

# HOUSING LIN POLICY BRIEFING

## JIP / RIEP Transforming the Delivery of Services

### Purpose

The Local Government and Public Involvement in Health Act 2008 is transforming the landscape of delivering local services and joined up working between local agencies to meet local priorities. This briefing note deals with some of the key changes in how health, social care and supported housing services are being commissioned, funded and how agencies performance will be judged in future. The note identifies the implications for housing providers of the key changes to social care commissioning.

### The Context for Change

Despite a massive injection of funding over the past 10 years there is a continuing dissatisfaction with the quality of public services- their responsiveness, reliability and relevance. People still have to make sense of a complex system, which is judged more often by the volume of services delivered rather than the outcomes achieved. The current model of care and support is unaffordable in the face of demographic change. Central and Local Government are committed to a transformation in the way services are delivered.

This briefing will focus on 6 key aspects to the changes that **commissioners and providers** need to come to terms with if they are to make the most of the opportunities and be seen as good partners to work with. The briefing note explains:

- How are agencies going to be judged?
- How are partnerships going to be organised and driven forward?
- How are local needs for health, housing and social care going to be assessed?
- How are local authorities being supported to deliver efficiencies?
- How are SP services going to be funded?
- How are services going to be delivered?

The note also provides a glossary with a bookmark hyperlink to the following terms:

[National Indicators](#)

[Comprehensive Area Assessment \(CAA\)](#)

[Public Service Agreements \(PSA\) and Departmental Strategic Objectives \(DSO\)](#)

[Rationale for PSA 16](#)  
[Local Strategic Partnership](#)  
[Local Area Agreements \(LAA\)](#)  
[Joint Strategic Needs Assessment \(JSNA\)](#)  
[Area Based Grant](#)  
[National Improvement and Efficiency strategy](#)  
[Regional Improvement and Efficiency Partnerships](#)  
[Joint Improvement Partnership \(JIP\)](#)  
[Personalisation Agenda](#)

## **HOW ARE AGENCIES GOING TO BE JUDGED? – The New Local Authority Performance Framework**

### **The National Indicators**

The Government has reduced the number of Best Value Performance Indicators and Performance Assessment framework measures to a set of 198 National Indicators. The outcomes they measure are in effect the Government's statement of its priorities for local government and its partners over the next 3 years.

The local authority was required to choose from the 'national set' up to 35 designated local indicators as the basis for negotiating with its partners and the Government Office the stretch targets it will strive to meet to improve delivery by local services. Each area signed a Local Area Agreement by June 2008 setting out the things which have to get better in the area.

Local Authorities will still be judged on all 198 indicators not just their designated priorities.

The Audit Commission is introducing from 2009 a revised inspection regime called the Comprehensive Area Assessment.

### **The Comprehensive Area Assessment (CAA)**

The CAA will check that councils and the other organisations are keeping the promises made in their Local Area Agreement.

It will tell the public what is going fine and what might go wrong.

It will include looking carefully at the needs of people who are at risk of being abused or hurt and it will help to make sure people get equal chances in life.

It will also make checks on the things the council does alone or together with other organisations, including:

- If they help people keep healthy and well
- If they help people keep safe
- If they are making places where people want to live and work
- If there are enough homes for people to live in
- If they make life good for children and older people.

## **What will the CAA include?**

It will check on how well big organisations work together to improve the area as a whole. The main organisations it will look at are:

- councils
- health services
- police forces
- and other organisations that run local public services

The Audit Commission will also carry out an area risk assessment which will identify what things are likely to get better and what the problems are that might stop things from getting better. It might say something about:

- health care
- more affordable or better homes
- less crime
- better chances to learn and train
- finding more money for creating jobs and skills
- Making the area a cleaner, 'greener' place.

The old way of measuring how well councils and other organisations are doing will finish by the start of 2009. The new way of measuring how well councils and other organisations are doing will start on 1 April 2009. The first new CAA reports will appear in autumn 2009.

The introduction of Comprehensive Area Assessments will align the performance management regime with the LAA indicators approach, assessing progress and performance against local priorities and casting the assessment beyond Councils to include the agencies working with them to deliver LAA ambitions.

## **HOW ARE PARTNERSHIPS GOING TO BE ORGANISED? – National Priorities and Local decision-making**

### **Public Service Agreements (PSA) and Departmental Strategic Objectives (DSO)**

The PSA's were developed as part of the triennial Comprehensive Spending Review, in which central government set out its strategic objectives and high-level priorities for 2008-2011. The 30 PSA's provide a new focus and a mechanism to prioritise specific issues both locally and nationally. The PSA's have defined Government priorities, which require a cross Departmental response, such as tackling social exclusion. DSO's define strategic objectives which are seen as single Departmental responsibilities.

For example PSA16 sets out a new incentive to do more joint working across different services and to work together to address the complex problems vulnerable people often face in achieving stable accommodation, employment, education or training.

## **Rationale for PSA 16**

Some people in society have a combination of problems and circumstances, such as poor mental and physical health, limited skills, unstable housing or an offending history. Their problems can cut them off from the choices and chances that most of us take for granted, and they may find themselves unable to participate fully in society.

A home and a job represent the minimum of what most people need to enjoy ordinary productive lives. A job can provide financial stability, an opportunity to make a contribution to society; access to wider social networks and can build confidence and self-esteem. And a home provides the security, stability and independence to get on in life. But for socially excluded groups, achieving and sustaining a home and a job is not easy.

Government intends to use PSA 16 to make sure those disadvantaged groups are not left behind. It will help at national and local level to prioritise vulnerable groups. Having the socially excluded adults PSA indicators in the National Indicator Set means that all local areas have to report on them, and be assessed on them through the Comprehensive Area Assessment. So there will be a new transparency about how life chances of vulnerable adults are improving in each local area.

## **The Local Strategic Partnership**

The LSP is a partnership between the local statutory agencies, the Third Sector, business and the community to set strategies and priorities under an overarching Sustainable Communities Strategy.

LSP's have a wide ranging membership. The detailed structure, governance arrangements and membership vary from area to area, often reflecting the previous arrangements for joint working between "top tier" local authorities and their partners such as Health and Probation services. There will be different links to a range of other partnerships such as the Children's Trusts, Crime & Disorder reduction Partnerships, Health / Wellbeing.

The LSP is formally responsible for negotiating with the Government's Regional Office to agree the Local area agreement for their local area. Only the "top tier" authority is required to have an LAA but District Councils are included in their development.

## **The Local Area Agreements (LAA)**

A CLG Minister recently summarised the central principle of LAA's. He said that "Each LAA will be unique, tailored differently for each place... What they all have in common, however, is that they will capture the purpose and the leadership that their local authority can give".

CLG has also summarised the important role of the Local Area Agreement as: -  
"To join together the totality of public services in the area & through shared ambitions, pooled funding, better coordination & innovation to drive measurable improvements in public services, better access, customer satisfaction and greater efficiency."

The LAA is a required “delivery agreement” between central and local government. It has been given a statutory basis under the Local Government and Public Involvement in Health Act 2008.

The Government has signaled the importance of the LAAs as a means to deliver more effective local services and to improve the performance of local government by aligning spend on the most critical targets. They are a means for “pooling” previously separate revenue streams. They allow greater local autonomy and discretion in funding services, initiatives and programmes that meet priority needs of local communities whilst contributing to national priorities. LAA’s are to simplify the way services are delivered and measured.

The LAA builds on the development of the Local Strategic Partnership machinery to lead the process of encouraging partners to pool or align funding to achieve added value from cross cutting initiatives. Complex problems need joined up solutions. The LAA offers the opportunity to develop more coherent and integrated government.

The LAA sets 4 priority service blocks or thematic partnership issues that Local Authorities are expected to show how they are going to tackle. The priority themes are Children and Young People, Safer and Stronger Communities, Economic Development and the Environment, Healthier Communities and Older People.

The new LAA is based on local areas choosing up to 35 designated indicators from the 198 National Indicators. The LAA, which will last for 3 years, has to be negotiated with and signed off by the Government Office for the region.

The Key Performance Indicators related to housing, health and community wellbeing are included in Appendix 1 to this note. Housing related support services provided can also deliver against a number of other relevant indicators on domestic violence; re-offending; worklessness; use of temporary accommodation and satisfaction of 65+ year olds with their home and neighbourhood.

The LAA is meant to emphasise a new focus on measurable, better OUTCOMES on the ground for priority target groups through encouraging cross cutting solutions, innovative services and a renewed emphasis on prevention.

Providers can help evidence the contribution that local services can and do make to care & support as well as tackling many social inclusion objectives.

The Government has also made provision for Multi Area Agreements to facilitate a route to joint working across Local Authority boundaries. These are a voluntary option for local authorities. Early examples have focussed on economic development, housing and regeneration. It is not clear but they may have particular relevance to meeting the need for specialist, high cost but low incidence services for some groups of vulnerable people.

## **HOW ARE LOCAL NEEDS FOR HEALTH, HOUSING AND SOCIAL CARE GOING TO BE ASSESSED?**

### **The Joint Strategic Needs Assessment (JSNA)**

The Local Government and Public Involvement in Health Act 2008 formally established the requirement on all Local Authorities with Social Services Responsibilities (LASSRs), Practice Based Commissioners and Primary Care Trusts to undertake a Joint Strategic Needs Assessment.

The JSNA will provide the basis for joint commissioning of more integrated services “closer to home”. The JSNA should strengthen the relevance of plans for developing new housing by evidencing the needs of vulnerable groups and promoting their resolution through the local housing strategies.

The JSNA plays a significant role in enabling partners to determine shared priorities for inclusion in local sustainable community strategies. It also helps shape the future priorities that partners need to include in their Local Area Agreement. It is intended to help achieve:

- a shift towards services that are personal, sensitive to individual need and that maintain independence and dignity;
- a strategic reorientation towards promoting health and well-being, investing now to reduce future ill health costs;
- a stronger focus on commissioning services and interventions that will achieve better health and improve the quality of life with all partners working together to promote inclusion and tackle health inequalities.

This JSNA is the first step in helping to accomplish this. It provides analyses of data to show the health and well-being status of local communities; defines where inequities exist; and incorporates local community views around priorities for service improvement. It is therefore a robust evidence-base for local partners to agree the strategic direction of service delivery and to use it to inform future commissioning and to improve outcomes for the local residents.

Early examples of JSNA's have taken a broad view of health and well-being, considering the wider determinants of health and quality of life.

The JSNA should include a detailed assessment of the needs for supported housing and housing related support:

- The needs of specific vulnerable groups in the local population, including any major gaps in provision
- Existing supply of housing related support services
- Plans for housing development.

This will involve the closer integration over time with the Strategic Housing Authorities responsibility to undertake a Social Housing Market Assessment.

Developing the JSNA is an iterative process and many local partnerships have declared that, this time round, all is not perfect. Some data is not available in the form they would

like it and there are more powerful analytical tools that would support better identification and understanding of geo-demographic groups for the effective targeting of resources. The focus for this JSNA has been to streamline existing intelligence but the intention is to strengthen population segmentation, forecasting and community involvement, including more comprehensive engagement with housing agencies, in future.

## **HOW ARE SUPPORTING PEOPLE SERVICES GOING TO BE FUNDED?**

### **The Area Based Grant**

Communities and Local Government (CLG) are testing out a new way of funding local Supporting People programmes. The key features of the new Area Based Grant regime will be: -

- Funding paid to local areas without the current grant conditions
- Meeting specific needs rather than complying with Specific Grant Conditions
- Fostering a better understanding of the impact that housing support can have in tackling issues and avoiding costs across a range of local service areas
- Building on the greater stability provided by the three year funding settlement to enable better planning at the local level
- It's an Administering Authority Grant and is not specifically tied to the Local Area Agreement structure
- SP will form between 40-70% of the ABG depending on the area
- 10 National Pathfinders to explore the opportunities and risks

Concerns have been expressed about the potential impact on the third sector providers of preventative services for marginal groups of the loss of the ring-fenced funding subject to specific grant Conditions. The main concerns are:

- The SP programme's non-statutory footing – there are no legal duties requiring the provision of housing-related support
- The Third Sector - SP is currently the largest domestic revenue stream of Government investment in the sector (over £1bn annually)
- Possible loss of services for vulnerable or socially excluded client groups – concern that funds might be diverted away from politically “unpopular” groups
- Loss of the hard won identity for the SP Programme and the housing related support services it commissions

CLG are finding that Pathfinder Authorities expect it to impact on:

- Governance Arrangements – integrating with Local Strategic Partnership structures or strengthening reporting and accountability links
- Eligibility Criteria for services
- Commissioning of more innovative services facilitating access to education, employment or training
- Joint funding of more integrated services across the housing and social care boundary

The new funding regime will be rolled out nationally in 2009-10 unless serious concerns are raised by the Pathfinder Projects, causing Ministers to defer a decision.

## **HOW ARE LOCAL AUTHORITIES BEING SUPPORTED TO DELIVER EFFICIENCIES?**

### **Improvement and Efficiency strategy**

Public services and care services in particular are facing increasing demands; higher customer expectations of the quality of services; decreasing levels of new investment available to tackle the shortcomings of care services. The National Improvement and Efficiency strategy is aimed at achieving significant cashable savings to bolster much needed front line services and reduce the pressure on general taxation.

The Department of Health summarises its priorities for social care for 2008 as personalisation, early intervention, dementia & Long Term Conditions, dignity and carers. Delivering these priorities requires a radical transformation of adult social care and how it works with its key partners. The shift will require adult social care departments to spend current resources very differently and adopt a leadership role for the health and well being of the wider community that is council wide and focused on place and people.

The purpose of the RIEP and the JIP is to foster improvement, development and innovation in social care practice. It supports the wider aim of improving the health and well-being of the whole population. The JIP works within the context of the Local Government White Paper 'Strong and Prosperous Communities', the National Improvement & Efficiency Strategy and the Health White Paper 'Our Health, Our Care, Our Say'. Their aim is to see a significant step change in performance improvement in adult social care services during CSR 07.

The CSR 2007 settlement requires national and local government to achieve 3% savings per year over the next 3 years.

Local government has taken a leading role in establishing the regional machinery to support this effort to deliver improved services by achieving cashable efficiency savings.

### **Regional Improvement and Efficiency Partnerships**

There are 9 Regional Improvement and Efficiency Partnerships set up to deliver improvement and efficiency regionally by the sector itself.

The Partnerships act as the hub to link the IDeA, Government Office, Local Authorities and other public sector agencies. The role of the RIEP is to deliver the support that local authorities need to meet the challenge of improving services, secure efficiencies and achieving their priorities.

RIEP's are developing three year strategies, drawing heavily on the LAA priorities, to improve the quality of life and to deliver better public services over the next 3 years. They will work by creating opportunities to share learning, facilitate joint working and provide peer support in a way sensitive to the unique needs of the local councils.



The RIEP's have been allocated significant resources to deliver this challenging agenda and have put in place governance structures to ensure they are led by Elected Members and supported by Chief Executives and key partners across the region.

The RIEP's are relatively new partnership and are developing differently to reflect their different regional needs, context and make-up but share a common ambition to focus their resources on supporting innovation and efficiency as a means to deliver excellent LAA's.

The opportunity exists for the Partnership to add real value to the improvement and efficiency agenda by regionally commissioning work to drive forward key issues that are important in the region.

### **The Joint Improvement Partnership (JIP)**

The JIP is a national partnership of organisations involved in improving services within social care. The JIP partners are:

- Association of Directors of Adult Social Services (ADASS)
- Care Services Improvement Partnership (CSIP)
- Commission for Social Care Inspection (CSCI)
- English Community Care Association (ECCA)
- Improvement and Development Agency for local government (IDeA)
- Local Government Association (LGA)
- NHS Institute for Innovation and Improvement
- Skills for Care and Development
- Social Care Institute for Excellence (SCIE)

The Joint Improvement Partnership website offers a series of assessments of the strengths of local organisations in the following areas:

- Leadership Dimension
- Commissioning
- Aligning and Maximising Resources
- Local Area Agreements
- Promoting Independence

Locally, the JIP is seen as the major delivery partner of the RIEP for improvement work in relation to adult social care. It is charged with:

- Accelerating the pace of improvement and targeting it where capacity to improve is lacking.
- Promoting and coordinating the range of high quality support available to organisations - mainly at no cost to the recipient - from existing agencies.
- Promoting the culture that seeking support to deliver better services for users is a sign of strength not weakness.

To deliver these national priorities locally will require close work not just with health but many other partners (in particular housing and employment). All of this will need to be supported by strong leadership from the Directors of Adult Social Care (DASS) and

Local Area Agreements (LAAs) will need to be used as vehicles to drive change and improvement for all local citizens.

JIP's are committed to promoting excellence across all services and providers in the region and in doing this will draw on research and evidence-based approaches. The intention is to work with:

- Existing regional networks to develop regional support for the implementation and use of evidence and knowledge in inspection, commissioning, service delivery and practice.
- Key people from across the region who are able to take on a strategic role of developing practice as well as operational implementation - designated as 'Regional Champions'.

## **HOW ARE SERVICES GOING TO BE DELIVERED? – Transforming Social Care**

### **The Personalisation Agenda**

The way services are to be delivered is also going to undergo radical change. Service users are being seen as experts in their own problems and the idea of Self Directed Support has grown in importance.

There are four areas on which councils and their partners should focus to help make sure services become more personalised and to get the right results for people.

- Universal Services
- Early Intervention and Prevention services
- Self directed support
- Social Inclusion and Community Engagement

Promoting recovery and independence are the cornerstones of policy, reducing the reliance on expensive institutional care by providing more flexible responses that are sensitive to individuals' changing abilities and needs. "More Voice, Greater Choice" is an important theme for the government in putting service users at the heart of the health and social care process.

New initiatives such as Individual Budget pilots in Social Care and Supporting People services sit alongside work to encourage the self management of long term health conditions. The limited evidence gathered so far from these pilots has shown that providers who put their service users at the heart of the process are more likely to have service users who continue to buy their services.

Recent advice from the Department of Health makes clear that personalizing services "means having services available to meet people's needs rather than people having to fit in with the things on offer. People who need support should be able to choose who provides that support, and control when and where the services are provided. The right information and advice needs to be available to help people decide. Some people will need extra help to negotiate their support and may need advocates to help them. It is

important to be safe, and guaranteeing this will be an important role for the local council and local community. However, it is important that people can take responsibility for themselves and that councils and other advisers are not limiting in their advice about what is possible.

There is a guide for local councils to use which make sure this can be done safely and that people can be supported to make decisions (*Independence, choice and risk: a guide to best practice in supported decision making*). Systems should be easy to follow and everyone involved should work together with the person at the centre of the plan.

**This is true whether the council is providing the support or people are buying the services themselves.** To do this planning, people (or their advocates and supporters) need to understand what money is available to spend on their support. If it is their own money, they need to know what support there is locally, and that it is of a high quality and safe for them to choose. The same is true if some or all of this money comes from the council, people have a choice to spend part or all of the money in a way that they choose.”

Some SP Teams will be working with providers to promote the personalisation agenda in current delivery arrangements before extending the Individual Budgets approach – it’s a strategy for improving services and securing the current range of service choice

This agenda will be driven through the Quality Assessment Framework (QAF) and the Service User Participation strategy.

The personalisation agenda should foster increased assertiveness and self confidence – it should therefore result in increased tenancy sustainment and better life choices. People can make their own plans for services with the money from the council. They can also get together with friends to make the plans together, or they can ask an agent or the council to arrange things for them.

*Putting People First* is clear that these areas link together. To make sure change is successful all of them have to be in place to ensure people can have the right quality of life.

## REFERENCES AND WEB LINKS

You can supplement your understanding of all the issues discussed in this briefing note by exploring the websites from:

- the Audit Commission, [www.audit-commission.gov.uk](http://www.audit-commission.gov.uk)
- Local Government Association, [www.lga.gov.uk](http://www.lga.gov.uk)
- Care Services Improvement Partnership Commissioning e-book, [www.networks.csip.org.uk/BetterCommissioning/Commissioninge-book](http://www.networks.csip.org.uk/BetterCommissioning/Commissioninge-book)
- Joint Improvement Partnership, [www.jointimprovementpartnership.org.uk](http://www.jointimprovementpartnership.org.uk)
- National Audit Office, [www.nao.org.uk](http://www.nao.org.uk)
- Improvement & Development Agency, [www.idea.gov.uk](http://www.idea.gov.uk)
- SOLACE, [www.solace.org.uk](http://www.solace.org.uk)
- Research into Practice for Adults, [www.ripfa.org.uk](http://www.ripfa.org.uk)
- Joseph Rowntree Foundation, [www.jrf.org.uk](http://www.jrf.org.uk)

Substantial policy briefing and other material can also be found under the Government department websites at:

- the Cabinet Office, [www.cabinetoffice.gov.uk](http://www.cabinetoffice.gov.uk)
- Communities & Local Government, [www.communities.gov.uk](http://www.communities.gov.uk)
- Children Schools and Families, [www.dcsf.gov.uk](http://www.dcsf.gov.uk)
- Department of Health, [www.dh.gov.uk](http://www.dh.gov.uk)

The local work of the RIEP's and JIP's is accessible from the Government Office for the Region and the Regional Assembly websites.

## FURTHER INFORMATION

If you would like further to receive further briefings from the Housing LIN and/or information on our national/regional events and associated learning tools and resources, please email us at [housing@csip.org.uk](mailto:housing@csip.org.uk) or write to Housing LIN, CSIP Networks, Department of Health, 3<sup>rd</sup> Floor, Wellington House, 133-155 Waterloo Road, London SE1 8UG or visit [www.networks.csip.org.uk/housing](http://www.networks.csip.org.uk/housing).

## Appendix 1

National indicators relevant to housing-related support services.  
Highlighted indicators are NHS 'vital signs'.

Number	Indicator	Govt ref
<b>Safer Communities</b>		
NI 39	Alcohol-harm related hospital admission rates	PSA 25
NI 40	Drug users in effective treatment	PSA 25
NI 18	Adult re-offending rates for those under probation supervision	PSA 23
<b>Adult Health and Well-being</b>		
NI 119	Self-reported measure of people's overall health and wellbeing	DH DSO
NI 124	People with a long-term condition supported to be independent and in control of their condition	DH DSO
NI 125	Achieving independence for older people through rehabilitation/intermediate care	PSA 18
NI 131	Delayed transfers of care from hospitals	DH DSO
NI 132	Timeliness of social care assessment	DH DSO
NI 133	Timeliness of social care packages	DH DSO
NI 134	The number of emergency bed days per head of weighted population	DH DSO
NI 136	People supported to live independently through social services (all ages)	DH DSO
NI 137	Healthy life expectancy at age 65	PSA 17
NI 138	Satisfaction of people over 65 with both home and neighbourhood	PSA 17
NI 139	People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently	PSA 17
<b>Tackling exclusion and promoting equality</b>		
NI 145	Adults with learning difficulties in settled accommodation	PSA 16
NI 146	Adults with learning difficulties in employment	PSA 16
NI 149	Adults in contact with secondary mental health services in settled accommodation	PSA 16
NI 150	Adults in contact with secondary mental health services in employment	PSA 16
NI 141	Number of vulnerable people achieving independent living	CLG DSO
NI 142	Number of vulnerable people supported to maintain independent living	PSA 17

<b>Number</b>	<b>Indicator</b>	<b>Govt ref</b>
<b>Stronger communities</b>		
NI 2	Percentage of people who feel that they belong to their neighbourhood	PSA 21
<b>Local economy</b>		
NI 156	Number of households living in temporary accommodation	PSA 20
NI 158	Percentage decent council homes	CLG DSO
<b>Environmental sustainability</b>		
NI 187	Tackling fuel poverty – people receiving income based benefits living in homes with a low energy efficiency	Defra, DSO