the city's housing strategy and LDF. The scope of the study was to understand the dynamics of the York housing market, to ascertain the mix and type of dwellings required and to identify the housing needs and aspirations of particular groups. The last full housing market assessment was undertaken in 2002, with an interim assessment in 2006.
3. Fordham Research undertook the assessment and published their findings in July. Work on the SHMA was led by an in-house steering group and benefited from regular stakeholder sessions and interviews with specific interest groups.
4. Household survey data was used to supplement existing secondary data sources. A sample of 13,200 households received a questionnaire, from which over 3,000 responses were received. This sample is large enough to be statistically accurate, with a 1.7% city-wide margin of error.
5. In July 2007 the LDF Working Group agreed to publish the SHMA as part of the LDF Evidence Base. In September City of York Council Planning Committee agreed to endorse the use of the SHMA for development control purposes, in terms of agreeing the most appropriate housing tenure, size and type on individual sites.

### **Key findings**

#### York context

6. The population of York is expected to grow significantly over the next 15 years, with especially large increases in those aged 60 and over. The city's ethnic population has increased rapidly over the past 5 years. These factors, along with a drop in average household size, means ongoing growth in household numbers, with latest projections estimating an increase of 16,300 from 2006 to 2021.<sup>1</sup>
7. York's economy has experienced significant job and company growth. This is expected to continue. The city plays a key role as a regional economic centre and overall the workforce has relatively high qualifications and pay.<sup>2</sup> However, it should be noted that there is still a large proportion of the working population that earn less than the average.
8. York's house prices are 28% higher than the regional average, and just below the national average. Entry-level prices for owner occupied accommodation vary from £114,500 to £242,000 depending on size of dwelling. There is a significant gulf between average income earnings and average house prices. The typical house price to earnings ratio is high, both regionally and nationally, at 8:1.<sup>3</sup>

#### Housing requirement

9. Two approaches were used to assess York's housing requirements over the next five years; one based on the government's (CLG) 'basic needs assessment' model and one based on the 'balancing housing markets' (BHM) model, which Fordham's believe offers a more realistic assessment of how housing markets work in practice.
10. The CLG model determines the existing and arising demand for affordable housing<sup>4</sup> units as well as predicting the supply available to estimate the shortfall (or surplus) on an annual basis. Using this model Fordham's found a net requirement for an additional 1,218 affordable homes per annum to alleviate all housing problems in York<sup>5</sup>. This is higher than both the 2002 and 2006 SHMA study findings of 950 and 969 per annum respectively.
11. The BHM model takes a less technical approach, by combining a technical assessment of housing need with a degree of reasoned judgement about how the housing market works in practice (e.g. the fact that the private rented sector is often used to meet some affordable needs through the use of housing benefit). It looks at the whole local housing market, considering the extent to which supply and demand are 'balanced' across tenure and property size. Using this model Fordham's found, a shortfall of 982 dwellings per annum across all tenures, with the majority of these being in the urban and sub urban areas. This breaks down

---

<sup>1</sup> Office of National Statistics March 2007

<sup>2</sup> Average (mean) household incomes stand at £30,000, though 44% of households have an income below £20,000 (median £24,000)

<sup>3</sup> Entry-level prices vary from £114,500 to £242,000 depending on the size of the dwelling. Entry-level weekly rents in the private sector vary from £109 to £213. These are more than 100% higher than weekly rents in the social rented sector, at £59 to £79.

<sup>4</sup> Affordable housing includes social rented housing and intermediate housing, provided to specified eligible households whose needs are not met by the market

<sup>5</sup> Including those households spending more than 25% of income on housing and households utilising housing benefit in the private rented sector.

into 492 owner occupied dwellings, 65 private rented and 425 affordable (see Fig.1 below).

12. Fordham's found an ongoing requirement for owner occupied accommodation and a potentially large requirement for intermediate housing<sup>6</sup>. Over 60% of households are looking for houses rather than flats. The main shortfall is for two and three bedroom properties (other than in the private rented sector) with notable shortfalls recorded for all other sizes.

<b>Fig. 1 Balancing housing markets results for York (per annum)</b>					
Tenure	Size requirement				Total
	1 bed	2 bed	3 bed	4 bed	
Owner occupied	37	209	176	70	492
Private rented	117	-139	11	76	65
Intermediate	46	78	32	0	156
Social rented	10	133	66	60	269
<b>TOTAL</b>	<b>211</b>	<b>282</b>	<b>285</b>	<b>204</b>	<b>982</b>

### Particular needs

13. Households with support needs: - Nearly 17% of all households in York contain at least one person with a support need. Half of these are elderly households. There has been an increase in the number of people with a disability and a 30% rise in the proportion of frail elderly households since 2002. These trends are set to continue. These households are more likely to live in unsuitable housing and generally have lower financial capacity. The main additional need expressed by this group was help maintaining home and small scale housing improvements.
14. Older person households (retirement age and above): - The number of people aged over 85 is set to rise by 150% over the next 30 years. More than a quarter of all households contain only older people. These tend to be concentrated in the outer suburbs, in owner occupied housing without a mortgage.
15. Under occupation and overcrowding: - Almost 40% of all homes in York are under occupied, while only 1.3% are overcrowded. The vast majority of under occupied dwellings are in the private sector and tend to be occupied by older households in owner occupation. Wards with the largest proportion of under occupation are high income rural areas. Around 12% of the council's housing stock is under occupied, representing almost 1000 properties.
16. Key worker households: - The SHMA defined key workers as teachers, social workers, clinical healthcare staff, emergency services and prison/ probation officers. The SHMA showed the 8,000 key workers residing in the city tend to be concentrated in owner occupied accommodation, with mortgages, to have higher financial capacities, spend a smaller proportion of their incomes on housing, and have lower levels of housing need.

<sup>6</sup> Intermediate housing includes low cost market housing bought at a market discount or on a shared ownership basis. It is sometimes known as low cost home ownership.

17. Black and minority ethnic groups (BMEs): - Almost 7% of York's population was within a BME group in 2004, compared to 4.9% in 2001. BME households tend to be located in private rented and terraced housing. There is a correlation between the rise in BME numbers and university expansion. The SHMA sample size for BME groups was small, offering limited scope for analysis regarding particular housing needs.
18. Evidence suggests significant in-migration by workers from Eastern Europe since 2004. Research carried out in other areas shows migrant workers, in common with other BME groups, are predominantly living in the private rented sector with some evidence of overcrowding and exploitation.
19. First time buyers and young people (aged 21-35): - Over 40% of all younger people live in shared accommodation, and are especially concentrated in the inner suburbs of the city. The financial capacity of younger person households is below average, and a much larger proportion than average spend large percentages of income on housing. They are much more likely to be in housing need than the population as a whole. First time buyers tend to have higher incomes than average, but lower financial capacities since they have less equity.
20. Student households: - There are approximately 15,000 full time students in York. It is estimated 6,000 of these are living in the city's housing stock, mainly the private rented sector. There are geographic concentrations of students in certain wards surrounding the University of York campus. The University of York plans to increase in size by a further 3,400 full time students, and provide additional campus accommodation for 3,600.
21. Homeless households: - Due to limitations of the survey methodology no primary data was collected from this client group. The analysis offered in the SHMA is therefore based on secondary data and stakeholder interviews with homelessness officers and support agencies. There were 414 homeless acceptances in 2005/06, reflecting a decreasing trend over several years. However, the SHMA points to the relatively high numbers of young people presenting as homeless and the lack of adequate supported housing or resettlement accommodation. It also highlights difficulties of homeless households accessing the private rented sector.
22. Rural areas: - Rural households account for 15% of all York households. Rural areas generally have a higher percentage of owner occupation, property prices are generally higher and dwellings are more likely to be detached or bungalows when compared with urban areas. The SHMA found that, on the whole, the rural population was no more disadvantaged in relation to housing compared to the urban but found a limited supply of rural affordable housing and a general lack of smaller 'cheaper' market properties.
23. Families with children: - Households containing children make up nearly a quarter of all households, and tend to be located in the outer suburbs or rural areas, particularly in semi-detached housing. They are more likely to be living in unsuitable accommodation, despite a higher than average financial capacity. There is also an increased likelihood of spending a larger proportion of income

on housing. Lone parent families have very low financial capacities and the proportion of income spent on housing is very high. They display the highest housing need of any sub group.

## **Policy issues**

24. The supply housing in York is lagging behind demand, resulting in higher prices and costs. An obvious response would be to increase housing supply. However, whilst a high housing requirement exists, wider planning objectives<sup>7</sup> need to be considered when interpreting these unconstrained figures into housing policy for the city. These factors will necessarily constrain the level of house building in York, and will be given due consideration through the LDF Core Issues document and any subsequent review of housing policy.
25. There is a close correlation between high housing demand and the growing York economy. Moving forward there will need to be close integration between the city's economic and housing strategies to ensure housing provision in the city is aligned to the city's socio-economic needs. Housing and economic strategies are soon to be linked at the regional level through new integrated regional strategies led by regional development agencies.
26. The SHMA concluded that, given the high level of affordable housing need identified, there is justification for a 50% affordable housing target in the city. The minimum site threshold for applying affordable housing policy in York is currently 15 homes (2 homes or 0.03 hectare in rural areas). Options for future affordable housing targets and site thresholds are being considered through the LDF Core Strategy (Issues & Options) programme.
27. SHMA findings show the house/flat balance of recent completions is significantly out of step with current demand. Recently flats have become less popular yet the emphasis in planning policy on high density development on previously developed land has complemented developer and investor preferences for building and purchasing one and two-bed flats. In September the council's Planning Committee agreed to endorse the use of the SHMA for development control purposes and this will help guide negotiations on appropriate dwelling type and mix in the future.
28. The SHMA says if intermediate housing can be delivered at a meaningfully affordable price it might make over one third of the 50% affordable housing target, with the remainder being for social rent. However, if this cannot be achieved the SHMA suggests affordable housing should be wholly for social rent. Current models of low cost home ownership (LCHO) in York have proved unaffordable for a growing number of people, especially where the requirement is for larger (3-4 bedroom) dwellings. Officers in Housing Services are currently reviewing how intermediate housing is delivered and allocated.

---

<sup>7</sup> Wider planning objectives include environmental constraints, traffic flow and impact on urban and rural designations.

29. Demand for private rented housing is expected to remain strong. High house prices mean a significant number of people, especially those without equity, are excluded from owner occupation and look to this sector to meet their housing needs. The increasing student population and the rise in immigration add to this demand. The council plays a significant role in ensuring standards in the private rented sector are maintained and that people within the sector are fully aware of their rights and responsibilities. Demand for such services is likely to continue and possibly increase in the future.
30. High house prices and cost are requiring people to borrow more. This is particularly true of newly forming households that have low incomes and low savings. The Council for Mortgage Lenders has noted a recent sharp rise in home repossessions and RICS<sup>8</sup> has predicted this rise is likely to continue through 2008. Increase in arrears and re-possession will result in increased demand for debt advice and information services and, at worst, have an impact on homelessness services.
31. With the projected growth in the number of older people and those with longer-term support needs will come increasing demands on support services. The wider policy agenda for older people is to support independence and maximise choice. This means providing housing and support that enables people to live independently or to move to accommodation more suitable to their needs. Appropriate aids and adaptations to existing homes should help, and prevent falls and reduce hospital admissions. Consideration should be given for a proportion of all new homes to be built to lifetime homes standards to increase the options open to those currently in unsuitable housing and to minimise the need for ongoing support services. The lack of good quality housing options for older people is a key reason why so many remain in family homes that are too big, and this in turn exacerbates the current housing shortage. Providing additional choice to older people may encourage downsizing.
32. There is likely to be an increased requirement for specialist accommodation such as 'extra care' schemes. The Long Term Commissioning Strategy for Older People in York published in January 2007 outlined the key needs arising from this customer group and a further report developing these issues was considered by the Executive Members for Housing and Adult Social Services and Advisory Panel on 23 October 2007
33. Given increasing demands, resources will need to be effectively targeted. Households with significant equity but low incomes should be encouraged to consider equity release. A major barrier to take up of equity products seems to be the provision of trusted advice and information. There is need for more work in this area to overcome this. Housing Services are currently reviewing the Private Sector Housing Renewal Strategy and this will include a review of how the council targets support to older people to help maintain independence and choice. This is due to be finalised in Spring 2008.

---

<sup>8</sup> Royal Society of Chartered Surveyors



34. There is evidence of sizable under occupation within council house stock (around 1000 council dwellings or 12.5% of council stock). Possible policy responses could include incentives to encourage transfer to smaller units and practical help and support with moving. Further research with older people is recommended to help identify other barriers.
35. Specific policies to assist key workers would ideally be based on clear evidence of recruitment and retention problems in key areas of the local economy. Such evidence did not emerge during the stakeholders sessions and wider consultation on the SHMA, though some concern was raised regarding the increasing number of lower paid care workers that will be required to support the ageing population. The SHMA was based largely on household survey data and therefore may not have captured the views of key workers already priced out of the city. Further workplace-based survey data would be needed to give a fuller picture of key workers issues.
36. Key policy issues in relation to BME groups in York centre on good access to services, ensuring new arrivals receive relevant advice and support, addressing isolation, ensuring private sector housing standards are maintained and improved and ensuring community cohesion is safeguarded. Colin Stroud, Chair of the Inclusive York Forum, is currently leading on the development of a citywide BME strategy that will embrace these issues.
37. The SHMA did not include a dedicated survey of gypsies and travellers, but a separate sub-regional study is being carried out in order to build up a comprehensive picture of need in this sector and policy issues will emerge from this work. This should be available by Spring 2008.
38. Overall financial capacity rather than income alone is now a key determinant of people's ability to afford market housing. Those currently not in owner occupation are finding it increasingly difficult to access it and there is growing concern that certain sections of the population could become marginalised over the longer term. A range of low cost home ownership options have been available in York over recent years, such as Open Market Homebuy, but these have not always represented good value for money for customers and have not always been affordable.
39. The government's recent Housing Green Paper proposes a range of measures aimed at encouraging further innovation in financial products to help people access to sector more easily. The Green Paper also encourages the expansion of shared ownership. The government also wants to see new ways in which tenants can be encouraged and helped to acquire shares in their properties.
40. The SHMA did not include a survey of all students, only those living in the city's general housing stock. The sample return from the survey was not sufficient to gain substantial additional information about this group upon which policy could be based. Further, more focussed research would be required to gain a better picture of the future housing intentions of students.

41. Policy responses to homelessness issues identified in the SHMA include increased prevention work with young people at risk of homelessness, consideration of dedicated resettlement accommodation for young people and further pro-active work with landlords to overcome barriers to private renting. These and other issues will be considered as part of the Homelessness Strategy review process currently underway and due to be finalised in Spring 2008.
42. Whilst the bulk of the city's housing demand is within the urban and suburban areas there is still a requirement for more affordable or low cost market housing in rural areas. The government encourages rural exception site policy as a way of meeting rural housing needs. The SHMA provides some analysis concerning where the greatest housing needs may be on a parish level and where more localised research may be useful. The York rural housing enabler is currently visiting these parishes to ascertain local interest.
43. Officers are currently reviewing the council's exception site policy to ensure it meets with best practice. Discussions are currently ongoing at the sub regional level regarding the future of the rural housing enabler programme. Funding for the York RHE runs out in March 2008 and efforts are being made to ensure continuity after this date.

### **Consultation**

44. This report has been written in consultation with colleagues in Housing and Adult Social Services and City Strategy.

### **Corporate Priorities**

45. This report links to the following corporate priorities:
  - o Improve the quality and availability of decent affordable homes in the city

### **Implications**

46. Given this is a briefing report concerning possible future policy and service development there are no implications directly associated with it at this stage.

### **Risk Management**

47. There are no risks directly associated with the recommendations in this report.

### **Recommendations**

48. That the Executive member notes the key findings of the SHMA 2007 as detailed in this report and considers and comments on the policy issues identified.

**Reason:** So that the findings of the SHMA 2007 can be used to inform future housing strategy, policy development and service improvement.

49. That the Executive member endorses the policy issues identified in the report so that these can be submitted as evidence to inform the Sustainable Community Strategy review and Local Development Framework process.

**Reason:** So that Housing Services can ensure the broad policy issues arising from the SHMA 2007 are fully considered.

**Contact Details:**

**Author:**

Paul McCabe  
Planning and Policy Manager  
Housing Strategy and Enabling  
Group  
Housing and Adult Services  
01904 554527

**Chief Officer Responsible for the report:**

Bill Hodson  
Director of Housing and Adult Social  
Services

**Report Approved**

**Date**

22/11/07

**Wards Affected:**

All

**For further information please contact the author of the report**

**Background Papers:**

Strategic Housing Market Assessment 2007:

[http://www.york.gov.uk/content/45053/64877/64880/Local\\_development\\_framework/LDF\\_Evidence/2007SHMAdocument](http://www.york.gov.uk/content/45053/64877/64880/Local_development_framework/LDF_Evidence/2007SHMAdocument)

Strategic Housing market Assessment 2007: Executive Summary:

[http://www.york.gov.uk/content/45053/64877/64880/Local\\_development\\_framework/LDF\\_Evidence/2007SHMAexecutivesummary](http://www.york.gov.uk/content/45053/64877/64880/Local_development_framework/LDF_Evidence/2007SHMAexecutivesummary)

Strategic Housing Market Assessment 2007: Technical Appendices:

[http://www.york.gov.uk/content/45053/64877/64880/Local\\_development\\_framework/LDF\\_Evidence/2007SHMAtechnicalappendices](http://www.york.gov.uk/content/45053/64877/64880/Local_development_framework/LDF_Evidence/2007SHMAtechnicalappendices)

This page is intentionally left blank



---

## Meeting of the Executive Members for Housing and Adult Social Services and Advisory Panel

10<sup>th</sup> December 2007

Report of the Director of Housing and Adult Social Services

### Upgrade of Communal TV Aerials

#### Summary

1. To consider the options available to upgrade the communal aerials to blocks of flats in preparation for the switch over to a digital reception in 2011. To advise the Executive Member of the procurement process to appoint the contractor for the delivery of the digital infrastructure to tenants in blocks of flats.

#### Background

2. The government has announced the programme for switching the UK to digital TV between 2008 and 2012. After switchover communal TV aerial systems in local authority flatted properties that have not been upgraded or replaced will no longer provide analogue TV signals for residents and will not receive the digital signal.
3. In a recent Ofcom survey 50% of UK households had converted all their televisions to digital and more than 80% of homes had a digital television. In the short term, residents who must rely on old style analogue communal TV systems may find themselves barred from the wider benefits of digital broadcasting. Communal TV systems designed for an analogue world may not relay the full range of digital television services without at least some and in many cases, substantial modification.
4. The Government has a stated policy of maximising the choice of digital platforms available for everyone – that is, receiving digital TV signals through terrestrial, satellite, cable or broadband means. For communal TV systems, much as for simple domestic systems, there is a choice of how to upgrade.
5. In terms of the solutions available there are 3 main options these are discussed at paragraph 10

## **Consultation**

6. The various options have been discussed with the federation of tenant and resident associations earlier this year. They unanimously voted for the integrated reception system (IRS). Their view was that this would provide customers with the widest range of choices.

## **Options**

7. Option one - Do nothing this is always an option but customers will have blank screens when the switch-over happens.
8. Option two - Head end upgrade, this is potentially the cheaper solution however it has a number of limitations.
9. Option three – Integrated Reception System (IRS), this is the most expensive option however offers the greatest potential.

## **Analysis**

10. Option one - individuals will resort to satellite dishes, there will be complaints from customers about no signal and if it is left to the last minute the council is likely to find there is a shortage in contractors available to upgrade the aerials. The council will be missing an opportunity to tap in to the advantages that the digital revolution will bring in terms of communicating with its customers.
11. Option two - There is no national coverage until switchover, some electrical interference, no non English speaking channels, only accesses Freeview not Sky therefore there is still the potential for the proliferation of satellite dishes and the possibility of damage and disputes.
12. Option three - It is what is known in the industry as offering a neutral platform, tenants can choose between digital satellite or digital terrestrial (Freeview), as well as receiving existing analogue TV. They will also have access to DAB/FM radio, the possibility of CCTV/Information systems, a “backbone” of cables distributes around the block via a multiswitch and new double screened cables and outlet plates ensures no electrical interference. This option would afford those living in flats the same choices as those that live in houses, it would allow the council to ban dishes, ensures “social inclusion” for all electronic services, builds an e-govt platform in flatted stock and offers best value through continuous improvement of TV and electronic service delivery.

## **Corporate Priorities**

13. The upgrade to digital services certainly fit with the corporate objective of ensuring that the council improves accessibility of service particularly if the IRS option is adopted.

14. Given that the digital switchover is a national programme competition for quality contractors with the sheer volume of resources required is going to be fierce hence officers are recommending an early programme of works. Officers are therefore recommending the use of the Northern Housing Consortium's (NHC) regional delivery framework as the procurement route.
15. The NHC are a non-profit making public sector membership organisation set up to support social housing to research and assist on an array of topic areas including procurement. The NHC have acquired the expertise to specify these works and have already tendered to a framework of contractors with whom CYC officers have engaged about a York contract. The benefits this brings are numerous including:-
  - Expertise – in such a technical field the NHC have undertaken significant research to assist participating authorities
  - Process – The NHC have already undertaken the lengthy European compliant tendering processes (OJEU) that would otherwise result in a 5 month exercise for CYC officers.
  - Transparency – All contractors and contracts on the framework are reviewed by the NHC, this framework is an existing platform and hence CYC can benefit from the experience already available from the NHC themselves but other authorities in the same position as well as those who have already used the same contractors.
  - Cost – There is likely to be a saving of upwards of 70+ senior officer working hours through simply joining the consortium and hence not undertaking a full OJEU tender. Joining this consortium allows CYC to be part of a much larger 'client family' and then hence achieving economies of scale that would not be possible were we to tender individually for the 2000+ local dwellings. Without actually carrying out the 2 tender exercises this is not possible to exactly quantify this however recent experiences of such consortiums have yielded 22% savings. Other housing organisations who have completed evaluations of the cost of independently procuring the installations have realised significant financial benefit from joining the consortium.

## Implications

### 16. Financial –

It is proposed that the increased cost of the installation of IRS or the Head end Up grade in blocks of flats will be recovered through the service charge levied at the moment. Currently there are just under 2000 tenants who are charged 17p a week for the maintenance of their communal aerial . If the authority was to recover the equipment cost over 10 years it would be necessary to increase the weekly charge by 33p bringing the total charge including the maintenance cost to 50p a week for the IRS or 25p increase for the Head end Up grade

bringing the total charge including maintenance to 42p. The increased charge would be eligible for housing benefit.

(the charge is based on approximately £160 per unit for the IRS and £120 per unit for the head end up grade).

A CRAM bid has been submitted to cover the initial costs and scheme has been built into the Business Plan.

- **Human Resources (HR)** none
- **Equalities** none
- **Legal** none
- **Crime and Disorder** none
- **Information Technology (IT)** none
- **Property** none

17. **Procurement**

Having consulted with procurement they agree with the approach that has been adopted.

**Risk Management**

18. In compliance with the Councils risk management strategy the main risks that have been identified in this report are those which could lead to financial loss and system and technological. By tackling this issue now and not leaving it until the last minute the council can take a planned approach that will ensure value for money and avoid the possibility of finding suitably qualified contractors at the last minute. Delay could mean we are unable to meet the digital switch over date of 2011. The financial risk has been assessed has been assessed as 3 and therefore is acceptable
19. Technology is moving so fast, by installing the IRS the authority is ensuring its customer are receiving the most flexible system available. This system will ensure that customer will be able to take advantage of future technologies. By adopting this system the system and technological risk is measured as 3 and therefore is acceptable.

**Recommendations**

20. The Executive Member for Housing is asked to approve the following:
- a. Installation of IRS in council flats.
  - b. Agree the increase in the service charge to £0.50 per week (48 weeks per year), the increase would start from the start of the financial year following the installation



Reason: The installation of the IRS provides customers with the widest choice and offers the opportunity to take advantage of further technologies which will be advantageous to the customer and the council.

**Contact Details**

**Author:**

Tom Brittain  
Housing Operations Manager  
Housing and Adult Social  
Services  
Tel No. 01904 551262

Mark Grandfield  
Asset Manager  
Housing and Adult Social  
Services  
Tel No. 01904 553733

Debbie Mitchell  
Head of Housing and Adult  
Services Finance  
Tel No 01904 554161

**Wards Affected:** *List wards or tick box to indicate all*

**All**

**Chief Officer Responsible for the report:**

Bill Hodson  
Director of Housing and Adult Social Services

**Report Approved**  **Date** 22<sup>nd</sup> November 2007

Bill Hodson  
Director of Housing and Adult Social Services

**Report Approved**  **Date** 22<sup>nd</sup> November 2007

**For further information please contact the author of the report**

**Background Papers:**

St Ledger Homes Doncaster report on digital aerials October 2007  
Digital Switch Over – A good practice briefing August 2005

This page is intentionally left blank



---

**Executive Member for Housing and Adult Social Services and Advisory Panel****10<sup>th</sup> December 07**

Report of the Director of Housing and Adult Social Services

**Petition relating to the closure of Yearsley Bridge Day Centre****Summary**

1. This report advises Members of the petition received relating to the Yearsley Bridge Day Centre closure, and an update of the progress of the closure plan.

**Background**

2. A petition was received on September 4th 07 at full Council. It is just short of 5000 signatures and relates to opposition against the closure of Yearsley Bridge Centre. It is an amalgam of a previous petition submitted in April 07 with new signatories added- the petition organiser advises there are 3553 new signatories.
  - 2.1 As outlined in a report to Members in June 07, in response to the last petition, Yearsley Bridge, which is a large day centre in the Huntington area of York, supports 69 different people with learning disabilities on Monday – Friday. Please note that this figure includes 4 people who use the centre and are counted in this number, but only use Yearsley if supported separately by additional support workers. In reality therefore the number is 65. This has altered from the 73 people reported in the June report to EMAP, and is as a result of people opting to move onto alternative supports already. Its closure is part of an on-going programme of modernisation and re-provision to more flexible and individualised support in line with up to date Governmental thinking. This re-provision programme obtained Council support in 2002, and began with the closure and replacement of Hebden Rise Centre in 2005, followed by the programme for Yearsley Bridge. The closure of Yearsley Bridge is due to be completed in 2008.
  - 2.2 The plans for the reconfiguration and modernisation of day services in York came initially as a response to the Government paper “Valuing People” published in 2001. This paper and subsequent guidance and support from the National Valuing People Support team (the Government Learning Disability advisory team), supported the Day Services Modernisation plan that York submitted for vetting. The programme of changes also received support from inspectors from the Commission for Social Care Inspection where they commented, “in modernising the day services, the Council was offering more

appropriate alternative options to the majority of people who had been using larger day centre services.”

## **Consultation**

3. Consultation is focussing on the options for new supports to replace Yearsley Bridge Centre. This is being done through meetings for all users and families as well as a programme of individual consultation with each service user and their family/key supports. There has been, and continues to be, extensive information and opportunities for people to influence the outcomes for individuals who use the centre, in planning the future supports for customers that need ongoing support.
- 3.1 Following on from the meetings in December 06 where families and carers were invited to hear about the plans for Yearsley Bridge customers, all customers have received an individual person centred review. This is the mechanism by which individual's views; aspirations and needs are captured to inform the commissioning of alternative supports for their future day provision. These were all completed by October 07. Through October and November 07, the commissioning assumptions based on these reviews are being checked back with customers and families, and will be amended as necessary. Commissioning will then start to put in place the supports needed for individuals to begin their programmes in the summer of 08. Some people may elect to move towards a more community based support solution before summer 08, should such a choice be identified as being available before that time.
- 3.2 Work is continuing also to ensure re-provision of generic services that have been provided previously from the Yearsley centre, that we know will be required (e.g. non specific for one individual) such as Hydrotherapy supports/ light room/changing spaces (large disabled changing facilities) etc. This includes positive progress in the granting of planning permission for the hydrotherapy pool as part of the Oakland's complex. (Due for completion in Spring 09), and the agreement for 5 changing places facilities around the City. The University of York has agreed to usage of a light room and one will also be based within the City centre area of town.
- 3.3 The officers of the Council will continue to offer support and opportunities for engagement with the family group who gathered the petition, as well as to other families who are not involved in this group, by sending out information, as and when it is available, relating to the progress of the re-provision. In addition since the last petition report, there has been two family meetings to update on progress, on the 15<sup>th</sup> August and 15<sup>th</sup> November 07.

## **Options**

4. The petition is presented for Members comments and consideration.

## Analysis

5. The move away from large day centres and replacing them with smaller, more individualised support services in the community is well established as national good practice. The re-provision of Yearsley Bridge is part of York's local response to this Governmental requirement as well as a wish to provide improved, more modern services for people with a learning disability. The "Valuing People" white paper refresh, expected from Government later in 07, is anticipated to be very clear in its direction of the closure of any remaining large day centres into more individualised supports.

## Corporate Priorities

6. The strongest link is to the corporate priority to:  
Improve the health and lifestyles of the people who live in York, in particular among groups whose levels of health are the poorest."  
And also "improving the life chances of the most disadvantaged and disaffected children, young people and families in the city"

## Implications

7. Not applicable

## Risk Management

8. Not applicable

## Recommendations

9. That the Executive Member note the information in this report and consider if there needs to be any formal response to the petition.

## Contact Details

### Author:

Anne Bygrave  
Head of Learning Disabilities  
554045

### Chief Officer Responsible for the report:

Bill Hodson  
Director of Housing and Adult Social Services

Report Approved  Date 15.11.07

Bill Hodson  
Director of Housing and Adult Social Services

Report Approved  Date 15.11.07

## Specialist Implications Officer(s) *List information for all*

*Implication ie Financial*

*Name*

*Title*

*Tel No.*

*Implication ie Legal*

*Name*

*Title*

*Tel No.*

**Wards Affected:** *List wards or tick box to indicate all*

**All**

**For further information please contact the author of the report**



---

## Meeting of the Executive Members for Housing and Adult Social Services and Advisory Panel

10 December 2007

Report of the Director of Housing and Adult Social Services

### Changes to Continuing Care and Funded Nursing Care

#### Summary

- 1 The report requests the Executive Member to note:
  - a summary of the new national framework for Continuing Health Care and parallel changes to the funding arrangements for Funded Nursing Care
  - the potential impact of the changes on workload, performance and budgetary issues for Adult Social Services and action being taken to address these issues

#### Background

2. In recent years, there has been a series of national reports and media investigations into, what has been described, as the 'postcode lottery' approach to health taking responsibility for fully funding the care packages for people who's primary need, is a health need.
3. To date, the NHS and local government have been operating Continuing Care policies which have been compliant with a series of Circulars and Guidance issued by the Dept of Health but within a framework of 28 Strategic Health Authorities.
4. Effectively, there have been 28 different Continuing Care policies across England and although each has been based within a consistent legal framework following a series of Ombudsman decisions etc, there has remained a significant degree of local interpretation which has led to the position of the 'postcode lottery' and evidence that 'eligibility' for continuing care funding has been applied inconsistently.
5. In 2006, the Dept of Health consulted on a new national framework for NHS Continuing Care and Funded Nursing Care which resulted in the development of a national framework which was implemented on 1 October 2007.

## The New Framework

6. The major changes that the new framework will bring are:-
  - One national policy which is person centred
  - A common process for assessment and national tools to support decision making/eligibility
  - One single band for Funded Nursing Care
7. The role of the Strategic Health Authority is to retain responsibility for monitoring the implementation and application of the national policy; convene Independent Review Panels and act as the link between the Ombudsman, the Health Care Commission and local organisations
8. The role of the Primary Care Trust is to promote awareness of, and provide training in the new policy; ensure consistency of application; establish robust performance systems and arrange regular case reviews
9. The role of the Local Authority is to participate in joint assessments; share information and databases to assist the PCTs in their commissioning of continuing care; provide social care within Fair Access to Care Services criteria and complete Carers Assessments where appropriate.

## Assessment Tools

10. The new framework introduces 3 assessment tools:-
  - Checklist
  - Fast Track Pathway
  - Decision Support Tool.
- 10.1. **The Checklist tool** is an abbreviated version of the main Decision Support Tool and is designed to be used for early identification of possible eligibility for fully funded continuing health care. It will be used in the acute hospital setting before a decision to discharge; at reviews of funded nursing care and has the potential to be used within social care reviews of complex and intensive support packages.
- 10.2. **The Fast Track Pathway** is a specific tool for use at 'End of Life' – previous continuing care policies have used '6 weeks' as being an indicator for eligibility for fully funded continuing care. This has been an unreliable indicator with clinicians being unhappy at being asked to put a 'time limit' of an individual's life. The new tool removes the concept of a time limit and focuses more on situations where someone has a rapidly deteriorating health condition, which may be terminal. It is a simple tool, which does not require clinicians, customers or their families to be involved in lengthy and complex assessments. Where a person meets eligibility, the guidance requires funding



to be made available for 12 weeks before a formal review – national statistics show that where a person is at the ‘end of life’ stage, their need for support usually ends before the 12 week stage.

- 10.3. **The Decision Support Tool** is the main assessment tool, which will be used to underpin decisions to provide continuing care funding. There are a number of domains relating to physical and emotional health needs, each of which has a continuum of levels of need. Each level of need is ranked and the assessment provides a matrix of assessed need, which evidences eligibility for funding.
11. The Executive Summary to the Framework is attached at Appendix 1. The full documents are available to Members on

### **Consultation**

- 12 The new policy was the result of national consultation led by the Dept of Health. Local Authorities, Health departments and community groups and organisations were all asked to submit their comments, which led to the final document.

### **Options**

- 13 The new policy is mandatory for Local Authorities to implement so there are no options for consideration.

### **Analysis**

- 14 Although there are no options for consideration, the introduction of a national Continuing Care policy brings some considerations for: -
  - Local Authorities in general
  - City of York council

These are detailed below.

15. **Local Authorities in general:** - The new framework strengthens good practice and makes it a requirement that all assessments for continuing care funding are joint assessments carried out by a health practitioner and a social worker/care manager. This requirement extends social services involvement into assessments for Self Funders, either in hospital; in nursing homes or funding the full costs of their home care support.
16. There is requirement for regular jointly conducted reviews at 3/6/12 monthly intervals – the current statutory requirement for social care reviews is at the initial 6 weeks stage and thereafter annually.
17. There is an expectation that the introduction of a national framework will invoke a significant rise in requests for re-assessment, many of which will not result in fully funded health care but will result in requests for Independent Review Panels.

18. Changes to the format of Independent Review Panels means that senior managers within social services with the relevant experience are now expected to be available to sit on the Panels – this will require time to work across the Strategic Health Authority area as officers cannot sit on panels within their own local authority area.
19. The framework includes Dept of Health Guidance on what is defined as a 'reasonable timescale for decision making'. The suggested timescale is 2 weeks and refers to the timeframe from which the need for an assessment is identified through to a decision on eligibility and funding. Local decisions on eligibility have to be made jointly and the Dept of Health is recommending that PCTs and Local Authorities develop local Eligibility Panels. To achieve the timescale being set by the Dept of Health would indicate that there would need to be a weekly panel.
20. It is important that LAs share a consistent approach to the interpretation of the policy and in monitoring inconsistencies in PCT approach and decision making, so Wakefield LA will lead a group of 15 LA representatives within the Yorkshire and Humber region to review practice and implementation.. This group will link back into the Association of Directors of Adult Social Services group which played a key role within the DoH Consultation period, in forming a national LA response to the proposed policy
21. The Dept of Health Framework places lead responsibility for the new policy on health but also requires social services to have a more defined and proactive involvement in the implementation and application of the policy. Hence, the policy refers to joint working; joint commissioning strategies and shared responsibility for decision making.
22. **City of York Adult Social Services** :- The role of the local authority in determining eligibility for fully funded health care is strengthened but at the expense of additional responsibilities.
23. As this area of continuing care continues to be of national interest, the Dept of Health is implement rigorous monitoring and quality assurances processes which will include the performances of the respective key agencies in implementing the policy within the approach determined by the Dept of Health.
24. Effectively, the local authority is now required to play a more active role from joint assessments to providing expertise at Independent Review Panels and participating in local Eligibility Panels
25. The area of greatest uncertainty and therefore, possible impact, is that of Self Funders within Nursing Homes. To date, applications for fully funded health care have been dealt with solely by the PCT with no social services involvement. The new policy will require social services to be a joint partner in a continuing care assessment and an ongoing partner in reviews where funding is agreed.
  - The PCT reported in April 2007 that there were approximately 750 people within the City of York receiving Funded Nursing Care

payments. At the end of March 2006, the council financially supported 285 people in nursing homes, of which 67 were placed in nursing homes outside of the York area.

- This means that there are approximately 465 people in nursing homes who are self funding the costs of their care and potentially could request a Continuing Care assessment which would then require care management involvement, as the council cannot refuse to carry out an assessment under the new national policy.
26. Whilst the exact number of required assessments cannot be estimated it is known that meeting the demands for additional assessments will impact on our capacity to meet other social care responsibilities and in particular, our statutory performance requirements. In order to mitigate this and to cover the additional duties required from the Framework the following action has been taken:
- Start up funding for 4 new half time care management posts across Adults Social Services and Learning Disabilities has been agreed. These posts will focus on Continuing Health Care work and will develop the expertise and skills required to maximise the potential financial benefits for the customers and, where appropriate, for the department. These posts will need be self-financing as from September 2009.
  - The Heads of Adult Services and Learning Disabilities service will be the nominated senior managers for attendance at Independent Review Panels but it is noted that the this additional demand on time cannot be quantified at this stage.
  - The nominated lead for Continuing Care will be a Group Manager Adult Services
  - The nominated lead will represent the department on 3 key monitoring groups – the Yorkshire/Humber LA group; the SHA Joint health and social care group and the ex SHA joint monitoring group.
27. It is recognised that the above commitments will increase demands on key managers time but the department recognises that in order to ensure that the new continuing care policy is implemented equitably, the additional responsibilities on Local Authorities have to be met.
28. There will be an increased demand on Commissioning and Contracting staff as the framework requires social services to assist their PCT commissioning colleagues in developing capacity within local care services markets to meet increased and varied demands for fully funded health care.
29. There is a requirement for additional training at varying levels for staff ranging from Elderly Person Home and Home Care Managers to Care Managers as assessors.

## Corporate Objectives

30. The proposals are in response to a new national initiative but the outcomes from these policy changes should enable more people to be supported safely within their homes and community

### 31. Implications

- **Financial** : The cost of the additional staffing resources outlined in paragraph 8 is £56k in 2007/08 and £75k in a full year. These new posts have been created and funded from within the overall departmental budget. The DoH market analysis indicates that Local Authorities should expect to see a growth in Continuing Care income and on this basis it is expected that by 2009/10 the posts will generate enough additional income to be self financing.
- **Human Resources (HR)**: Recruitment of additional staff will be via the council Recruitment and Selection policy and procedures
- **Equalities**: the national policy meets all equality issues
- **Legal** : PCTs and LAs are required to work within the terms of the national policy and therefore, would be open to legal challenge on decisions, timescales etc.
- **Crime and Disorder** : There are no Crime and Disorder implications
- **Information Technology (IT)** : Changes to the social care database are underway to ensure that the department is able to track and performance manage the additional work
- **Property**: There are no property implications
- **Other** : There are no other implications

## Risk Management

32. There are 2 key areas of risk to consider
- Lack of staff capacity to meet the new and additional duties on the council
  - Capacity to improve income for customers and the council

These will be kept under review as the policy is implemented and in the light of any significant increase in referrals for assessment.

## Recommendations

33. The Executive Member is asked to note the action being taken to meet the new mandatory requirements.
34. A further report will be brought back to the Executive Member in June 2008 to provide an update following six months of implementation of the new policy.

**Contact Details**

**Author:**

Anne Tidd  
Group Manager  
HASS  
Tel No. x4511

**Chief Officer Responsible for the report:**

Bill Hodson  
Director of Housing and Adult Social Services

**Report Approved**

**Date** 22/11/07

*Co-Author's Name*

*Title*

*Dept Name*

*Tel No.*

**Specialist Implications Officer(s)** *List information for all*

*Implication Financial*

*Name* Debbie Mitchell

*Title* Finance Manager

*Tel No.* 554161

**Wards Affected:** *List wards or tick box to indicate all*

**For further information please contact the author of the report**

**Annexes**

1. National Continuing Health Care Policy
2. Decision Support Tool
3. Fast Track Pathway Tool
4. Checklist Tool
5. The National Framework for NHS Continuing Healthcare and NHS funded Nursing Care - Executive summary

Note: Annexes 1-4 have been made available on the Council's website with the electronic version of the agenda for this meeting.

**Background Papers**

None

This page is intentionally left blank

## The National Framework for NHS Continuing Healthcare and NHS funded Nursing Care

### Executive summary

**1. The National Framework.** This sets out the principles and processes of the National Framework for NHS Continuing Healthcare and NHS funded Nursing Care. We will also issue Directions in time for an implementation date of 1 October 2007. Until that date, we are encouraging Strategic Health Authorities (SHAs), Local Authorities (LAs), Primary Care Trusts (PCTs) and NHS Trusts to use the Framework and associated tools to prepare for implementation.

**2. Legal Framework.** We set out the main responsibilities for the NHS and LAs that are in primary legislation, and explain the influence of key court cases. The Coughlan judgment examined the responsibilities of NHS and LAs, particularly in the provision of nursing care. The Grogan judgment examined the interaction between NHS Continuing Healthcare and NHS funded Nursing Care.

**3. Primary Health Need.** We describe how the phrase a 'primary health need' has developed and how this idea helps to make the decision about when someone should receive NHS Continuing Healthcare.

**4. Core Values and Principles.** We set out the main things to remember when assessing somebody and deciding whether they should receive NHS Continuing Healthcare. The individual, the effect their needs have on them, and how they would prefer to be supported, should be kept at the heart of the process. Access to assessment and provision should be fair, consistent and free from discrimination

**5. Eligibility Considerations.** At the heart of this document is the process for deciding whether someone is eligible for NHS Continuing Healthcare or NHS-funded Nursing Care. Assessments should be carried out by a multi-disciplinary team in line with the Core Values and Principles section and taking into account other existing guidance.

**6. Links to other policies.** We point to other areas of law and policy that may be relevant to this Framework, especially around Mental Health.

**7. Care planning and provision.** The PCT should identify and arrange all services required to meet the needs of all individuals who qualify for NHS Continuing Healthcare, and for the health care part of a joint-care package. We set out the key principles in both cases.

**8. Review.** Regular reviews should be carried out, no later than three months following the initial decision, and then at least once a year after that. Some people will need more frequent reviews. We describe this in more detail.

**9. Dispute Resolution.** If there is a disagreement about a decision, or about who pays for necessary care, the PCT's "local resolution" process will usually be the first step. We also describe the other possible steps, if this does not provide a satisfactory solution, or if the person wants to complain separately using the relevant Complaints procedure.

**10. Governance.** Both PCTs and SHAs have roles in overseeing the process, as they do in other areas, and we indicate this in this final part.







## Meeting of Executive Members for Housing and Adult Social Services and Advisory Panel

10<sup>th</sup> December 2007

### Report of the Director of Housing and Adult Social Services **Annual Performance Assessment of Adult Social Services 2006/7**

#### **Purpose of Report**

1. To inform the Executive Member of the outcome of the annual performance rating by the Commission for Social Care Inspection (CSCI) of adult social services in York.

#### **Performance Rating**

2. A Performance Assessment Notebook is compiled by CSCI during the course of the year (in this case 2006/7). This consists of the performance information against key indicators but also the evidence of our progress against national and local priorities.
3. This evidence is then compared against national standards for each of the seven outcomes for adults (to rate the performance in delivering outcomes for people):
  - Improved health and emotional well-being
  - Improved quality of life
  - Making a positive contribution
  - Increased choice and control
  - Freedom from Discrimination and Harassment
  - Economic well-being
  - Maintaining dignity and respectas well as two additional criteria (to rate the capacity for improvement):
  - Leadership
  - Commissioning and Use of Resources
4. CSCI have written to the Director to confirm that the council delivers **GOOD OUTCOMES** for people and that the council has **PROMISING PROSPECTS** for improvement. The combination of these two assessments is a **TWO STAR** rating. The letter from the Chief Inspector is attached as Annex 1.
5. This is a particularly pleasing outcome as members will be aware that the department has been grappling with major challenges and ongoing budget pressures but has still been able to maintain a high level of

performance for customers and to make good progress on modernisation and service improvement.

6. Annex 2 is the summary report of the CSCI findings which sets out the strengths and the areas for development against the 9 criteria set out in paragraph 3. We will be required to report back to CSCI, through our regular business meetings, about progress in tackling the areas for development .
7. CSCI have advised us that they wish to carry out an inspection of older people's services in the first 2 weeks of June 2008. it is expected that this will focus primarily on 3 themes:
  - People are safeguarded (core theme for all inspections)
  - People receive personalised services
  - People have access to preventative services

The last inspection of older people's services was in 2001.

### **Consultation**

8. The report is primarily for information

### **Options**

9. The report is primarily for information

### **Analysis**

10. The evidence provided by CSCI to support this finding is set out in the Performance Assessment Notebook. This is a very lengthy document that runs to 135 pages. The full document is available for members on request.

### **Corporate Priorities**

11. This primarily relates to the priority to Improve the health and lifestyles of the people who live in York, in particular among groups whose levels of health are the poorest.

### **Implications**

12. **Financial** - no implications arising directly from this report although CSCI have commented for the first time that the council's relatively low spending per capita on adult social care could be having an effect on the shortfalls in performance in some areas.

13. **Other**

- **Human Resources** – the areas for improvement include improving performance on reducing sickness absence, addressing recruitment and retention issues and continued training support for staff.
- **Equalities** – monitoring of take up of services by people from ethnic minorities remains a key performance indicator and there is a requirement for the council to ensure there is fair access for all sections of the community.
- **Legal** – no implications arising directly from this report

- **Crime and Disorder** - no implications arising directly from this report
- **Information technology** - no implications arising directly from this report
- **Property** – no implications arising directly from this report
- **Other** – not applicable

**Risk Management**

14. No new risks arising from this report. Sustaining improvement in 2007/8 will be a major challenge, as reported in the 2<sup>nd</sup> monitor, concerning performance against the threshold standards raised for next year's assessment.

**Recommendation**

15. That the Executive Member notes and comments on the annual performance assessment of adult social care by CSCI.

**Reason** : To ensure that the improvements achieved in 2006/7 are recognised by the council and that members are aware of the areas highlighted for improvement in the future.

**Author:**  
Bill Hodson  
Director  
Housing and Adult Social  
Services  
554000.

**Chief Officer Responsible for the report:**  
Bill Hodson  
Director

**Report Approved**  **Date** 27/11/07

Bill Hodson  
Director

**Report Approved**  **Date** 27/11/07

**Specialist Implications Officer(s)**

None

**Wards Affected:** *List wards or tick box to indicate all*

**All**

**For further information please contact the author of the report**

**Background Papers:**

**Annexes**

1. Letter from the Chief Inspector
2. Summary report of 2006/7 Annual Performance Assessment of Social Services for Adult Social Care for the City of York

This page is intentionally left blank



**cscf** Page 87  
St Paul's House  
23 Park Square (South)  
LEEDS  
LS1 2ND

Tel: 0113 220 4600  
Fax: 0113 220 4628  
Email: linda.christon@csci.gsi.gov.uk  
**www.csci.org.uk**

**CONFIDENTIAL: EMBARGOED UNTIL 29 NOVEMBER 2007**

Mr B Hodson  
Director of Housing & Adult Social Services  
York Council  
Customer advice centre  
George Hudson Street  
YORK  
YO1 6ZE

27 Nov 2007

Dear Director/Chief Executive,

Following our letter of 21 October, I am writing to confirm your adult social care performance judgements and rating and arrangements to access the performance indicators and ratings website.

**(1) Performance Judgements and Ratings for Adult Social Care Services**

The performance judgements for your Council are as follows:

Delivering outcomes: **Good**

Capacity for improvement: **Promising**

Your adult social care services performance rating is **2** stars.

The new performance ratings and underlying judgements will be published on 29 November 2007. The summary report for your Council and a copy of this letter will also be available on the CSCI website at [www.csci.org.uk/councilstars](http://www.csci.org.uk/councilstars)

**(2) Access to the Performance Indicators and Performance Ratings Report Website**

You will be able to access the website from 12.01am Tuesday 27 November 2007.

The hyperlink is below. Please follow the instructions on the screen.

<http://www.csci.org.uk/default.aspx?page=1801>

Username: Council Stars  
Password: stars2007

Yours sincerely

A handwritten signature in black ink, appearing to read "Paul Small". The signature is written in a cursive style with a long horizontal stroke at the bottom.

Chief Inspector

Copies:

Chief Executive of SHA (Council to arrange)  
Council's Internal Auditor (Council to arrange)

CC: Bill McCarthy, Council Chief Executive

We welcome your feedback to help us improve our service.  
Please feel free to contact the Customer Service Unit on 0845 015 0120



Making Social Care  
Better for People

Mr B Hodson  
Director of Housing & Adult  
Social Services  
York Council  
Customer advice centre  
George Hudson Street  
YORK  
YO1 6ZE

21st October 2007

Ref: RH/RS

**CONFIDENTIAL: EMBARGOED UNTIL 29 NOVEMBER 2007**

Dear Director,

**SUMMARY REPORT of 2006-07 ANNUAL PERFORMANCE ASSESSMENT  
OF SOCIAL CARE SERVICES FOR ADULTS SERVICES FOR THE CITY OF  
YORK**

**Introduction**

This report summarises the findings of the 2007 annual performance assessment (APA) process for your council. Thank you for the information you provided to support this process, and for the time made available by yourself and your colleagues to discuss relevant issues.

Attached is a revised copy of the performance assessment notebook which provides a record of the process of consideration by CSCI, leading to an overall performance rating. You will have had a previous opportunity to comment on the factual accuracy of the evidence notebook following the Annual Review Meeting.

The judgements outlined in this report support the performance rating notified in the performance rating letter. *The judgements are*

- *Delivering outcomes (formerly Serving People Well) using the LSIF rating scale*

*And*

- *Capacity for Improvement (a combined judgement from the Leadership and the commissioning & use of resources evidence domains)*

The judgement on Delivering Outcomes will contribute to the Audit Commission's CPA rating for the council.

The council is expected to take this report to a meeting of the council within two months of the publication of the ratings (i.e. by 31<sup>st</sup> January 2008) and to make available to the public, preferably with an easy read format available.

### **ADULT SOCIAL CARE PERFORMANCE JUDGEMENTS FOR 2006/07**

<b>Areas for judgement</b>	<b>Grade awarded</b>
<b>Delivering Outcomes</b>	<b>Good</b>
Improved health and emotional well-being	Good
Improved quality of life	Adequate
Making a positive contribution	Good
Increased choice and control	Adequate
Freedom from discrimination or harassment	Good
Economic well-being	Good
Maintaining personal dignity and respect	Good
<b>Capacity to Improve (Combined judgement)</b>	<b>Promising</b>
Leadership	
Commissioning and use of resources	
<b>Star Rating</b>	<b>2 star</b>

The report sets out the high level messages about areas of good performance, areas of improvement over the last year, areas which are priorities for improvement and where appropriate identifies any follow up action CSCI will take.



## KEY STRENGTHS AND AREAS FOR IMPROVEMENT BY PEOPLE USING SERVICES

Key strengths	Key areas for improvement
<b>All people using services</b>	
<ul style="list-style-type: none"> <li>• Healthy and active lifestyles promoted through the Local Area Agreement</li> <li>• Effective care management systems and needs assessment to all customers including self-funders</li> <li>• Effective working relationship with the primary care trust (PCT)</li> <li>• Increased level of support with respect to grant funded services</li> <li>• Sustained performance of the delivery of equipment and adaptations delivered within 7 days</li> <li>• Low numbers of users waiting for the provision of major adaptations</li> <li>• Prompt delivery for minor adaptations</li> <li>• People report feeling safe and secure in their own homes, with a variety of local safety initiatives being taken up</li> <li>• Residents and service users contribute to the planning of services</li> <li>• External and internal council services have regular meetings with residents where ideas and local initiatives explored and created</li> <li>• Consultation and events on identifying the needs of minority and ethnic groups</li> <li>• Customer Information Strategy in place ensuring availability of information enabling choice and control</li> <li>• Clear information through its leaflets and website about the complaints procedures, eligibility criteria and standards of service customers can expect</li> </ul>	<ul style="list-style-type: none"> <li>• Continued development of the 'Healthy City' statement</li> <li>• Single Assessment Process further with evidence of good outcomes</li> <li>• Clients receiving a review</li> <li>• The rate of delayed transfers of care, which remains high to comparators, indicating continued challenge for the Council</li> <li>• Extend provision of extra-care housing</li> <li>• Promotion of volunteering to be developed</li> <li>• Continuation of the process for modernising day services</li> <li>• Further improvement in direct payments and individualised budgets</li> <li>• Further improvement in care management processes – initial response and assessment</li> <li>• The number of people receiving a statement of their needs and how they will be met</li> <li>• Ensure that under-represented groups have fair access to services</li> <li>• Further development around pathways to employment for both users and carers</li> </ul>

<ul style="list-style-type: none"> <li>• Clear eligibility criteria for social care services based on need</li> </ul>	
<b>Older people</b>	
<ul style="list-style-type: none"> <li>• Focused activity for improved health and physical activity</li> <li>• Low numbers of adults and older people being admitted on a permanent basis to residential / nursing care is maintained</li> <li>• Intermediate care services used to prevent admissions to hospital</li> <li>• Good involvement of users with regard to the Long Term Commissioning Strategy and the Older People's Accommodation with Support scheme</li> <li>• Specialist home care and the warden services</li> <li>• Increased access and take up to assistive technology services and telecare services</li> </ul>	<ul style="list-style-type: none"> <li>• Further development of the Fast Response Service</li> <li>• Development and implementation of the Home Care Purchasing &amp; Commissioning restructure</li> <li>• Numbers of older people helped to live at home including the provision of intensive home care</li> <li>• Demonstrate equitability of access and take up of services for people from ethnic minority backgrounds following assessments</li> </ul>
<b>People with learning disabilities</b>	
<ul style="list-style-type: none"> <li>• Valuing People Partnership Board arrangements</li> <li>• Customer engagement through user parliaments, which debate priority issues and feedback to the Board and the council</li> <li>• Numbers of people with a learning disability helped into voluntary work</li> <li>• Information readily available via a new web site</li> <li>• There has been increased investment in learning disability advocacy provision</li> <li>• People with learning disabilities living in supported living and 18 people have moved onto individualised budgets enabling more choice and greater independence</li> </ul>	<ul style="list-style-type: none"> <li>• To continue to reduce the number of people who have learning disabilities who remain in NHS in-patient accommodation</li> <li>• Numbers of users with a learning disability helped to live at home</li> <li>• Numbers of users with a learning disability helped into paid work</li> </ul>
<b>People with mental health problems</b>	
<ul style="list-style-type: none"> <li>• The proportion of drug users retained for 12+ weeks in treatment services</li> </ul>	<ul style="list-style-type: none"> <li>• Continued increase in numbers to plan for the numbers of problem drug misusers is accessing treatment services</li> <li>• Those users with a mental health</li> </ul>

	problem helped to live at home
<b>People with physical and sensory disabilities</b>	
<ul style="list-style-type: none"> <li>• Numbers of users helped to live at home</li> <li>• Services user contribution to advisory group for the Community Equipment Loans service</li> <li>• Take up of direct payments</li> </ul>	
<b>Carers</b>	
<ul style="list-style-type: none"> <li>• Flexible breaks scheme</li> <li>• Increased support to carers of users with mental health problems</li> <li>• Improvement in the numbers of breaks for black and minority ethnic carers</li> <li>• An increase in the numbers of breaks offered through the carers grant across many user groups</li> <li>• Carers' access to the education, training and employment and leisure opportunities through the work of the Carers Employment and Lifelong Learning Project and Network</li> </ul>	<ul style="list-style-type: none"> <li>• Extend the range of services for carers</li> <li>• Continue to progress and review the strategy for the support of carers</li> <li>• To continue to increase the numbers of planned short-term breaks for people with learning disabilities</li> <li>• Access and take up of breaks services for people from black minority ethnic backgrounds</li> <li>• Assessments and reviews for carers, caring for people with learning disabilities</li> </ul>

## **KEY STRENGTHS AND AREAS FOR IMPROVEMENT BY OUTCOME**

### **Improved health and emotional well-being**

The council makes a good contribution to improving people's health and sense of well-being.

The council has been active in engaging older people in healthy lifestyle initiatives. The Physical Activity Plan is an example of this and part of this plan is specifically focused on the people aged 50 plus. The council also reports good working relationships with the primary care trust (PCT) and together with the care services improvement partnership (CSIP) has worked on – care management links with GP practices, improved pathway management for people with long term conditions, medication and integrated fast response services.

The council also provides intermediate care services although this is low in comparison to other councils. The council has explained this is due at least to two factors – firstly due to the financial recovery actions of the PCT, which closed its support to one unit and secondly, the focus for the council has been increasingly to prevent people coming into long term care. This means that intermediate care has been used as a 'step-up' facility more than it has been used as a 'step-down' facility. The past 18 months has been a turbulent time for the health economy in York and this is principally due to the PCT difficulties and consequent closures of beds in York District Hospital. Within this context the council appears to have managed patient pathways well and minimised delays where possible.

Delayed transfers have been a long-standing problem for York. While there have been significant reductions the rates remains comparatively high. Continued work is needed in this area.

A final point to be made under this heading concerns the reviews of clients. The council has not made any improvement on last year's return and remains behind that of comparator councils.

### **Key strengths**

- Range of information, advice and projects promotes healthy and physically active lifestyles
- Identified health outcomes, lifestyles, and the wider determinants of health as priorities and targets within the Local Area Agreement
- Engagement with health partners
- Targeted strategy of intermediate care as part of preventative strategy
- Re-enablement team focus on prevention and independence
- People were retained in drug treatment services for more than 12 weeks

### **Key areas for improvement**

- Further development of the single assessment process in conjunction with PCT
- Clients receiving a review
- Drug mis-users accessing treatment services

- Continued reductions in delayed transfers of care
- To continue to reduce the number of people who have learning disabilities who remain in NHS in-patient accommodation

### **Improved quality of life**

The contribution that the council makes to this outcome is adequate.

The indicators of council performance in this area give mixed messages. The rates of admission to long term care for vulnerable people are low and have fallen over the past year and are two-thirds of that of comparators. This is good performance but must be supported by other evidence that people that would have otherwise been admitted to care are now being supported at home. This has yet to be demonstrated fully. The council indicators on helping people to live at home shows that the proportion of people helped to live at home has fallen. The council does support numerous agencies to provide non-care managed support but there is limited evidence to show how many people are benefiting. The council needs to demonstrate the effectiveness of their approaches to support grant-funded organisations. The council is clear that there are a number of agencies that are supported in this way and include agencies such as the Home Improvement Agency, which is aimed at providing support to owner occupiers who are at risk of coming into long term care settings.

The council has invested in the provision of telecare services that it sees as part of its prevention strategy. It is aimed at preventing the need for admission into care settings and/or more immediately aimed at reducing the demand for home care services that are committed inappropriately. The financial savings that may accrue as a result can then be invested more appropriately.

The council has been effective in the provision of equipment and adaptations including both minor and major adaptations. This is good performance and clearly enables people to remain in their own homes.

The council recognises also that there are problems with respect to the delivery of carer assessments. However, the council reports that it has increased significantly the proportion of short breaks and that this has been due to the introduction of the flexible carer scheme.

The council has shown that people report that they feel safe in York and this is believed to be the result of the safety initiatives undertaken by the council.

### **Key strengths**

- Low numbers of adults and older people being admitted on a permanent basis to residential/nursing care
- Specialist home care – the Promoting Independence Team - and the warden services
- Council's overall multi-faceted plans with respect to prevention
- Successful implementation and delivery of Telecare Services

Performance of the delivery of equipment and adaptations, including minor and major adaptations

- People report feeling safe and secure in their own homes, with a variety of local safety initiatives being taken up
- Numbers of breaks services through the carers grant across many user groups

### **Key areas for improvement**

- Further development of the Fast Response Service
- Council to demonstrate the effectiveness of prevention strategy and grant funded services in supporting people at home including those with a learning disability and a mental health problem
- Extend the range of services for carers
- Continue to progress and review the strategy for the support of carers
- To continue to increase the numbers of planned short-term breaks for people with learning disabilities
- Breaks for carers from black minority ethnic backgrounds
- Numbers of older people helped to live at home including the provision of intensive home care

### **Making a positive contribution**

The outcomes in this area are good.

The council has demonstrated good consultation and involvement mechanisms for the people it serves. It has established partnership boards for older people services and another for learning disability services. The Older People's Assembly contributes to discussions and is involved in the partnership board. The council also reports that in its modernisation plan for day services for the service group areas that service users, their carers and relatives have been fully involved in the planning process. Indeed this process in itself has caused delays as the council endeavours to address the various agendas pertaining to day services. The council has also demonstrated the way it has responded to suggestions from these groups and complaints. For instance, the consultation on telecare led to the instigation of the demonstration flat, and complaints about the timing and communication on respite and home care matters have changed council processes. Also changes have been made in the way direct payments are accessed.

The council also reports that any changes to services, such as the implementation of phase 3 of the closure programme for the long stay NHS campuses have ensured that all service users have been subject to a person centred planning processes.

### **Key strengths**

- Representation on the Valuing People Partnership Board for people with learning disabilities
- Residents and service users contribution to the planning of services
- External and internal council services have regular meetings with residents where ideas and local initiatives explored and created

- Consultation events in order to engage people from minority ethnic backgrounds
- Contributions enabled through user parliaments, which debate priority issues and feedback to the partnership boards and the council
- Numbers of users with a learning disability helped into voluntary work
- Contributions by people who have physical and sensory disabilities regarding equipment loans service

### **Key areas for improvement**

- Promotion of volunteering
- Continuation of the process of modernising and re-shaping day services
- Numbers of people with a learning disability helped into paid work

### **Increased choice and control**

The outcomes in this area are adequate.

Care assessment and management processes appear to be more effective for some service areas in York. Assessments commence comparatively promptly and are completed more quickly. However, this improvement is not uniform. Older people's assessments are less prompt than comparator councils and services being delivered within 4 weeks of assessments have seen only marginal improvement although comparative with other councils. Furthermore, while most people receive a statement of their needs and how they will be met there remains room for improvement – particularly when compared with other councils. The council has shown that it has an effective and comprehensive out of hours services. Aspects of this has been supplied by North Yorkshire County Council through their commissioned Emergency Duty Service (EDT), which is able to access emergency services and undertake assessments. The most recent development has been that EDT can now access the electronic service user database to enable more effective and appropriate intervention when needed.

With respect to the introduction of the single assessment process the council acknowledges that there has been slippage on the implementation timetable. There have been a number of barriers to full implementation – some of which were financial and others that were due to the reorganisation of the PCT and financial challenges facing the Trust.

The council's performance with respect to the uptake of direct payments has improved on last year's return having doubled. However, the council explains that the appetite for direct payments, especially amongst older people remains low. There appears to be customer resistance to the use of direct payments. However, the council has more enthusiastically embraced the opportunities for self-directed support offered through the pilot 'in control' programme. This has been introduced through the services for people with learning disabilities and will be shortly offered to people with sensory and physical disabilities. Initial feedback has been very positive and the programme has the full support of Members. The programme has demonstrated that service users and their families have been very effective and very efficient in utilising the resources

made available for them to manage. This is a significant cultural shift for all three sectors – service user, council provider and independent provider. The project is still in its pilot phases but the council is hoping to introduce this as a real option for many service users. This together with the day services modernisation programme are 3-year programmes that are managed by respective project boards.

### **Key strengths**

- Investment in learning disability advocacy provision
- Good range of services both available and under review for users
- People with a learning disabilities living in supported living
- Successful pilot 'in-control' programme for people with learning disabilities and their carers having individualised budgets to manage their care

### **Key areas for improvement**

- Responsiveness and assessment processes in services for older people
- Assessments or reviews for carers of people with learning disabilities
- Full implementation of the Single Assessment Process
- The numbers of people receiving a statement of their needs and how they will be met
- Further improvement in direct payments and individualised budgets

### **Freedom from discrimination or harassment**

The outcomes in this area are good.

The council has maintained its eligibility criteria under Fair Access to Care Services at 'moderate'. This is laudable and is clear from their public information about services provided from the council. However, it is understood that care management staff have been asked to more stringently apply the criteria than was previous practice. The council also provides their advice and services universally irrespective of whether people making enquiries are likely to be self-funders. This is good, although we note that the council is not able to disaggregate the proportion of enquiries made by self-funder clients and determine whether appropriate advice is given.

The council has not implemented all of the Government's equality standards although it intends to have 4 of the 5 standards in place by 31 March 2008. The last standard will be in place for the following year. The council has also been active to ensure that people from minority backgrounds have equitable access to services. It has engaged minority communities through two events held in York. There are only small numbers of people from black and ethnic minority backgrounds in the York district. The national indicators do not serve York well in this regard. Because of the small numbers of people from minority backgrounds, small variations in the numbers of people seen or assisted can have a disproportionate impact on the indicator. For this reason it is important for the council to devise its own means of demonstrating that its services are equitably accessible to people from minority backgrounds.



Despite this, we acknowledge that the council is mindful that it must ensure that firstly services are able to meet their needs and secondly, it endeavours to use person centred approaches to ensure that people's needs are appropriately met.

### **Key strengths**

- Council has clear eligibility criteria for social care services based on need and is maintaining the FACS criteria at a moderate level which is clearly explained in the council's leaflets and on their website
- There is good compliance with the Disability Discrimination Act

### **Key areas for improvement**

- Take up of services following an assessment by people from minority ethnic backgrounds
- The percentage of adults assessed whose ethnicity was not stated
- Full implementation of the five standards of the Government's equality standards

### **Economic well being**

The outcomes in this area are good.

The council reports that the number of disputes between the council and the health partners on matters concerning continuing care are low. There is a clear escalation policy and arrangements are in place to ensure that people's needs continue to be met while the matters are resolved.

The council endeavours to support people into employment through appropriate education and training opportunities. However, the numbers of customers being supported through to employment or volunteer work remain low. The council endeavours to support carers in this way also. The council has also been very active in ensuring that people receive their entitled benefits. There has been a significant increase in the numbers of people claiming and this in turn has meant that people can be more independent of council support. The council has also endeavoured to support people with learning disabilities in their own homes through the supporting people programme.

### **Key strengths**

- The Council's Carers Employment and Lifelong Learning Project and Network which endeavours to ensure that carers have access to the education, training and employment and leisure opportunities
- Additional income and benefits for people through the work of the benefits advice team

### **Key areas for improvement**

- Further development of pathways to employment for both users and carers

**Maintaining personal dignity and respect**

The outcomes in this area are good.

The council has been proactive in establishing a York and North Yorkshire safeguarding committee that is comprised of councils' representatives, the police and health services. The Commission is also represented on this. This group has established the agreed procedures and evidence both anecdotally and statistically shows that these arrangements are effective. That being said it appears that the council needs to do more to assure itself that more of its staff are suitably trained in these procedures and furthermore that it has successfully engaged the independent sector. While the council ensures that the independent sector complies with these requirements through contracting arrangements there is minimal engagement in terms of formal training being offered through the council to independent carer services staff.

**Key strengths**

- A joint Safeguarding Board covers the areas for York and North Yorkshire council areas
- Availability of single rooms for the vast majority of service users in York

**Key areas for improvement**

- Engage with independent sector staff on training on safeguarding issues and procedures

**Capacity to improve**

The council's capacity to improve services further is promising.

The council is at the first stages of implementing its electronic care record systems. This is linked to the performance management systems. The new system went live in July 2007 and as yet the real impact of this is yet to be seen. The council also continues to face challenges with respect to its staffing. York, as an area, is hard to recruit to because of the high cost of living. The council has reported high turnover rates of staff and also high rates of sickness absences. These are matters that the council need to focus on as it is linked to the council's overall performance. The council has recognised these as priority areas and has agreed a joint pilot project with the Health and Safety Executive in order to target its work with respect to stress related illness. The council reports that there is evidence of some early wins in that since the last quarter of the 2006/07-year improvements are evident in the reduced levels of absenteeism.

The council has established a new commissioning approach and used appropriate demographic data to ascertain the projected needs in the future. The council, its members and staff are fully engaged in this process and the resultant 15-year planning document is a good planning base. However, due to the challenges that have faced the PCT it is only at the beginning phases of re-engaging health partners in this process.

The council has also been very effective in its new approach to home care. The new commissioning arrangements have resulted in more cost-effective services and importantly it reports that service users receive home care support from a single provider. Satisfaction surveys indicate that the vast majority of people report that care workers arrive on time, provide the care that has been agreed and carry the tasks out to the satisfaction of the user.

Overall the council has recovered from projected overspends to a balanced budget. This has been achieved through better commissioning, better outcomes for service users, more involvement of service users in service planning and with a vision that in the future saved funds will be able to be invested in social care preventative services. That being said York council spends less per capita on adult social care than other councils. It might be argued that some of the shortfalls on expenditure might also account for some of the shortfalls in performance against national indicators.

### **Key strengths**

#### Leadership

- Broad DASS role that encompasses social care, diversity, health and housing issues within the council area
- Strategic planning and good use of combined resources with partners which are congruent with that of the Government's objectives
- Full implementation of the action plan that emerged from the learning n disability inspection in 2006

#### Commissioning and use of resources

- Effective care management systems and needs assessment to all customers including self-funders
- Effective budget planning and use of resources including demonstrable value for money and comparative unit costs
- Effective use of commissioning standards for providers of services

### **Key areas for improvement**

#### Leadership

- Health and social care economy to deliver on the outcomes for adults and older people
- Development of the new Mental Health Partnership Board
- Recruitment, retention and absenteeism issues for staff
- Engagement and training with independent sector staff
- Implementation and monitoring of the electronic record system

#### Commissioning and use of resources

- Delivery of the outcomes as outlined in the commissioning strategy
- Continued focus on the delivery of home care reconfiguration

### **Follow up action in 2007-08**

In line with service inspection criteria we are considering undertaking a service inspection of your council.

Progress on the key areas or improvement will be monitored through meetings between CSCI and the council.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Linda Christon', written in a cursive style.

**LINDA CHRISTON**  
**Regional Director**  
**Commission for Social Care Inspection**