

**CABINET – 19 SEPTEMBER 2014****OUTCOME OF THE CONSULTATION ON THE STRATEGIC REVIEW OF
PREVENTATIVE SERVICES IN LEICESTERSHIRE****JOINT REPORT OF THE DIRECTORS OF ADULTS AND COMMUNITIES,
CHILDREN AND FAMILY SERVICES AND PUBLIC HEALTH****PART A****Purpose of Report**

- 1 The purpose of this report is to detail the responses to the consultation on the proposed Adults and Communities secondary prevention offer for Leicestershire, and to seek approval for the revised offer and co-development of service specifications for the new services.

Recommendations

- 2 It is recommended that:
 - a) The outcome of the strategic review of the Adults and Communities Department's secondary prevention services, including results of formal public consultation and the risks highlighted, be noted;
 - b) That the Director of Adults and Communities be authorised to implement the proposed prevention offer as set out in this report;
 - c) Subject to b) above, the procurement process for the proposed secondary prevention offer to commence as soon as practicable with a view to new service delivery starting no later than 1 October 2015.

Reasons for Recommendations

- 3 A strategic review of the Adults and Communities' secondary prevention services has been undertaken by the Adults and Communities Department. The review encompassed a wide range of services, including a large number of housing related support and voluntary sector contracts.
- 4 As part of the strategic review and service modelling process, a formal public consultation exercise was undertaken to capture the views of existing providers, customers and carers, stakeholders and the general public.
- 5 The new commissioning proposals for the Adults and Communities' secondary prevention offer have been developed in line with the vision of a unified prevention

offer for Leicestershire through the Better Care Fund (BCF). They take into account services and support offered by a range of partners and have been designed to complement and be complemented by the proposed Local Area Coordination (LAC) scheme for Leicestershire.

- 6 The focus of the proposed model is secondary prevention - to reduce and delay the need for social care and support. It will result in positive outcomes for customers and carers and represents cost-effective commissioning that takes into account the savings required against prevention services in the Council's Medium Term Financial Strategy (MTFS) published in February 2014.

Timetable for Decisions (including Scrutiny)

- 7 The Adults and Communities Overview and Scrutiny Committee will consider this report on 17 September 2014 and its comments will be reported to the Cabinet.
- 8 Subject to approval by the Cabinet of the proposed commissioning options, the process of procuring providers to deliver the new service model(s) for the Adults and Communities' secondary prevention offer will begin as soon as is practicable with a view to new services starting service delivery no later than 1 October 2015.

Policy Framework and Previous Decisions

- 9 The Government's White Paper *Our Health, Our Care, Our Say* (2006), sets out a framework for adult social care in the future and expects local authorities to work strategically with partners to promote independence and provide opportunities for greater choice and control for service users.
- 10 The Care Act 2014 not only reforms how the law works in respect of health and social care, but also prioritises people's wellbeing, needs and goals. Final guidance is due to be released in October 2014 and the majority of the Act will come into force from April 2015. The Act highlights the importance of preventing and reducing needs and putting people in control of their care and support. Local authorities will be expected to ensure that local populations receive services and support that prevent their care needs from becoming more serious and that individuals can get the information that they need in order to make good and appropriate decisions about care and support.
- 11 The *Leicestershire Health and Wellbeing Strategy, 2013-2016* has been developed by the Health and Wellbeing Board and sets out the overarching plan to improve the health and wellbeing of children and adults in the County and to reduce health inequalities with a focus on the local population. The strategy sets out a number of priorities across the life course and cross cutting themes in support of these objectives, many of which have a clear focus on early intervention and prevention.
- 12 In June 2013 an extension to the contracts for voluntary sector and housing related support services up to a maximum of 30 September 2015 was approved by Cabinet in order to allow sufficient time for the prevention review and ensure alignment of services to an overarching, unified secondary prevention offer.
- 13 In September 2012, the Cabinet agreed to re-commission housing related support services for older people, including community alarm services, and to seek approval (granted) to consult on a proposed service model.

- 14 In June 2013, the Cabinet noted the outcome of the consultation on proposed changes to assistive technology for people aged 18+, mobile response services and housing related support for older people, and agreed how these services are provided and commissioned in the future.
- 15 The following decision regarding preventative adult mental health services and carers' services should also be noted in the context of the wider departmental prevention offer but have been reviewed outside of the remit of the prevention review:
- “In July 2013 the Cabinet noted the review of preventative adult mental health services (including social drop-ins, befriending, and dementia services) and agreed to consult on proposed commissioning options for the social drop-in and befriending services and to undertake further engagement around the proposed service redesign of the Voluntary Services Officers (VSO) service. The preferred option and service redesign was agreed in November of that year; new contracts for these services will be in place by 1 October 2014.”
- 16 The MTFs for 2014/15 to 2017/18 was agreed by the County Council in February 2014. The MTFs set a Departmental savings target of £21m to make over the next four years, with £3.5m to be saved by 2016/17 from early intervention and prevention support. In addition, the Council's Strategic Plan was considered by Cabinet at its meeting in May 2014. The plan set out high level priorities and supporting actions and targets for the Council over the next four years which will then be subject to suitable delivery support and monitoring. The plan is aligned with the MTFs and will be supported by the Council's Transformation Programme and by an additional detailed plan for supporting communities.
- 17 On 1 April 2014, the Cabinet considered a report on the Strategic Review of Carers Support Services and a further report on the outcome of consultation and proposals for the future of these services is included on the agenda for this Cabinet meeting.

Resources Implications

- 18 As set out in the Council's MTFs, demographic pressures are increasing as income reduces resulting in a funding gap that needs to be addressed by making an unprecedented level of budgetary savings. Consequently the Adults and Communities Department has a target departmental saving of £21m to make over the next four years and has identified £3.5m to be saved by 2016/17 from the 'New model of Early Intervention and Prevention Support (S34)'.
- 19 The current spend for these contracts is £9.4m per annum (2013/14); a £3.5m savings target represents a 41% budget reduction over the next four years and sets the maximum budget for the Department's preventative services as £5.9m from 2016/17.
- 20 This report details the proposal to end all services listed in Appendix A which will deliver the savings target set, and reinvestment proposals which will deliver a more focussed, partnership approach to prevention.

- 21 The savings proposals outlined in this report relate to the MTFs period 2014/15 to 2017/18. Members will be aware that the report on the roll-forward of the MTFs to 2018/19 indicated a financial gap in excess of £40m. As a result there will be a need to look again at this area of activity to determine whether further savings can be achieved.
- 22 The Director of Corporate Resources and the County Solicitor have been consulted on the contents of this report.

Circulation under the Local Issues Alert Procedure

- 23 This report has been circulated to all Members of the County Council via the Members' News in Brief.

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PART B**Context to the Council's Approach**

- 24 There are clear benefits to developing a more joined up approach to the commissioning of prevention and early intervention services across the Council and its partners. This will improve outcomes for individuals, promote better relationships between key stakeholders, and enhance value for money. Given the requirement to achieve significant budget savings, it is vital that these benefits are realised if the Council is to continue to deliver an effective prevention offer.
- 25 A range of work has already been undertaken to develop a more co-ordinated approach. The Prevention Advisory Board established by the Adults and Communities Department includes representatives from County Council Departments, Clinical Commissioning Groups (CCGs), District Councils, and Healthwatch. This provides an opportunity to better understand provision across all partner agencies, identify opportunities to align services more effectively, identify more efficient delivery options and to ensure that commissioning intentions are developed in partnership.
- 26 This work is at an early stage, but the consultation undertaken for this review and outlined in this report provides further opportunities to develop the partnership approach to prevention. It has now been agreed that the Prevention Advisory Board is revised and reconfigured as the Unified Prevention Board with the following key objectives:
- developing and agreeing shared definition, vision and strategy for unified prevention;
 - mapping the current resources and investment aligned to the vision including identifying gaps and duplication;
 - developing and securing sign up to a new prevention model;
 - developing and proposing an implementation plan and investment strategy that key stakeholders can endorse because it is underpinned by a clear evidence base and responds to the needs of our local communities;
 - developing a reporting structure for existing and planned BCF prevention developments and programmes/work streams.
- 27 This unified prevention offer is based upon secondary prevention. The definition of secondary prevention underpinning the review is that put forward by the Council's Public Health department in 2012:
- 'Identifying people at risk and halting or slowing down any deterioration. Interventions are aimed at identifying people at risk of specific health conditions or events (such as strokes or falls) or those that have existing low level social care needs'.*
- 28 The model and proposed commissioning options explained in this report focus on secondary prevention in the context of a broader and increasingly unified prevention offer.

- 29 The commissioning options are also in line with the desire to move towards outcome-based commissioning. This means putting in place a set of arrangements whereby a service is defined and paid for on the basis of a set of agreed outcomes.

Background to the Adults and Communities Review

- 30 The Strategic Planning and Commissioning Team in the Adults and Communities Department have led on a review of the Department's investment in secondary prevention services, with assistance from the Department's Market Development and Compliance Teams (henceforth known as 'the review team'). The services included within the review were defined as 'early intervention and prevention services' in a report to the Cabinet in June 2013 and a full list can be found in Appendix A. An extension to the contracts for these services up to a maximum of 30 September 2015 was approved by Cabinet in order to allow sufficient time for the prevention review and ensure alignment of services to an overarching 'prevention offer'.
- 31 The prevention review has responded to the following factors:
- significant financial and demographic challenges faced by the Department – including a considerable reduction in the available budget for prevention services, as set by the MTFS;
 - the Council's wider Transformation Programme;
 - work to develop an overarching and integrated approach to the commissioning of preventative services across all of the Council's departments and partners, as reflected in current proposals for the BCF's unified prevention offer (March 2014);
 - other reviews of prevention services that have already taken place or are in progress, ie the Preventative Adult Mental Health Review and the Carers Support Services Review.
- 32 The prevention offer proposed here is focussed on secondary prevention. Secondary prevention is concerned with identifying those most at risk of needing social care support in the future - for example: a new diagnosis of dementia; those at risk of isolation and low-level mental health problems. This is distinct from primary prevention (which represents universal services for the whole population (such as adult learning, libraries and information and advice) and tertiary prevention (which is concerned with support post-event – for example, after a major health event and include interventions such as reablement).
- 33 With regard to the review, the following provides a brief outline of the process to provide some context for this report:
- a secondary prevention and early intervention proposal has been developed which reflects a longer term sustainable vision and move towards an outcome based framework;
 - it was recognised that in order for the secondary prevention offer to be effective, it must be developed as part of a whole pathway approach, considering primary and tertiary prevention;
 - the secondary prevention proposal has been developed taking in to account the contributions of other key partners who share the goal of reducing or delaying the need for health and social care support;

- the review process has been supported by a Prevention Advisory Board involving representatives from the Adults and Communities Department, Children and Family Services, the Chief Executive's Department, Public Health, Housing (Borough/District Council representation), and Healthwatch Leicestershire;
- engagement and consultation with a range of customers, providers, stakeholders and the general public was conducted prior to formal consultation in order to inform the development of the new prevention offer.
- the Department's secondary prevention proposal was developed which identified the need to support people to contribute to their community and in turn strengthen the capacity of communities to include and support vulnerable people. Maximising people's own assets, support and community resources is an essential part of the model. This is in line with the development of the Local Area Coordinator role as part of the BCF unified prevention offer (a BCF update was provided to the Cabinet on 1 April 2014).

34 Throughout the review process considerable attention has been paid to potential impacts of the proposals with regard to the Equality Act 2010 and the Human Rights Act. This has formed an integral part of the review process, including the identification of risks and mitigating actions with regard to the proposed prevention offer. A series of Equality and Human Rights Impact Assessments (EHRIs) were completed as part of the review process and the review team worked closely with officers from the Departmental Equality Group (DEG) to complete the assessments (which were subsequently signed off by DEG in September 2014). At a broad level, the EHRIs found that there would be no significant impact on any particular group or protected characteristic (as defined by the Equality Act 2010) as a result of the proposed prevention offer, but rather that the reduction in investment had to the potential to impact on *all* people because of potential reduction in service provision. Full versions of the EHRIs are appended to this report (Appendices D-I).

Scope of Review

- 35 At the point of commencement, the review encompassed those services defined as 'early intervention and prevention services' in a report to Cabinet in June 2013 (Appendix A).
- 36 In June 2013, the Cabinet agreed the commissioning of a countywide assistive technology service and low level housing related support service for older people. While plans for a countywide assistive technology service are progressing, a subsequent tender process was unable to deliver sufficient bids to move forward with the housing related support service. This has provided an opportunity to consider housing related support for older people within the wider context of the strategic review of preventative services.
- 37 It was also clarified that the savings targets in the MTFs for prevention (see paragraphs 18 and 19) were set against all housing related support and voluntary sector budgets.
- 38 In light of the significant savings required, it will be necessary to cease all contracts relating to the services detailed in Appendix A between March 2015 and September 2015 (dependent on complexities relating to transition), in order to re-shape the

Department's prevention offer and deliver the savings requirement. Proposed contract end dates are detailed in Appendix A.

Financial Analysis

- 39 As summarised in paragraphs 18 and 19 of the report, the budget for the Department's prevention services was established as £9.4m per annum (2013/14) and includes all housing related support and voluntary sector contracts.
- 40 Financial targets for the prevention review have been set by the MTFs (February 2014). These are as follows:

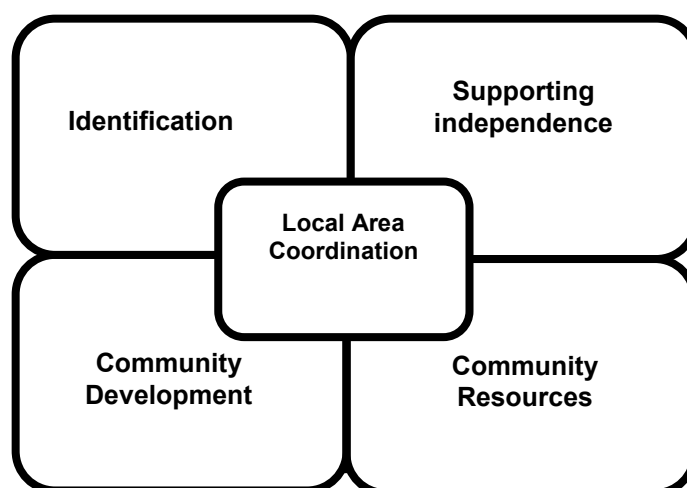
| | |
|--|-------------------|
| Sum of budget for Prevention Services | £9,400,000 |
| Savings to be made 2014/15 | £1,000,000 |
| Savings to be made 2015/16 | £500,000 |
| Savings to be made 2016/17 | £2,000,000 |
| Total budget for Prevention Services post 2016/17 | £5,900,000 |

- 41 This means that by 2016/17, the budget for the Department's secondary prevention services must not exceed £5.9m per annum. This represents a budget reduction of 41% on the current budget over the next three years. The savings are even more challenging because just under £5 million of the budget available is already committed because:
- The funding is required to cover new statutory responsibilities (such as providing carers with personal budgets);
 - Funding has already been allocated to key services such as assistive technology, extra care housing, advice and information provision and mental health services (drop-ins and outreach support);
 - Funding is being utilised to support people with eligible needs (including people with learning disabilities and mental health problems).
- 42 This means that there is just over £1 million available to reinvest in new secondary prevention services and to provide services to other vulnerable people. This significant reduction in spending on prevention services represents a considerable challenge for the development of an overall secondary prevention offer and future commissioning options, although brings with it an opportunity to ensure the Department's contribution complements the developing unified prevention offer. This will ensure a co-ordinated and targeted prevention offer across all key partners.

Overview of Original Proposals for Future Commissioning

- 43 On the basis of the findings of the strategic review process, commissioning options for the Department's future secondary prevention offer were developed and presented to the Cabinet in April 2014. Outcomes of the carers review and the new preventative adult mental health service model will also form part of the Department's secondary prevention offer.

- 44 The specific commissioning options for secondary prevention form part of an overarching departmental prevention offer, which will over the coming years, form the Department's contribution to the developing unified prevention offer through the BCF.
- 45 Research and analysis of local population data in addition to consideration of opportunities to identify, intervene and have an impact revealed three priority populations for the secondary prevention offer: older people (aged 65 and over), carers, and, people with a mental health need.
- 46 The proposed departmental offer for secondary prevention is based on the premise that the model should, as far as possible, be determined and led by need and the opportunity to intervene. It should promote links to local services and should also reflect expected future demand for support services. The secondary prevention offer is concerned with maximising people's own assets, support networks and community support to reduce demand for commissioned services.
- 47 The proposed commissioning model for secondary prevention covers four main areas, illustrated below, with LAC as a key enabler:



- *Identification* – this is concerned with the target populations as set out above, identifying those at risk and addressing future demand;
 - *Supporting Independence* – working with people, to identify what their needs are and assisting them to get timely, effective and relevant information and to access community resources.
 - *Maximising and Enhancing Community Resources* – there should be a wide range of community resources available or developed and should be able to respond to need associated with isolation/loneliness, health concerns, living environments, and carers.
 - *Community Development* – developing and supporting existing community infrastructures.
- 48 As stated above, key to the long term and effective implementation of the four elements is a coordinating role. It is envisaged that this could be delivered by LAC which is based on an integrated approach with partners. The BCF is resourcing a LAC service in specific areas in Leicestershire with a view to rolling the model out countywide in 2016 following evaluation.

- 49 The review process identified that there were a number of existing housing related support services for vulnerable people (covering homelessness, substance abuse, offenders, domestic abuse, and gypsy and traveller communities) which do not align to the wider secondary prevention offer (as described above). However, the review has identified considerable risks to service users (current and future), the public, stakeholders, partners, providers and the Council if some form of service provision is no longer commissioned for these client groups.
- 50 The original proposed reinvestment prior to formal consultation is illustrated below:

| | Area of proposed re-investment | Amount proposed | Percentage of £1 million budget | Re-investment as a percentage of current spend |
|----------------------|---|-----------------|---------------------------------|--|
| SECONDARY PREVENTION | Supporting independence for older people | £500,000 | 47% | 24% of current spend |
| | Maximising community resources (e.g. social groups for older people and specialist social groups) | £100,000 | 10% | 54% of current spend |
| | Community development | £35,000 | 3% | This is a new area of investment |
| SERVICES FOR OTHERS | Homelessness support | £300,000 | 28% | 22% of current spend |
| | Safe places and support for domestic abuse | £120,000 | 11% | 63% of current spend |

Consultation approach

- 51 A formal consultation exercise for the prevention review was undertaken between the 14 April 2014 and 13 July 2014.
- 52 The approach taken to the formal consultation exercise was varied. It was intended to support the greatest number of people (including customers, providers, stakeholders and the general public) to be involved and to provide feedback and comments on the secondary prevention model and commissioning options. The approach included the following:
- wide promotion of the consultation exercise, including an article in Leicestershire Matters (Spring 2014 edition) and distribution of over 330 posters advertising the consultation to a variety of community locations (such as libraries, museums, hairdressers, clubs and leisure centres, providers, and the Borough and District councils);
 - information (on-line or in hard copy format upon request) to explain the secondary prevention model and commissioning proposals;
 - on-line questionnaires available to all with hard copy versions available upon request or distributed at consultation events;
 - a series of workshops for providers of existing prevention services. These included a series of four generic workshops between February and May 2014 and further service group specific provider workshops in May 2014. These were attended by 98 providers;

- a series of workshops for customers accessing the existing prevention services and three workshops which were open to the general public. These were attended by 580 individuals.

53 The formal consultation period was used to inform further development of the secondary prevention offer and commissioning options in a number of ways, including:

- to check whether people (including customers, providers, stakeholders and members of the public) agree with the approach being proposed and to consider any alternative options/ ideas presented;
- enable the review team to ensure a detailed understanding of the risks associated with the future commissioning process and proposed changes to service provision;
- detailed consideration of potential mitigating actions for each of the service areas affected;
- allow a co-production approach to developing detailed commissioning options within the context of future investment;
- identify methods for the identification of vulnerable groups and referral/prioritisation processes;
- identify outcomes to be achieved by new services;
- detailed potential delivery mechanisms through work with providers, partners and service users;
- appropriate potential contract end dates taking into account transitional arrangements;
- development of risk and impact assessments (taking into account the views of customers, providers, stakeholders and the general public).

Consultation Outcomes

54 Feedback from engagement and consultation exercises is summarised in Appendix B. However, a summary of recurring themes and main issues raised are presented below according to each element of the proposed reinvestment. Quotations presented in italics are derived directly from consultation responses received.

Overarching Secondary Prevention Offer

55 In terms of the overarching secondary prevention model, 69% of people responding via the questionnaire either strongly agreed or tended to agree with the proposed secondary prevention model.

'The five things are not just important they are essential to the people in need'

56 Of the five elements included in the model, 'Identification' received the greatest level of support.

57 Feedback from the public workshops showed support for prevention as an approach, with an emphasis on people needing access to timely and accurate information and advice. Timebanking (see paragraph 83 and 84) was seen as a valuable mechanism to support community development and the added value associated with encouraging people to see what their attributes are, rather than their needs, was recognised. There was overall support for an approach that seeks to:

‘Empower people so that they can deal with their problems...’

- 58 Healthwatch Leicestershire feedback showed that 71% of their members and other respondents agreed with the elements of the prevention model.
- 59 For those who strongly disagreed or tended to disagree with the overall model (17%) key themes related to the loss of specialist services, concern regarding reliance on the community and the overall reduction in investment.

‘..because reducing support and limiting people's access to support will lead to greater long-term dependency on services’.

Secondary Prevention Offer - supporting independence for older people

- 60 In June 2013, the Cabinet agreed the commissioning of a countywide assistive technology service and low level housing related support service for older people. While plans for a countywide assistive technology service were progressed and commissioned¹, the tender process for housing related support for older people was unable to deliver sufficient bids to move forward with the housing related support service. This provided an opportunity to consider housing related support for older people within the wider context of the strategic review of preventative services.
- 61 Prior to consultation, it was proposed that £500,000 would be invested in supporting independence for older people, reflecting the key outcomes originally intended through the unsuccessful procurement exercise, although at a significantly lower level of investment.
- 62 During the consultation period, six of the current 12 providers indicated that they will continue to provide housing related support to existing clients if the Department’s funding ceases in September 2015. Others have either:
- already ended their contracts (two providers) or;
 - stated that alternative options for delivery are being explored (four providers).
- 63 Questionnaire responses from people over the age of 65 years clarified the most important elements of support for older people:

| Which aspects of the support you received have helped you the most? (top 5 responses) |
|--|
| 1. Help establishing personal safety and security |
| 2. Developing domestic/life skills |
| 3. Supervision and monitoring of health and well being |
| 4. Help gaining access to other services |
| 5. Help in establishing social contacts and activities |

“supporting independence in older people if it keeps them out of residential homes must be a good thing.”

¹ It should be noted that the Assistive Technology (AT) service has been commissioned and is now being developed across the county and is independent of the outcome of this review

- 64 Consultation outcomes have confirmed that, although prevention services for older people are a priority area for the Department, current provision would be less significantly affected by reduced investment than it would for other service provision included in the prevention offer (eg other vulnerable people or people with a visual impairment as detailed below). The high risk associated with the ending/reduction in other types of provision has been clarified through the consultation feedback which has resulted in a realignment of investment.
- 65 The proposed reinvestment for older people would be £240,000 (which is 11% of the current spend on housing related support for older people - 2014/15). Following the formal consultation exercise and taking into account the views of current customers, providers and stakeholders, it is recommended that:
- investment is tenure neutral (ie it does not matter whether a person owns their home, privately rents, rents through housing associations or local authorities to access this support) and is primarily targeted towards older people (at retirement age);
 - priority outcomes are the identification of vulnerable older people at risk of needing social care support, supporting independence and reducing isolation.
- 66 The core principles identified through the prevention review (and during an earlier review of older person's housing related support – noted by the Cabinet in June 2013) will provide a framework for future provision and echo the principles of the prevention model as described above:
- | | |
|----------------|---------------------|
| • Needs Led | • Personalised |
| • Flexible | • Equitable |
| • People-based | • Outcomes-focussed |
| • Preventative | • Responsive |
- 67 Due to the significantly reduced level of funding available, it is essential that maximum impact can be attained. After further discussions with key stakeholders and careful consideration of options it is recommended that the funding is aligned to the 'Light Bulb project', which is being developed by the Council in partnership with District and Borough Council representatives, Housing representatives and Health partners.
- 68 The Light Bulb project intends to enable and empower people, especially older people, to remain independent at home for longer. This offer will cover a wide range of support; handyperson services, recycled furniture, affordable warmth advice, occupational assessment services and minor and major adaptations. The project will seek to integrate the delivery of up to £10m worth of District and County Council housing assessment and support services.
- 69 An expression of interest was recently submitted to the Department for Communities and Local Government Transformation Challenge Award. The submission was successful and the County's eight local authorities (County and seven Districts) have been invited to the next stage of this award process and been asked to submit a business case upon which the award will be judged. If successful, the development and implementation of the project could receive funding of approximately £750,000. The deadline for this bid is 1 October 2014.

- 70 Partners are committed to ensuring the Light Bulb project becomes a reality, regardless of the outcome of the bid. The business case and model for this new approach will continue to be developed by partners. To enable a phased integration and roll out of the Light Bulb project new financial arrangements are expected to be in place by April 2015. More detail of this timetable and these arrangements will be available from October after the project business case has been submitted to Government.
- 71 This proposed reinvestment of £240,000 from the Adults and Communities Department demonstrates a real commitment to working together with partners to provide the best and most efficient services for people needing housing support to remain independent. This investment will help to ensure an element of provision focussing on supporting older people is in place for October 2015.
- 72 In addition to the proposed investment the proposals include a significant investment in services for sight impaired/deafblind people (see section relating to specialist rehabilitation below, paragraphs 114-126). This undoubtedly contributes to supporting independence for older people, as a high proportion of those currently receiving services are over 65 years (in 2013/14 circa 1,435 clients). In addition, the proposed commissioning options include funding for social group provision, some of which will be targeted towards older people (see paragraphs 73-82 below, for further details).

Specific Commissioning Options: Maximising Community Resources

- 73 The core focus of this element is the provision of adult social groups that offer a safe environment in which to meet, receive and provide peer support, information and advice, and address social isolation.
- 74 The proposal needs to be seen within the context of other commissioned or currently being commissioned services, such as social groups for carers, people with dementia and people with a mental health condition, all of which contribute to this element of the secondary prevention offer. The review has focussed on lunch clubs and adult social groups for people with specific conditions, for example, stroke clubs. Original proposals were to reinvest £100,000 in social groups.
- 75 Consultation feedback has supported this option, with people valuing highly the support they receive from social groups in sustaining their independence and improving their quality of life:
- “Older people should be encouraged to take part in community activities that help to prevent isolation and loneliness”*
- 76 Questionnaire responses reveal that 77% of respondents agreed with this element of the model.
- 77 It is recommended that no change is made to the original proposal to reinvest £100,000 to support social groups (which is 54% of the current spend - 2013/14).
- 78 It is proposed to establish an Adult Social Group fund, awarding funds for a two year period. This will complement the Department’s existing Innovation Fund and the

Council's Shire Grants. The Department will manage the fund to ensure that use is maximised. This mirrors the management of the Innovation fund and Shire Grants scheme. Managing the fund will ensure there is, as far as is practicable, equitable and targeted provision that avoids duplication of prevention provision.

79 The key outcomes that social groups need to address are:

- preventing or reducing the need for social care support;
- reducing the risks of social isolation;
- facilitating the provision of peer support;
- facilitating or providing information and advice;
- encouraging community connections and social networks within the group and outside the group;
- promoting Health and Wellbeing.

80 Whilst there is a reinvestment in social groups it is a reduction in funding and therefore will impact on existing groups. The grant approach provides a fair and equitable way of managing the budget whilst addressing the reduction in funding. All applications will need to demonstrate that they are cost effective, sustainable, potentially self-sustaining and maximise community resources.

81 The grant criteria will be developed further, however there are two areas of current support that will not be included given the reduction in funding; individual transport costs and (in light of the meal services review which has run in parallel to the prevention review) a meal subsidy will also be excluded from the grant criteria. It is proposed that each group who are successful in securing infrastructure funding will charge users directly at whatever level they choose in relation to meal provision. The majority of people currently accessing lunch clubs that participated in the prevention consultation said they did not want the cost of meals to go up and those in receipt of transport said that it was important in terms of their attendance. However funding reductions mean that the funding described will need to be targeted towards infrastructure costs.

82 It is expected that some groups will take up the opportunity to bid for funding, some may choose not to bid, and others may seek alternative sources of funding or make other arrangements. The review team will support all existing groups as appropriate.

Specific Commissioning Options: Community Development

83 The core focus of this element is to address gaps in community resources or assets, to help the community develop sustainable and local responses; this will usually be through infrastructure support. Timebanking is a low cost method of encouraging community connections and social networks.

84 'Timebanks' work by people offering their skills in return for time credits, which they can spend when they need help with something. The provision of Timebanking will enable people to get low levels of support without funding.

85 Overall comments received from the public consultation in respect of community development were:

- support from Healthwatch Leicestershire;

- opposition from Districts and service providers as they felt that this investment should be spent in areas where the impact of reduced resources is felt to be higher;
- within the public consultation event, members of the public were in agreement with this proposal: they said that community development was really important – *‘..the less development in the community, the less strong it is - equally the more investment the stronger the community can be’.*

86 During the consultation period 74% of respondents either strongly agreed or agreed to the proposed investment in Community Development.

87 The current Leicestershire Timebank has just signed up its 147th member, and completed 990 hours’ worth of transactions. The Timebank is now an asset for the entire County with several people contacting the project to join every week. Pockets and pools of support are growing around the members themselves as they start to invite their friends, neighbours and families to join. Importantly a large percentage of the transactions are supporting people who were isolated and could be described as vulnerable.

88 It is recommended that there is no change to the original investment and that the Department manages the fund initially to ensure that use is maximised.

89 The proposed investment of £35,000 (a new area of investment) will fund the management and administration of all transactions, including promotion of the scheme.

Specific Commissioning Options: Other Vulnerable People

90 During the strategic review, it was recognised that there were certain groups of vulnerable people whose needs may not be met by the proposed secondary prevention offer. These groups are:

- People who are homeless or at risk of homelessness;
- Offenders or those at risk of offending;
- Members of Gypsy and Traveller communities;
- Substance misusers;
- People at risk of or experiencing domestic abuse.

For ease of reference, these groups will henceforth be referred to as ‘other vulnerable people’.

91 Analysis of the risks associated with not providing any support for other vulnerable people led to the development of a proposal to allocate some of the available budget for preventative services to develop new services to support these groups. In particular, it was recognised that these services can address social isolation and support people to re-integrate with their communities. They can also prevent people from needing more intensive social care support in the longer-term by promoting independent living. They have, therefore, some strategic fit with the wider unified prevention model.

92 Accordingly, prior to the formal consultation exercise it was proposed to allocate £300,000 per annum to commission a generic service (either floating support and/or

accommodation support) to support other vulnerable people and £120,000 per annum to commission domestic abuse refuges.

- 93 Each of the proposed commissioning option for other vulnerable people is addressed separately below.

Homelessness support

- 94 Results from the formal consultation exercise showed that there was broad agreement for the commissioning of support for other vulnerable people, in particular services with an emphasis on homelessness. However, there was significant concern that the level of proposed investment would be insufficient to commission and sustain an effective service. Homelessness provision was the greatest area of concern raised by District and Borough Councils and a petition specifically concerned with cuts in homelessness provision was signed by more than 800 people and submitted in July 2014.
- 95 Customers, providers and stakeholders considered that an element of accommodation-based support for homelessness was important, although shortening the average length of stay could be considered in order to maximise capacity.
- 96 Data relating to the prevalence of homelessness, although available in varying forms, is complex and understandably challenging. There are limitations in relation to official statistics, and their application locally to determine prevalence. Figures released by the Department for Communities and Local Government show that during the 2013/14 financial year, nationally there were 52,270 household acceptances (as a main duty under homelessness legislation). However this data relates to households and statutory homelessness, which does not correlate directly with the types of vulnerable people accessing the commissioned services in question. Figures also indicate that during 2013/14, a total of 227,800 cases of homelessness prevention or relief were estimated to have taken place outside the statutory homelessness framework in England. Of these cases, 209,300 (92%) were preventions and 18,500 (8%) were cases of relief², demonstrating the value of a varied flexible approach.
- 97 In addition, data provided by the Government estimates that there were nine rough sleepers in the County (excluding Leicester City where 11 rough sleepers were identified)³. However, Leicestershire County has a much lower reported prevalence of rough sleeping than other parts of the East Midlands.
- 98 Monitoring data submitted locally for homelessness services currently commissioned by the Adults and Communities Department also demonstrates the demand for services addressing the needs of those who are homeless or at risk of homelessness. In 2013/14 the average number of customers accessing accommodation-based homelessness support per quarter was 190 individuals. Likewise, in 2013/14 the average number of customers accessing floating support/preventative floating support per quarter was 149 individuals. As with the

² see <https://www.gov.uk/government/publications/statutory-homelessness-in-england-january-to-march-2014> and https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/336048/Homelessness_prevention_and_Relief_England_201314_updated.pdf.

³ (<https://www.gov.uk/government/statistics/rough-sleeping-in-england-autumn-2013>).

national data this indicates a local need for accommodation based and floating preventative support for people who are homeless or at risk of homelessness.

- 99 Collectively, these figures provide an indication of the scale of the problem around homelessness from a number of different perspectives (i.e. rough sleeping through to preventative measures and statutory obligations). This supports the commissioning intentions set out in this report, indicating the need for support that is both accommodation-based and floating support that addresses the needs of people who are homeless or at risk of homelessness.
- 100 However, it is recognised that reduced funding means support will need to be more focussed and better targeted. In addition, development of the new service specification will be completed in collaboration with District and Borough Council colleagues to ensure shorter average lengths of stay can be achieved without compromising local housing authority obligations, and that support is targeted towards those most at risk. During the consultation period stakeholders and providers have indicated that reducing length of stay is a viable mitigating option to ensure capacity is maximised.
- 101 Following the formal consultation exercise, taking into account available evidence and data in addition to the views of current customers, providers and stakeholders, proposals have been revised to ensure an element of accommodation can be provided.
- 102 An increased reinvestment of £500,000 is proposed to support commissioning of a generic floating outreach service for those at risk of homelessness, in addition to supported accommodation for homeless people. This increased investment is 36% of current spend on homelessness services (2013/14). Additional funding will be identified to support transitional costs, which will be available during the first year of the contract (2015/16). While the County Council currently commissions support services within existing homelessness hostels, it does not own the accommodation.
- 103 It is envisaged that the accommodation-based support element will cost no more than £200,000 with the remaining £300,000 (minimum) to be invested in a generic county wide floating support service⁴.
- 104 Further engagement is planned during October 2014 with key stakeholders and providers to seek market views on the intention to:
- commission separate services for accommodation based support and floating support to reflect market expertise;
 - clarify availability of appropriate accommodation in the County that can meet the reduced requirement;
 - consider optimum number of units for the accommodation element (expectation of between 25 and 30 units);
 - confirm length of stay/length of intervention (6-9 months as average maximum rather than current maximum of two years).

⁴ Floating support is a short term support service (not personal care) to establish or sustain independent living in the community, which “floats” off to someone else when it is no longer needed, or can move with a person should their accommodation change.

- 105 The engagement exercise will ensure that the views of key stakeholders are taken into account, opportunities for deliverability of these proposals are fully explored and risks associated with future delivery of homelessness services are minimised and appropriate mitigating actions are implemented.

Safe places and support for domestic abuse

- 106 Results from the formal consultation exercise demonstrated the importance of ensuring domestic abuse refuges are available in Leicestershire, but also highlighted potential opportunities for better alignment of domestic abuse commissioning with Children and Family Services, and the Chief Executive's Department.
- 107 A reinvestment of £120,000 per annum for domestic abuse refuges for vulnerable women is therefore recommended (representing 63% of current spend by the Department on domestic abuse refuges – 2013/14). Whilst it is recognised that there is a rising number of other forms of domestic abuse (ie child on parent, male victims etc) the decision to commission women-only provision is supported by published evidence and discussions with stakeholders (both sources were examined in detail as part of the review process). Other domestic abuse services commissioned by key partners such as Independent Domestic Violence Advisors, Helplines, outreach and family work provide multiple routes into a range of support for a variety of victims. Further detail can be found in the relevant EHRIA (Appendix G). This re-investment represents a reduction of £25,000 per annum, although an additional £20,000 from Supporting Leicestershire Families (SLF) has been identified to add to the contract value for the first year of the contract to support transitional costs, if necessary.
- 108 The consequence of reduced funding will mean a reduction in the number of refuge places commissioned, from 18 to a minimum of 12.
- 109 The County Council currently commissions support services within existing domestic abuse refuges, but as is the situation with homelessness supported accommodation, it does not own the refuges. Initial discussions have taken place with the accommodation landlords who have raised a risk that some existing accommodation may not be available going forward to specifically align with a tender process for support services. In order to manage the reduction in numbers and the accommodation risks, it is therefore proposed that the tender process is structured according to the following principles:
- the service will be available to vulnerable women at risk of or experiencing domestic abuse. It will be accessible to those with dependent children (excluding male children aged 16 and over);
 - the service will be accessible for a normal maximum length of stay of nine months;
 - initial discussions have taken place with the Chief Executive's and Children and Family Service Departments to explore opportunities for joint commissioning a range of domestic abuse support services, including the proposed refuge provision. Due to the timescales involved, this may not be possible in the first instance, in which case refuge provision would be procured independently as outlined above having regard to any opportunities for better alignment.
- 110 The revised proposals for other vulnerable people take into account and accept a number of key factors:

- Although services for other vulnerable people are not a statutory responsibility for the Department it recognises the potential impact on health, social care and other partners such as District and Borough Councils, and is committed to reinvesting funding into the services as highlighted. It is recognised that there are a number of published reports regarding the effectiveness of housing-related support in respect of homelessness (such as the CAP Gemini report 2009 and Homeless Link 2010 SNAP report) and these have been taken into account when considering future commissioning proposals for other vulnerable people.
- Leicestershire Housing Related Support Strategy 2010-2015 will no longer be a current document by the time these commissioning proposals are enacted. The proposals therefore reflect demographic pressures, risks associated with reductions in investment, current strategic objectives for the Department, and the wider development of the unified prevention offer.
- Other organisations and partner agencies have a key role to play in the development of new services for other vulnerable people or have some existing support provision for this cohort. For example, probation services (recently re-structured and now locally covered by the National Probation Service and Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company) has a role in supporting offenders and ex-offenders and Public Health commission specialist local support for substance misusers and members of the gypsy and traveller communities. It is recognised that District and Borough Councils are key partners in ensuring the efficient delivery of homelessness services and will play a central role in shaping future service provision. Specifications will be developed in partnership with local councils and other County Council departments to ensure that the impact of changes are minimised.

Risks and mitigating actions for other vulnerable people

- 111 The key risk associated with the proposed commissioning for other vulnerable people is the reduced level of investment. Spend on services for this group was £1,577,000 in 2013/14. Under the new proposals the total investment in services for other vulnerable people for 2015/16 will be £640,000 (reducing to £620,000 thereafter once the £20,000 from SLF for domestic abuse refuges is spent). This represents a 63% reduction. The number of units of accommodation-based support and support hours will therefore be reduced and fewer people will be able to access this form of support.
- 112 Methods for maximising the effectiveness of this investment have been explored with partners and, as captured above, shortening the length of intervention and more targeted support are considered as ways of mitigating against this service reduction and attempting to increase service availability and utilisation. Key partners will be fully involved in the development of relevant specifications, particularly District and Borough Council colleagues, in order to ensure effective targeting of the available resources and effective signposting to other available services.
- 113 Other risks associated with the proposals have been identified elsewhere in this report, but key risks include:
- The proposals will impact upon the strategic objectives and working practices of partner agencies and organisations and other departments within the Council;

- Proposals could limit access to support which could result in an increase in homelessness, domestic abuse, crime etc.

Additional Commissioning Option: Visual/ Dual Sensory Impairment

- 114 The focus of the proposed model is secondary prevention which is defined as *“targeting those people most at risk of needing social care and support “*
- which is distinct from tertiary prevention or reablement which is defined as *“short –term support after a period of illness or disability to help them recover quickly and regain their independence”*.
- 115 During the strategic review it was recognised that one service was meeting specialist needs for people with visual impairment and dual sensory impairment with a tertiary prevention focus.
- 116 For the purposes of clarity this service delivers the following support elements:
- Statutory Sight Register;
 - Information and Advice;
 - Equipment;
 - Reablement.
- 117 Prior to consultation it was proposed that these services would end in line with current contractual arrangements, with the exception of the statutory sight loss register; people affected by sight loss/dual sensory impairment could be supported via the County Council’s Adult Social Care Teams once appropriate training had been provided (this includes the Homecare Assessment and Reablement Team). Provision would be accessed via the Customer Service Centre and is the route for meeting other specialist needs.
- 118 During the consultation significant concerns were raised by service users about the loss of specialist services for people with sight loss and that their independence would be significantly reduced.
- 119 In addition, draft guidance relating to the Care Act 2014 was released during the consultation period and concerns were highlighted regarding the Department’s duties for specialist assessment and rehabilitation for visual impairment and dual sensory impairment:
- *‘Local authorities should consider securing specialist qualified rehabilitation and assessment provision – rehabilitation should not be time prescribed’.*
 - *‘Local authorities must ensure that an expert is involved in the assessment of adults who are deafblind’.*
- 120 Through further internal consultation and further information submitted by the current provider, the level of capacity required to deliver specialist assessment and reablement services to people with a visual/dual sensory impairment within the Department was deemed a key risk.

- 121 Furthermore, research indicates reduced numbers of visually impaired people accessing publicly funded social care since 2005 (by 46%⁵) which may be linked to changes in eligibility criteria (those with visual impairments may be disproportionately impacted by higher eligibility thresholds implemented by local authorities). This pattern is replicated locally, since changes in eligibility were introduced in 2011.
- 122 In light of the issues raised proposals have been revised and it is recommended that £160,000 is allocated to fund specialist visual impairment and dual sensory impairment provision (this represents 34% of current spend on this type of service – 2013/14).
- 123 It will be necessary to establish current market potential in order to determine the appropriate procurement approach in line with Leicestershire County Council's Contract Procedure Rules.
- 124 The new service will include the Statutory Sight Register, and Specialist Rehabilitation provision that is targeted at those most at risk (of needing social care support in the future). The specialist rehabilitation provision will be a comprehensive package which includes identifying rehabilitation needs through an assessment process. Links to operational social care staff will need to be robust to ensure that those with longer term and eligible requirements can get support via a Personal Budget.
- 125 The future model of provision will be specifically developed in alignment with Care Act 2014 requirements (final guidance and regulations will be available in October 2014).
- 126 With regard to the Talking Newspaper service which is delivered as part of the current contract, further consideration between the Adults and Communities Department and the current provider will be given to ensure continuation of this service beyond the current end date of September 2015.

Other review considerations: Services relating to eligibility

- 127 During the strategic review it was recognised that a number of services were meeting the needs of people who are eligible for social care services (under Fair Access to Care Services), including:
- Housing related support (floating and accommodation based) for people with mental health, learning disabilities, physical disabilities (including brain injury and sensory impairment);
 - Long term foster care type arrangements for adults with learning disabilities;
 - Social Groups with and without transport for people with physical disabilities (including brain injury), sensory impairment and learning disabilities.
- 128 The intention is to facilitate access to support via a social care eligibility assessment and it expected that a large proportion of people accessing support will be eligible. Further work is required to determine actual eligibility, support requirements once

⁵ RNIB, 'Facing Blindness Alone', September 2013 available from <http://www.rnib.org.uk/sites/default/files/Facing%20blindness%20alone%20Campaign%20report.pdf>

current contractual arrangements end and transitional support for those people not eligible for social care.

129 Consultation feedback for this group of services consisted of the following:

- Concerns raised about those people who are not likely to be 'Fair Access to Care Services' eligible for social care services and the assumption that people will be able to get equivalent but informal support from the community or their family etc.
- People may not want to access social care but if/ when they do, costs will be greater than the current Department costs.

130 These issues will need to be managed throughout the process of transition which will consist of officers from the Non-Regulated Compliance Team working with the individuals and current providers to develop exit plans. Plans will include support options regarding other available forms of support such as assistive technology, social opportunities in the local area, and how to access formal support if needs change/increase.

Summary of Proposed Changes

131 The proposed changes have sought to respond to concerns raised by customers, carers, stakeholders and providers to ensure that available funding for reinvestment is focussed on priority areas and is utilised as efficiently as possible. The table overleaf summarises the original proposals regarding the departmental prevention offer and changes made in light of consultation outcomes.

Summary of consultation outcomes and proposed changes

| Pre-consultation proposal | Previous proposed reinvestment | Consultation feedback | Proposed amendments | Revised Proposal |
|--|--------------------------------|--|--|------------------|
| Supporting Independence for Older People | £500,000 | Six of the 12 current providers have indicated that they will be continuing the support provided. Although current provision is highly valued, greater concern has been raised regarding the impact of reduced homelessness provision. | Reduce reinvestment and align funding to the 'Lightbulb project'. | £240,000 |
| Maximising Community resources: Social and specialist groups | £100,000 | Consultation supports the continuing investment in social groups and specialist groups. | None | £100,000 |
| Community Development: Timebanking | £35,000 | Feedback from the general public, service users and Healthwatch was that Timebanking was a useful tool in providing low level support. | None | £35,000 |
| Other vulnerable People: Homelessness support | £300,000 | Stakeholders, including providers and District colleagues have expressed significant concern regarding the level of cuts proposed | Increase reinvestment to support generic homelessness provision. Commissioning of generic accommodation-based support with floating outreach support | £500,000 |
| Other vulnerable people: Safe places and support for domestic abuse | £120,000 | Consultation supports continuing to invest in this service, although significant proportion feel that funding is too low. | None | £120,000 |
| Additional area of investment: Specialist reablement services | £17,000 | Care Act Guidance provides further detail regarding our responsibilities in this area. Significant concerns raised through consultation regarding the loss of specialist services for people with sight impairment/ dual sensory loss. | Increase reinvestment in order to meet specialist requirements as detailed in Care Act 2014 guidance. | £160,000 |

Conclusions

- 132 The departmental investment in secondary prevention services recognises its contribution as part of a broader ambition to develop a unified prevention offer across Leicestershire.
- 133 It is recognised that there is concern regarding reliance on communities to take a more active role in supporting those who are at risk of needing social care support in the future. However, various community development initiatives, such as LAC and Timebanking have demonstrated that with some infrastructure provision, community assets can be an extremely effective and low cost method of providing low level support to vulnerable people.
- 134 The proposed amendments take into account feedback given during the consultation process, although the funding available needs to address a much broader preventative scope than is addressed in the existing Leicestershire Housing Related Support Strategy (2010–2015).
- 135 Due to the breadth of investment requirements a limited level of funding specifically addresses supporting the independence of older people. Although on balance there is a low level of short to medium term risk in relation to current provision, it is imperative that the Leicestershire unified prevention offer further develops support and maximises available resources in order to effectively tackle the future potential demand on health and social care services for this cohort.
- 136 The proposals represent the most efficient way in which the Department can provide a broad range of services at reduced levels of investment.
- 137 Newly commissioned services will be more targeted in their approach, shorter term in some instances and may not be available to those currently accessing support.
- 138 More robust impact analysis will be obtained from newly commissioned services in order to inform future commissioning of preventative services.
- 139 Throughout the review process risks and potential mitigating actions have been identified and this has been further informed by feedback during the consultation process (Appendix C). Although the amended proposals fully take this into account, careful transition planning and implementation will be required together with close work with current providers to minimise the impact of the proposed changes. In addition, the Unified Prevention Board will continue to identify mitigating opportunities and the impact of changes once implemented will be assessed on an ongoing basis.

Background Papers

- *Our Health, Our Care, Our Say: A New Direction for Community Services* (2006) – Government White Paper
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/272238/6737.pdf
- *Draft Care Bill* (2013) – Government Legislation
<http://www.parliament.uk/business/committees/committees-a-z/joint-select/draft-care-and-support-bill/>
- *Leicestershire's Health and Wellbeing Strategy, 2013-2016* (2013)
[http://politics.leics.gov.uk/Published/C00000135/M00003397/AI00033271/\\$FFAppendixD.doc.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003397/AI00033271/$FFAppendixD.doc.pdf)

- Report to Cabinet: 12 June 2012 - Request for Exception to Contract Procedure Rules – Voluntary Sector and Housing Related Support Services
[http://politics.leics.gov.uk/Published/C00000135/M00003392/AI00031503/\\$IRequestforExceptiontoContractProcedureRulesVolSectorandHsgRelatedSupport120612.doc.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003392/AI00031503/$IRequestforExceptiontoContractProcedureRulesVolSectorandHsgRelatedSupport120612.doc.pdf)
- Report to Cabinet, 14 September 2012: *Proposed Service Model for Assistive Technology and Housing Related Support for Older People*
[http://politics.leics.gov.uk/Published/C00000135/M00003613/AI00032268/\\$BProposedServiceModelforAssistiveTechnologyandHousingRelatedSupportServicesforOlderPeople110912.doc.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003613/AI00032268/$BProposedServiceModelforAssistiveTechnologyandHousingRelatedSupportServicesforOlderPeople110912.doc.pdf)
- Report to Cabinet, 12 June 2013 - *Proposed Service Model for Assistive Technology and Housing Related Support for Older People - Outcome of the Consultation*
[http://politics.leics.gov.uk/Published/C00000135/M00003632/AI00034758/\\$7proposedmodelassistivetechlogyandhousingrelatedsupportolderpeople.docA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003632/AI00034758/$7proposedmodelassistivetechlogyandhousingrelatedsupportolderpeople.docA.ps.pdf)
- Report to Cabinet, 12 June 2013 - *Request to Extend Contracts - Voluntary Sector and Housing Related Support Services to Support Development of a Revised Early Intervention and Prevention Offer*
[http://politics.leics.gov.uk/Published/C00000135/M00003632/AI00034764/\\$13extendcontractsvoluntarysectorandhousingrelatedsupportdevelopmentofrevisedoffer.docA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003632/AI00034764/$13extendcontractsvoluntarysectorandhousingrelatedsupportdevelopmentofrevisedoffer.docA.ps.pdf)
- Report to Cabinet, 9 July 2013 - *Strategic Review of Adult Preventative Mental Health Services in Leicestershire*
[http://politics.leics.gov.uk/Published/C00000135/M00003857/AI00035014/\\$6StrategicReviewofAdultPreventativeMentalHealthServicesinLeics.docA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003857/AI00035014/$6StrategicReviewofAdultPreventativeMentalHealthServicesinLeics.docA.ps.pdf)
- Report to Cabinet, 20 November 2013 - *Strategic Review of Adult Preventative Mental Health Services in Leicestershire*
[http://politics.leics.gov.uk/Published/C00000135/M00003636/AI00036274/\\$5strategicreviewadultpreventativementalhealthservices.docx.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003636/AI00036274/$5strategicreviewadultpreventativementalhealthservices.docx.ps.pdf)
- Report to Cabinet, 4 February 2014 - *Provisional Medium Term Financial Strategy 2014/15 - 2017/18*
[http://politics.leics.gov.uk/Published/C00000135/M00003987/AI00036934/\\$MTFSCabinetReport4Feb2014.docA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003987/AI00036934/$MTFSCabinetReport4Feb2014.docA.ps.pdf)
- Report to Cabinet, 1 April 2014 – *Strategic Review of Preventative Services in Leicestershire*
[http://politics.leics.gov.uk/Published/C00000135/M00003989/AI00037761/\\$7StrategicReviewofPreventativeServicesinLeicestershire.docA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003989/AI00037761/$7StrategicReviewofPreventativeServicesinLeicestershire.docA.ps.pdf)
- Report to Cabinet, 1 April 2014 – *Strategic Review of Carer Support Services in Leicestershire*
[http://politics.leics.gov.uk/Published/C00000135/M00003989/AI00037761/\\$7StrategicReviewofPreventativeServicesinLeicestershire.docA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003989/AI00037761/$7StrategicReviewofPreventativeServicesinLeicestershire.docA.ps.pdf)

List of Appendices

Appendix A: Contracts that form part of the Prevention offer and proposed end dates

Appendix B: Prevention Consultation Summary

Appendix C: Overview of risks and mitigating actions

Appendix D: EHRIA – Supporting Independence in Older People

Appendix E: EHRIA – Social Groups

Appendix F: EHRIA – Other Vulnerable People: Homelessness

Appendix G: EHRIA – Other Vulnerable People: Domestic Abuse

Appendix H: EHRIA – Eligible services

Appendix I: EHRIA Visual/Dual Sensory Impairment

Relevant Impact Assessments

Equality and Human Rights Impact implications

140 The County Council, in undertaking the strategic review of preventative services, recognises that people accessing current service provision represent a cohort of vulnerable people who may be disadvantaged. Equalities considerations and Human

Rights have been inherent to the strategic review process and detailed impact assessments have been developed to inform revised proposals.

- 141 A series of six full EHRIA have been completed by the review team and are attached as appendices:
- Appendix D: EHRIA – Supporting Independence in Older People
 - Appendix E: EHRIA – Social Groups
 - Appendix F: EHRIA – Other Vulnerable People: Homelessness
 - Appendix G: EHRIA – Other Vulnerable People: Domestic Abuse
 - Appendix H: EHRIA – Eligible services
 - Appendix I: EHRIA Visual/Dual Sensory Impairment
- 142 The DEG have been advising the review team throughout the process, in order to ensure due regard of Equalities and Human Rights issues relating to the review has been effectively undertaken.
- 143 It is recognised that the significant savings requirements for prevention services, as set out in the MTFS (February 2014) are likely to have a negative impact in terms of the number of people able to access support. However, it is important to highlight that this negative impact is not expected to disproportionately affect any one protected characteristic or contravene any specific Article under the Human Rights Act. Detailed transition planning alongside current providers and further engagement with partners throughout the coming year will ensure mitigating actions are effectively implemented.
- 144 Newly commissioned services will be designed to ensure that support is available to those most at risk and that Equalities and Human Rights considerations are robustly monitored.

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