HSU

STRATEGIC INNOVATION & PEER LEARNING
In housing, health, care and support

TOOLKIT

A LIGHT TOUCH AUDIT

TEMPLATE

DH Department of Health

SOUTH WEST
REGIONAL IMPROVEMENT
& EFFICIENCY PARTNERSHIP

directors of
adass
adult social services

Housing LIN

Toward an Informed Housing, Health, Care and Support Commissioning Plan for Older People in Local Authorities

Using 'Light Touch Audits' - A Technical Briefing Sheet

Introduction

1.1 The Housing Support Unit (HSU) has been providing extensive support to a number of local authority areas in the South West to help them create integrated housing, health, care and support strategies and commissioning plans. The exact nature of the work and type of support offered has varied from authority to authority, depending on the nature of the challenges they are facing and their current configuration of services.

1.2 The background and rationale for this targeted intervention that spanned the period from November 2010 to March 2011, together with details of the specific support offered in each authority and a summary of what has been achieved, is covered in the HSU summary report[1].

1.3 However, in addition to this work the HSU were given a brief and a small amount of resource to assess progress in the remaining authorities in the South West. These were the authorities that were seen as further along the path of responding to the demands of planning and delivering services to an ageing population with declining resources.

1.4 The challenge for the HSU was to develop a simple but thorough methodology to assess their progress to this moment in time, and to add to the total picture set out in the HSU summary report. The creation of a 'Light Touch Audit' tool has been the HSU response to this challenge.

What is a 'Light Touch Audit'?

2.1 The Light Touch Audit (LTA) is a simple framework devised by the HSU team of consultants to summarise a two-hour conversation with the key commissioners in housing, health, care and support in each authority, together with any subsequent data/policies/paperwork supplied.

2.2 The LTA is a snapshot at one moment in time of a self-assessment by the key commissioners in the authority of the 'state-of-the-nation' in integrated housing, health, care and support. It is not an independent verification by the HSU consultants.

2.3 The LTA aims to provide an indication of future problems or projects that need to be tackled.

What does an LTA cover?

3.1 The framework for the LTA was constructed from initial learning within the HSU consultancy team that suggested there were 17 key elements of any integrated housing strategy for older people. These key elements are set out in column 4 of the audit framework (see Appendix 1).

3.2 In order to self-assess progress on these 17 elements the commissioners are invited to reflect on how they are responding to three key 'drivers': the demographic pressures of dealing with a growing older person population; the financial constraints imposed by public expenditure cuts; and central government directives that 'dictate' how authorities are meant to deal with these pressures, for example localism, personalisation, the new GP commissioning regime, and changes to the rent setting or benefits rules.

3.3 For each of these drivers the commissioners are then asked to consider the local influences (strengths and weaknesses, opportunities and threats) affecting their responses, and to provide examples of innovative or good practice they have developed to meet the pressures they have described.

How is an LTA managed?

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[1] - Add reference

4.1 A single consultant can conduct an LTA.

4.2 Each of the HSU consultants involved in the LTA work approached the key commissioners in the relevant authorities (see section 5) to explain the process, identify the particular people to be involved, arrange a meeting, and dispatch the audit framework.

4.3 The consultant then conducted a two-hour self-assessment on site using the audit framework. The number of people at each meeting was normally 2 or 3, and in most cases represented the four domains between them: housing, health care, social care and housing related support.

4.4 The role of the consultant is best described as a 'critical friend': ensuring the commissioners provided some data on each of the 17 key elements and the 3 drivers, prompting a balanced assessment to strengths and weaknesses influencing their local responses, and drawing out the innovation and good practice that could be useful to other authorities in the South West.

4.5 In most cases the authorities provided follow up data or commentary on specific topics raised at the meeting in order for the consultant to provide the fullest possible picture.

4.6 The consultant then summarised the information provided in the LTA matrix and sent this back to the commissioners for verification. The product is a 2/3-page report for the authority.

Where were they used?

5.1 LTAs were conducted in 7 authorities: BANES, Bristol, South Gloucestershire, Plymouth, Poole, Swindon, and Dorset. It was piloted in BANES, and then rolled out to the remaining 6.

5.2 The unifying feature of most of these authorities is that they are all unitary, and in most cases their joint commissioning structures are much further advanced than the two-tier authorities in the South West, enabling a more 'joined up' conversation.

How useful is the audit tool, and how useful are the audits?

6.1 From an HSU perspective the LTA proved to be the time/cost efficient tool it was designed to be: the key elements that formed the basis of the Informed Plans in the targeted authorities were transferable to the LTA, it was possible to conduct them within 2 days of consultancy time (after testing in BANES), and they do produce a simple self-assessment report offering commissioners new insights into some of the issues they face, and enabling them to identify particular projects that could be conducted with additional capacity from outside agencies such as the HSU.

6.2 The HSU has not yet conducted any independent assessment of the usefulness of the tool.

Conclusion: developing the audit tool

7.1 The LTA does not attempt to provide independent verification of an authority's progress in meeting the integrated housing, health, care and support needs of older people in their area, as this is not possible within the resource available or the authority given to the HSU.

7.2 However, it would be possible to carry out a more comprehensive audit using the LTA if there was more time and resource to offer an authority for an in-depth picture that included an assessment by the consultant, perhaps providing some of form of 'traffic light' summary spanning the 17 key elements.

7.3 The potential of developing the audit tool will be considered by the HSU consultancy team over the next 3 months.

Driver	Please describe how you are responding to this 'driver'?	What are the local influences (strengths and weaknesses, opportunities and threats) affecting this response?	Can you evidence the active use or review of the following?	Can you describe examples of innovative or good practice in meeting these pressures?
Demographic Pressures of dealing with an increasing older person population			✓ JSNA ✓ Assistive Technologies ✓ Extra Care Housing ✓ Sheltered Housing ✓ Housing strategy/HIAs ✓ User involvement ✓ Consultations with stakeholders	
Financial Constraints imposed by the cuts to public expenditure			✓ An integrated vision ✓ An integrated route map ✓ Integrated commissioning ✓ Integrated provision/new models of delivery ✓ Revised 'mix' of housing options	
Central Government Directives that dictate how are meant to deal with these related pressures e.g. localism, reform to the health service, changes to rent setting regime etc.			✓ Cashable savings (use of resources modelling) ✓ Preventative strategies ✓ Optimise support at home ✓ Active Re-ablement ✓ Personalisation	