CYNGOR Sir Ddinbych Denbighshire COUNTY COUNCIL

To: Members of the Partnerships Scrutiny Committee

Date: 13 December 2013

Direct Dial: 01824 712554

e-mail: dcc_admin@denbighshire.gov.uk

Dear Councillor

You are invited to attend a meeting of the **PARTNERSHIPS SCRUTINY COMMITTEE** to be held at **9.30 am** on **THURSDAY, 19 DECEMBER 2013** in **CONFERENCE ROOM 1A, COUNTY HALL, RUTHIN**.

Yours sincerely

G. Williams
Head of Legal and Democratic Services

AGENDA

PART 1 - THE PRESS AND PUBLIC ARE INVITED TO ATTEND THIS PART OF THE MEETING

1 APOLOGIES

2 ELECTION OF VICE-CHAIR

To elect a Vice-Chair for the Committee for the remainder of the 2013/2014 municipal year.

3 DECLARATION OF INTERESTS

Members to declare any personal or prejudicial interests in any business identified to be considered at this meeting.

4 URGENT MATTERS AS AGREED BY THE CHAIR

Notice of items which, in the opinion of the Chair, should be considered at the meeting as a matter of urgency pursuant to Section 100B(4) of the Local Government Act 1972.

5 MINUTES OF THE LAST MEETING (Pages 5 - 14)

To receive the minutes of the Partnerships Scrutiny Committee held on 7 November 2013 (copy enclosed).

6 SINGLE ACCESS ROUTE TO HOUSING - COMMON ALLOCATION POLICY (CAP) (Pages 15 - 70)

To consider a report by the Community Housing Manager / Senior Officer – Strategy and Partnerships (copy enclosed) pre-decision Partnerships Scrutiny Committee of the details contained within the Common Allocations Policy (CAP) for those being placed on the single common waiting list.

9.40 a.m. – 10.10 a.m.

7 FRAMEWORK FOR DELIVERING INTEGRATED HEALTH AND SOCIAL CARE FOR OLDER PEOPLE WITH COMPLEX NEEDS (Pages 71 - 108)

To consider a report by the Corporate Director: Modernisation and Wellbeing (Statutory Director of Social Services) / Head of Adult and Business Services (copy enclosed) to consider a the draft Statement of Intent between the Council and the BCUHB for integration of health and social services prior to its submission to the Welsh Government for consideration.

10.10 a.m. – 10.40 a.m.

~~~~~~ BREAK 10.40 a.m. – 10.50 a.m. ~~~~~~

8 NATIONAL ADOPTION SERVICE (Pages 109 - 134)

To consider a report by the Head of Children and Family Services (copy enclosed) to seek Partnerships Scrutiny Committee's views on the plan to establish a National Adoption Service for Wales, supported by Regional Adoption Collaboratives and also to seek support that Wrexham County Council continues to act as the Lead Authority for the North Wales Adoption Service.

10.50 a.m. – 11.20 a.m.

9 SCRUTINY WORK PROGRAMME (Pages 135 - 162)

To consider a report by the Scrutiny Coordinator (copy enclosed) seeking a review of the committee's forward work programme and updating members on relevant issues.

11.20 a.m. – 11.50 p.m.

10 FEEDBACK FROM COMMITTEE REPRESENTATIVES

To receive any updates from Committee representatives on various Council Boards and Groups

11.50 a.m. – 12.00 p.m.

MEMBERSHIP

Councillors

Jeanette Chamberlain-Jones	Pat Jones
Bill Cowie	Margaret McCarroll
Ann Davies	Dewi Owens
Meirick Davies	Merfyn Parry
Alice Jones	Bill Tasker

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PARTNERSHIPS SCRUTINY COMMITTEE

Minutes of a meeting of the Partnerships Scrutiny Committee held in the Council Chamber, Russell House, Churton Road, Rhyl on Thursday, 7 November 2013 at 9.30 am.

PRESENT

Councillors Jeanette Chamberlain-Jones (Chair), Bill Cowie, Meirick Davies, Pat Jones and Merfyn Parry

Councillors Bobby Feeley, Lead Member for Social Care and Children's Services and Eryl Williams, Deputy Leader and Lead Member for Education were also in attendance for specific agenda items relating to their portfolios.

ALSO PRESENT

Corporate Directors: Modernisation and Wellbeing (SE) and Economic and Community Ambition (EM), Partnerships and Communities Team Manager (LG), Commissioning and Evaluation Officer (JJH), LSCB Business Manager (GH), Scrutiny Coordinator (RE) and Committee Administrator (KEJ)

QUORUM

The Chair reported that the meeting was inquorate but Councillor Bill Cowie was expected shortly and a quorum would then be reached. It was agreed to proceed with the meeting on the basis that any decisions made could be ratified upon his arrival.

1 APOLOGIES

Councillors Ann Davies, Alice Jones, Margaret McCarroll, Dewi Owens and Bill Tasker. Apologies had also been received from Councillors Hugh Evans, Leader and Lead Member for Economic Development and David Smith, Lead Member for Public Realm who had been unable to attend for those agenda items relating to their portfolios.

2 APPOINTMENT OF VICE CHAIR

The committee noted that no CVs/statements had been received for the position of Vice Chair of the committee for the remainder of the 2013/14 municipal year.

3 DECLARATION OF INTERESTS

Councillor Meirick Davies declared a personal interest in agenda item number 7 – 'North Wales Fire and Rescue Authority Improvement Objectives for 2014/15 and beyond' because he was Chair of the North Wales Fire and Rescue Authority.

4 URGENT MATTERS AS AGREED BY THE CHAIR

No urgent matters had been raised.

5 MINUTES OF THE LAST MEETING

The minutes of the Partnerships Scrutiny Committee held on 26 September 2013 were submitted.

Accuracy – Page 5 – Present – Dr. Dawn Marjoram had been present at the last meeting but her attendance had not been recorded within the minutes.

Matters Arising – Page 6 – Item No. 5 Minutes Matters Arising – The Scrutiny Coordinator confirmed that enquiries had been made regarding the relocation of CAMHS and she would pursue a response.

Page 6 – Item No. 6 Higher Education in North East Wales – The Chair reported upon a letter she had received from Professor Scott raising concerns regarding the manner in which he had been addressed at the last meeting. An apology had been issued and the Chair asked that in order to avoid a future recurrence members raise any such issues with her directly prior to the meeting. The Scrutiny Coordinator confirmed Professor Scott had been invited to attend a future meeting.

RESOLVED *that, subject to the above, the minutes of the meeting held on 26 September 2013 be approved as a correct record.*

6 FAMILIES FIRST

Councillor Eryl Williams introduced the report (previously circulated) highlighting the excellent work undertaken and comprehensive programme in place to provide support for families. The report detailed the providers' progress to date in delivering their services, the Families First Action Plan, and Outcome 4 of the BIG Plan. Details of the Families First Programme in Denbighshire (Appendix 1) together with a confidential case study (Appendix 2) had been attached to the report.

The Families First Programme promoted the development of effective multi-agency systems and support, with a clear emphasis on prevention and early intervention for families. The Partnerships and Communities Team Manager (PCTM) and the Commissioning and Evaluation Officer (C&EO) elaborated upon the range of services provided in Denbighshire and progress in delivering projects together with the latest programme activities. In terms of funding £1.2m (2012/13) and £1.3m (2013/14) had been allocated to support non-commissioned and strategically commissioned services. Indications were that funding for 2014/15 would be £1.3m. To enable the committee to consider the confidential case study (Appendix 2 to the report) it was ***RESOLVED*** *that under Section 100A of the Local Government Act 1972, the Press and Public be excluded from the meeting on the grounds that exempt information would likely be disclosed as defined in Paragraphs 12 and 13 of Part 4 of Schedule 12A of the Act.*

The PCTM used the case study to illustrate the effectiveness of the multi-agency approach in supporting a particular family leading to positive outcomes. After consideration of the case study the meeting resumed in ***OPEN SESSION***.

The committee noted the range of services provided and the progress in delivering those services within the Family First Programme. Members commended the successful partnership working as evidenced by the family case study and acknowledged the value of the programme for families. During debate the committee sought assurances regarding future funding allocations and clarification of future service provision. In terms of the sub-regional commissioning project officers were also asked to elaborate upon how key benefits would be achieved and outcomes measured. Officers responded that –

- specific grant funding to support Families First was allocated by the Welsh Government – it was possible that future funding may form part of the general funding allocation
- despite being a five year programme funding was allocated annually which resulted in difficulties in terms of future planning provision and contracts. The Council was required to report to the Welsh Government on a quarterly basis on funding expenditure
- current contracts/service level agreements ended on 31 March 2014 and the Families First Project Board was being reconvened to project manage the commissioning process and make recommendations to the Operational Group
- regional learning sets had been established as part of the programme which should produce financial savings for partners making processes more efficient across a number of areas – by working on this sub-regional commission project (with Wrexham and Conwy Councils), the provision of a Young Carers Service in Denbighshire would save £31k collectively from April 2014 with no detriment to the level of service – other initiatives included streamlining processes for funding applications and the development of a toolkit for tender documentation and generally working together with other agencies to deliver services in a better way.

The committee welcomed the excellent work being carried out but highlighted the difficulties in evaluating the overall impact and success of the programme and asked whether more measureable outcomes could be provided. It was suggested that future reports include the actual figures behind the percentages and consideration be given to the merits of introducing a traffic light system to denote progress. Officers acknowledged the difficulties of measuring performance, particularly across collective agencies, and were working on systems to capture data and develop outcome tools. Actual figures in addition to percentages could be provided. The Chair thanked officers for the report and it was –

RESOLVED *that –*

(a) subject to members' comments above, the providers' progress in delivering services and the latest information regarding programme activities in relation to the Families First Programme in Denbighshire be noted, and

(b) a further progress report be submitted to the committee in approximately eight months' time or such earlier time if the funding allocation expected for 2014/15 did not materialise.

Upon Councillor Bill Cowie's arrival at this point the committee became quorate and previous decisions were ratified.

7 NORTH WALES FIRE AND RESCUE AUTHORITY IMPROVEMENT OBJECTIVES FOR 2014/15 AND BEYOND

[Councillor Meirick Davies declared a personal interest in this item]

A copy of the public consultation document on the North Wales Fire and Rescue Authority's plans for fire and rescue services in North Wales for 2014/15 and beyond (previously circulated) was submitted for members' consideration and comments. Chief Fire Officer Simon Smith (CFO) and Deputy Chief Fire Officer Dawn Docx (DCFO) were in attendance at the meeting.

The CFO delivered a power point presentation on the proposed improvement objectives and plans to provide and deliver future services in North Wales. The three proposed improvement objectives covered the following –

- 1 – to help keep people and communities safe by preventing deaths and injuries from accidental fires in living accommodation
- 2 – to ensure that North Wales gets the best possible level of service within financial constraints, use a variety of management solutions to optimise fire and rescue cover in the area
- 3 – to implement a 3-year financial plan for 2014/15 to 2016/17 that funds the current level of service, but that aims to limit the cost of doing so to the equivalent of an extra £1 per year per head of population

In presenting the future plans the CFO elaborated upon the reasoning behind those proposals and provided some background information, including savings already made by the Fire Authority, together with key information about the service. The potential impact in budgetary terms was also highlighted. Councillor Meirick Davies, Chair of the North Wales Fire and Rescue Authority highlighted changes in the service with a shift of emphasis from reactive to prevention together with the accompanying change in working patterns and reallocation of resources. He advised that Corporate Governance Committee had considered budget proposals the previous day and it would have been useful if they too had heard the rationale behind the current proposals. The reality of budget cuts in the Fire Authority could lead to the loss of fire stations and fire officers.

In terms of the budget proposals for 2014/15 and in light of the local government revenue settlement, Fire Officers advised that the financial proposals were being revisited to explore the possibility of freezing the budget for a fourth year. The Corporate Director: Modernising and Wellbeing confirmed a 7.7% reduction in the Council's budget in real terms and the proposals detailed in the consultation report would amount to an additional contribution of £90k.

Members recognised the valuable service provided by the Fire and Rescue Authority and reported upon a number of positive examples based on their own personal experiences and good work carried out within their communities. The Fire Officers and Councillor Davies responded to questions raised as follows –

- reported upon the excellent working relationship between the Fire Authority and Council departments cooperating with a view to safeguarding the most vulnerable within society – 30% of referrals came from partners which had exceeded the set target of 25%
- elaborated upon the progamme of home fire safety checks and the supply and installation of smoke alarms free of charge together with a range of other interventions and precautions to prevent fire related incidents
- confirmed that the map denoting whole time and retained fire stations in the presentation differed from that circulated as part of the consultation and had been previously emailed to committee members with the presentation slides
- highlighted the potential impact on services as a result of not increasing the budget and confirmed a special meeting of the Fire Authority had been scheduled for 5 December to further discuss the budget for 2014/15.

The Chair thanked the Fire Officers for their attendance at the meeting and interesting and informative presentation.

RESOLVED *that the Fire and Rescue Authority's consultation document on its future plans be received and the latest position regarding the Authority's draft budget for 2014/15, in light of the recent Welsh Government announcement on future funding for North Wales local authorities, be noted.*

At this juncture (10.45 a.m.) the meeting adjourned for a refreshment break.

8 CONWY & DENBIGHSHIRE LOCAL SAFEGUARDING CHILDREN BOARD (LSCB) ANNUAL REPORT AND UPDATE ON THE INTEGRATION OF THE NORTH WALES LOCAL SAFEGUARDING CHILDRENS BOARDS

Councillor Bobby Feeley introduced the report (previously circulated) presenting Conwy & Denbighshire Local Safeguarding Children Board's Annual Report and updating members on progress made towards the integrations and collaboration of the North Wales Local Safeguarding Children Boards.

The LSCB Annual Report provided a brief overview of the Board's operations including its governance and financial arrangements. It also summarised key priorities for 2012/13 together with progress made. The Business Manager, Conwy & Denbighshire LSCB (BM) elaborated upon other key points relating to –

- membership and attendance
- financial contributions from partner organisations, and
- the annual self-assessment process.

In terms of developing regional approaches the North Wales LSCBs had agreed four areas of work which were being progressed further. Discussions were continuing on the role and governance of the Regional Safeguarding Children Board and its relationship to local arrangements. It was highlighted that the current public services review would likely impact on regional arrangements.

The committee considered the development of regional arrangements and acknowledged that certain processes could benefit from a collaborative approach. However members stressed the importance of ensuring that the current levels of protection for children locally would not be jeopardised as a result and the robust arrangements for safeguarding children were maintained. In scrutinising the report members expressed particular concern regarding the level of domestic violence and raised questions regarding contributory factors to domestic abuse, the role of the police and referral process and sought assurances regarding how the issue was being addressed. Further assurances were sought regarding progress in other areas of safeguarding children. In responding to members officers –

- confirmed that domestic abuse continued to be a priority for the LSCB with work on-going to identify children experiencing difficulties due to their parents/carers drug and alcohol, mental health or domestic violence problems to ensure concerns did not escalate from safeguarding to child protection issues – the Head of Children and Families Services and Youth Justice Services Strategic Manager were working at a strategic level to tackle this issue from the child's perspective. They would now be attending Community Safety Partnership (CSP) meetings on a regular basis
- acknowledged a mix of contributory factors to domestic abuse and the difficulties in determining the main factors and whether more cases had been linked to domestic violence as a result of the recession and financial pressures faced by families
- elaborated upon the involvement of the North Wales Police and other agencies within the process advising that LSCB considered the number of domestic abuse incidents involving children and young people on a quarterly basis – this information could be included as a confidential appendix in future reports to the committee
- explained that more targeted and intelligent information was being provided for referrals via CID16 forms to enable better identification of those at risk and for the appropriate help to be directed at families – the Joint Referral and Assessment Panel assessed those referrals and a Multi-Agency Safeguarding Hub was also being piloted in Wrexham
- whilst a very small proportion of referrals resulted in children being taken into care many families benefited from support provided by Children's Services and programmes such as Families First
- confirmed that Betsi Cadwaladr University Health Board had recruited their Safeguarding Team in order to support the local safeguarding agenda.

[At this point Councillor Meirick Davies left the meeting and it became inquorate.]

Members noted the crucial contribution of partners to the local safeguarding agenda and the importance of the committee's role in monitoring the LSCB's work. As domestic violence was still a significant problem within communities members asked that particular reference be made to this issue in future committee reports together with work undertaken in that regard with the Community Safety Partnership. The importance of considering trends together with the effectiveness of the measures introduced to address them was also highlighted.

The Chair referred to her role on the Adoption & Fostering Panels and the excellent work being carried out to support families in that regard and conveyed the committee's appreciation for that work.

RECOMMENDED *that –*

(a) subject to members' comments above the Conwy and Denbighshire Local Safeguarding Children Board's Annual report be received and progress made towards the collaboration of the North Wales Local Safeguarding Children Boards be noted;

(b) a further report be submitted to the committee in approximately six months' time containing the following –

- *progress in delivering the key priorities for 2013/14 and information on key priorities for 2014/15*
- *an analysis of data and trends identified in 2013/14 to determine which approaches worked well and which were not as successful, and*
- *an update on the latest national and regional developments with respect to Local Safeguarding Children Boards.*

9 TRANSFORMING TRANSPORT - REGIONAL PASSENGER TRANSPORT COLLABORATION PROJECT UPDATE

The Corporate Director: Economic and Community Ambition (CDECA) submitted a report (previously circulated) updating the committee on progress with the Regional Passenger Transport Collaboration project since Cabinet approved the Outline Business Case in May 2013. The Project Scope had been attached to the report.

A regional project manager had been appointed funded through the European Social Fund and a revised project plan had been agreed by all six councils. A progress report was provided on the following areas identified for early implementation –

- a joint approach to CRB (DBS) checks – good progress had been made and a business case would be developed for a single centralised service to achieve a more resilient and cost effective means of checking drivers resulting in no budget pressure for the authority
- a joint approach to Concessionary Fares and Concessionary Passes – this area was more complex and was still being explored
- review and joint procurement of Passenger Information (including time tables and other paper/electronic/real time information) – external support would be sought to consider appropriate systems and software to develop this approach and provide greater alignment and integration of services
- other potential projects included the development of Community Transport options and closer collaboration on Road Safety works and programmes.

The Chair queried the portability of CRBs between departments and between outside organisations and the Council, the Corporate Director: Modernising and Wellbeing reported upon work being undertaken by HR in that regard. In terms of

the joint approach to CRB checks for passenger transport the committee sought assurances that the robust arrangements currently in place locally would not be diluted as a result. The CDECA advised of the intention to use best practice across the region in order to both maintain and raise standards. With regard to concessionary fares and passes clarification was sought regarding the reduced need for equipment and subsequent reduction in maintenance costs. The CDECA understood this reference referred to the actual equipment which produced concessionary passes and agreed to check the reference during a meeting with the Project Board the following day. She also agreed to impress upon the Board the committee's views that the robust processes for dealing with CRB checks must not be compromised as a result of the joint approach.

RECOMMENDED *that –*

(a) subject to members' comments above the progress report on the Regional Passenger Transport Collaboration project be received and noted, and

(b) any significant future developments in progressing the collaboration project be brought to the committee's attention for information/action as appropriate.

10 SCRUTINY WORK PROGRAMME

The Scrutiny Coordinator submitted a report (previously circulated) seeking members' review of the committee's future work programme and providing an update on relevant issues. A draft forward work programme (Appendix 1); Cabinet's forward work programme (Appendix 2) and Progress with Committee Resolutions (Appendix 3) had been attached to the report.

The Scrutiny Coordinator reported upon changes to the work programme and various matters requiring attention. During discussion the committee –

- agreed to invite the relevant Lead Cabinet Members to attend the next meeting when specific items relating to their portfolios would be considered
- agreed that the Local Safeguarding Children Board report be scheduled with the Community Safety Partnership report for the meeting in May/June 2014 with particular reference to domestic violence matters and work undertaken with and to complement both groups
- noted the update on actions arising from the minutes of the last meeting as detailed within the committee's information brief (previously circulated) together with information reports provided on (1) Heritage and Countryside Review Update; (2) Conwy & Denbighshire Joint Local Service Board, and (3) Leader's service visit with the Business Planning and Performance Team.

RECOMMENDED *that, subject to the above amendments and requests, the work programme as detailed in Appendix 1 to the report be approved.*

11 FEEDBACK FROM COMMITTEE REPRESENTATIVES

In the absence of Councillor Margaret McCarroll, the Chair read out her report on the in-house provider visit to Hafan Deg Day Centre undertaken with Councillor

Bobby Feeley on 7 October 2013. The report had been largely positive but some concerns had been raised about uncertainty surrounding the Centre's future, and the integration of service users from the Prestatyn area who had until recently attended the Llys Nant Day Centre. The Scrutiny Coordinator confirmed that the report and feedback from other in-house provider visits would be considered by Performance Scrutiny Committee in March 2014.

RECOMMENDED *that the verbal report on Councillor Margaret McCarroll's visit to Hafan Deg Day Centre be noted.*

The meeting concluded at 12.10 p.m.

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Report to:	**Partnerships Scrutiny Committee**
Date of Meeting:	**19th December 2013**
Lead Member/Officer:	**Lead Member for Customers and Communities/ Senior Officer Strategy and Partnership**
Report Author:	**Senior Officer Strategy and Partnership**
Title:	**Common Allocations Policy – Single Access Route to Housing**

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1. What is the report about?

1.1 The report updates members on the development of a Single Access Route to Housing (SARTH) across the North East Wales sub region and seeks support of the Common Allocations Policy (CAP) for implementation locally.

2. What is the reason for making this report?

2.1 To provide information regarding the details of the revised CAP following the consideration of feedback from the CAP consultation, research and legal opinion. The CAP has been agreed by the SARTH steering group and is going through the committees/boards of the partners organisations.

2.2 To seek support to continue with the project and implement the CAP locally from late 2014.

3. What are the Recommendations?

3.1 For members to consider the CAF and to support the new allocations policy for Denbighshire (appendix 1).

4. Report details.

4.1 SARTH (Single Access Route to Housing) is a partnership project between all the major social landlords in north east Wales, covering the local authority areas of Conwy County Borough, Denbighshire, Flintshire and Wrexham County Borough. The partners are Conwy County Borough Council, Denbighshire County Council, Flintshire County Council, Wrexham County Borough Council, Cartrefi Conwy, Clwyd Alyn Housing association, Cymdeithas Tai Clwyd, North Wales Housing and Wales and West Housing.

4.2 **Aim**

4.2.1 All partners recognise there is far greater demand for rented homes in the region with relatively few vacancies within Council/Housing Association properties. The overall aim of SARTH is to provide a common access route to a range of affordable housing options which is transparent, legal, efficient and accessible to all sections of the community. SARTH will improve the service to customers by providing a single, common waiting list with one allocation policy across Local Authorities and Housing Associations across North East Wales. The allocation of social housing must be fair, consistent, and prioritise those people within our communities according to their housing needs.

4.2.2 The SARTH policy moves away from focusing purely on social housing and towards providing realistic advice on a range of housing options. Denbighshire receives

approximately 1050 housing applications per annum but only has 200 vacancies per year. The application forms involve significant administration in terms of printing, inputting, pointing and dealing with queries. Many of these applicants have low points and are unlikely to be allocated housing in their chosen areas. The SARTH CAP policy aims to provide useful, consistent housing advice to all requesting it. The aim is to help customers make informed choice and will cover the whole range of affordable housing options including social housing, private rented accommodation, home ownership and other alternatives. This approach helps to manage expectations and for customers to understand fully their realistic housing options.

4.2.3 The draft policy is simpler to understand than the current points based system. Applicants are given reasonable preference determined by a banding scheme which lists people in date order of their application within each band. Reasonable preference is given to those who fall within the statutory categories such as homelessness, overcrowding, living in unsanitary conditions, medical grounds or hardship.

4.2.4 The priority given to applicants within the banding scheme will vary according to whether the applicant has an urgent housing need, whether the applicant has a local connection and the date order of the application. Applicants who are not in the categories entitled to reasonable preference will not be given any priority in the banding scheme and will not be recorded on the housing register. However, advice and assistance will be provided to assist those applicants find affordable housing that meets their need. The policy allows for applicants to be dropped to a lower banding where their behaviour affects their suitability to be a tenant. **Appendix A** provides further details.

4.2.5 The public consultation on the Common Allocation Policy took place between 4th March and 30th April 2013 including surveys to 10% of applicants on the register and 10% of tenants in their housing stock. Each partner placed the survey and draft policy on their website. There were local consultation events, a regional stakeholder event and coverage in the local press. There were 450 survey responses and the key findings were:

- 90% of people responding stated they agreed with the proposal for a single register.
- 80% of people agreed with the proposal to only put people with a recognised housing need on the register.
- 82% of people agreed with the proposed banding scheme
- 89% of people agreed that people with a local connection be given priority over those with no local connection.

4.2.6 Following the consultation there were some amendments to the policy in line with feedback received. The Draft Common Allocation Policy was submitted for legal opinion in August 2013 and the Regional Steering Group has now agreed that this final version be submitted for political approval by all the partner organisations. The policy will remain subject to annual review.

4.3 **Regional Policy and Register**

4.3.1 The core aim of the regional project has been to develop a Joint Allocation Register and a Common Allocations Policy across the North East Wales sub region. Currently all the partner organisations have their own IT systems. This means that the region can implement a Common Allocation Policy relatively easily. However, the development of a regional register to support the policy is more complex and requires an IT system to be purchased or developed. The regional project has carried out some work to consider the

most appropriate IT solution to support the policy and further work is required. A further report will be taken to Scrutiny once the options and costs are evaluated fully.

4.3.2 In light of additional pressures facing Local Authorities, Denbighshire believes there needs to be additional work to identify cost savings and benefits of a regional register before investment in a new IT system can be proposed. However, the regional policy can be implemented with county based common housing registers where the Local Authority can host the system for the Housing Associations in the Local Authority.

4.4 Local perspective

4.4.1 Denbighshire County Council is committed to continuing with the regional project but would also like to seek approval to move ahead locally within the county. Homelessness, housing options and warden services are currently undergoing a restructure and the CAP can only be implemented once this is finalised. This is likely to be approximately September 2014 for the Local Authority and Denbighshire Housing Associations. The consultation feedback demonstrates support for the new policy, enhanced housing options advice and only allowing those with an identified housing need to be added to the register.

4.4.2 Denbighshire County Council has taken a step towards delivering the enhanced service by focusing more and more on the housing option approach in recent years where there is a threat of homelessness. The CAP will involve an increased demand for housing options advice and this is being fed into the restructure as part of a wider duty which will be placed on the Local Authority in terms of homelessness under the new housing legislation being developed currently.

4.5 **Housing Register**

4.5.1 The proposals above to adapt local management of the register can commence from approximately September 2014. However, the full move across to a common housing register shared with Housing Associations will require a more phased approach. The current housing register is based on a points system and contained within Capita Open Housing.

4.5.2 The proposal would be to progress the implementation phase to prepare for a move across to the new banding system. This would include working with Corporate IT to develop a test system that could run behind the existing register so that any impacts can be assessed with a full move over planned for autumn 2014. The IT development will need to include options for hosting the register and providing access to Housing Associations. The necessary IT development time would give officers in the team the opportunity to carry out cleansing work on the current register by contacting people on the register to discuss their current application and status and ensure all information is fully up to date and explain the changes to the register and allocations policy.

5. How does the decision contribute to the Corporate Priorities?

5.1 The project links directly into the following corporate priorities:

- Ensuring access to good quality housing
- Responding to demographic change
- Customer focus approach – improving service delivery a single contact point and early realistic housing options advice

6. What will it cost and how will it affect other services?

6.1 The project has secured the following funding:

- Nearly £120,000 of Social Housing Management Grant (SHMG) has been provided from the Welsh Government to fund this innovative project. The project is awaiting confirmation of the amount for 2014/15 from Welsh Government.
- The SHMG element has been match funded by the partners of the project

7. What are the main conclusions of the Equality Impact Assessment (EqIA) undertaken on the decision? The completed EqIA template should be attached as an appendix to the report.

7.1 A full project wide Equality Impact Assessment has been undertaken with assistance from Tai Pawb (see **Appendix B**).

8. What consultations have been carried out with Scrutiny and others?

The SARTH project originated from a Scrutiny discussion involving Housing Services and Housing Associations on 16th September 2010. The project has been to a range of committees including:

- Various scrutiny committees – Communities and Partnerships
- Informal Cabinet – 4th July 2011
- Communities Scrutiny - 14th June 2012
- Public consultation on CAP – March to April 2012
- Project groups - steering and working groups

9. Chief Finance Officer Statement

The capital and revenue costs to deliver the IT solution will need to be clearly identified & contained within the available funding when confirmed. The IT costs will need to be agreed with all partners & closely monitored against the funding. Associated benefits will need to be determined once the preferred IT solution has been identified.

10. What risks are there and is there anything we can do to reduce them?

10.1 The risks for each project are monitored and evaluated regularly as part of the project management approach by the Project Manager and each of the organisations involved.

11. Power to make the Decision

Section 167 of the Homelessness Act 1996 as amended by the Homelessness Act 2002 relates to allocations.

Articles 6.3.3(a) and 6.3.4(ch) outlines Scrutiny's powers with respect of policy development and formulating recommendations to Cabinet.

Contact Officer:
Senior Officer Strategy and Partnership
Tel: 01824 712282

Appendix A

Common Allocations Policy

A Single Access Route to Housing for north east Wales

All the major social landlords in the local authority areas of Conwy County Borough, Denbighshire and Flintshire have come together to design a single access route to housing. The partners in this collaboration are:

- Conwy County Borough Council
- Denbighshire County Council
- Flintshire County Council
- Cartrefi Conwy
- Clwyd Alyn Housing Association
- Cymdeithas Tai Clwyd
- North Wales Housing
- Wales & West Housing

All partners recognise that there is high demand for rented homes in the region and too few vacancies to meet demand. We must be realistic about this. It requires us to do two things:

Firstly, we will provide the best, most useful, consistent and accessible advice and information to everyone who comes to us looking for housing. We aim to help customers make the most informed choice about how to find a home to meet their needs. This advice must cover the whole range of affordable housing options, including social housing, private rented accommodation, home ownership and other alternatives.

Secondly, we will allocate our social housing stock in a transparent, fair, consistent and accessible way, which prioritises the people in our communities according to their housing needs and which meets our legal requirements.

Working together to these ends, we can share our strengths and good practice and place the customer at the heart of everything we do. We will simplify the access route to advice and to housing with one clear purpose: to help people find a home to meet their needs.

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Overview of the Common Allocations Policy

This Common Allocations Policy (CAP) has been developed by all partners in collaboration and sets out how partners will achieve the following aim:

- To allocate our social housing stock in a transparent, fair, consistent and accessible way, which prioritises the people in our communities according to their housing needs and which meets our legal requirements.

Legal Context

This policy is fully compliant with the Housing Act 1996 as amended by the Homelessness Act 2002 which provides the legislative policy for allocations policy. The following aspects of this Act have guided the development of this policy:

- Section 167(2) of the Housing Act 1996, as amended by the Homelessness Act 2002, requires that this policy ensures that housing is allocated so that reasonable preference is given to people who fall within certain categories (as defined in section 8 below).
- Section 167(2) also provides that additional preference may be given to people falling within these categories who have urgent housing needs.
- Section 167(2A) provides that within the group of applicants who must be given reasonable preference, priority may be given to applicants who have a local connection with the local authority area as defined in section 10 below.
- Section 167(2A) provides that within the group of applicants who must be given reasonable preference, priority may be reduced where there is evidence of any behaviour by an applicant (or a member of their household) which effects their suitability to be a tenant or because of financial resources available to the person, which it would be reasonable for them to use to meet their housing needs.

The partners to this policy have also taken into account the contents of the “Code of Guidance for Local Authorities: Allocation of Accommodation and Homelessness 2012”, published by the Welsh Assembly in August 2012.

Consistency combined with a local approach

The common allocation policy delivers a uniform assessment of housing need across the region, providing fairness and consistency to the customer, taking into account people’s individual needs and expressed preferences.

The policy has been designed so that each partner is able to target the housing stock in each county at the people in their own communities who are most in housing need.

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There is a consistent application process for customers. Each partner with properties in an area chosen by an applicant will be aware of the application and able to give the applicant the appropriate priority in the allocation process.

The common approach delivers both choice and ease of access to customers and an efficient means for partners to consistently meet housing need.

The Housing Register and the Banding Scheme

The policy is founded on the principle that reasonable preference in the letting of housing accommodation will be given to those persons who fall within the statutory categories set out in section 8 below. The relative priority given to applicants within these categories is determined by the banding scheme, according to whether they have an urgent housing need, whether they have a local connection and the date order of their application.

Applicants who are not in the categories entitled to reasonable preference will generally not be given any priority in the banding scheme and will not be recorded on the housing register. This is because of the limited supply of social housing and the responsibility to prioritise those in housing need. However, the advice and information offered to all customers will allow them to seek alternatives which will give them a greater chance of finding new accommodation.

Realistic Housing Options Advice

An enhanced housing options advice service will be provided for everyone who contacts any of the partners looking for somewhere to live.
When they first contact us, all customers will be asked where they would like to live and what their needs and preferences are. They will be advised of the full range of options open to them in their chosen areas and can then decide where their best options lie, whether via social housing or another alternative, taking into account supply and demand.

Advice and information on how to make an application and how houses are allocated will be available free of charge. Any assistance that a person may need to apply for housing will also be free of charge.

An applicant shall also be entitled, upon request, to such general information as will enable them to assess:

- How their application is likely to be treated under this policy (including in particular whether they are likely to be regarded as a member of a group of people who are to be given preference).

- Whether housing accommodation appropriate to their needs is likely to be made available to them and, if so, how long it is likely to be before such accommodation becomes available for allocation to them.

Fair and Equal Access

All partners are committed to providing equality of opportunity to all applicants who apply for housing and this policy has been subject to an equality impact assessment. This policy does not discriminate against any person on the grounds of race, gender, sexuality, age, disability, class, appearance, religion or religious beliefs, responsibility for dependents, unrelated criminal activity, being HIV positive or having AIDS, or any other matter which might cause a person to be treated with injustice.

All partners will comply with the statutory requirements relating to equal opportunities and all relevant codes of practice. The monitoring of allocations under the policy will take place to ensure that everyone is treated fairly and equitably. All applicants applying for social housing across the authorities will have their housing need assessed in a uniform way. Whenever we communicate with customers we will do so in the most appropriate language for the customer and will employ alternative forms where appropriate.

Scope of the Policy

This policy applies to all allocations of social housing made by partner landlords in the local authority areas stated in the introduction. However, this policy does not cover exchanges arranged between existing council and RSL tenants.

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Part One: Introduction

1. Guiding Principles

The policy is based on the following guiding principles:

- To ensure that preference for social housing is given to those in housing need and that those in greatest need are given the highest priority.
- To give higher priority to applicants with a local connection to the area for which they are making an application than to those who have no such connection
- To ensure that the system is fair, confidential and accessible to all potential applicants.
- To make the best use of all the available housing stock
- To ensure consistency in the way in which applicants are treated by all the partner organisations
- To provide a responsive service that treats everyone as an individual
- To empower applicants and support them to make informed and realistic choices about where they want to live
- To provide appropriate, accurate and realistic advice relating to the availability of affordable housing at the point of application
- To maximise applicant satisfaction and improve the applicant service

2. Choice

Applicants can exercise choice in relation to social housing. They will be asked to indicate the types of property they wish to be considered for in terms of location, property type and floor level. The property type they are eligible for will be determined not only by their preference but also by their household, as described in section 13 below.

3. Applications from people with support needs

Partners are committed to ensuring that applicants with support needs are provided with the correct level of support to enable them to access housing and to maintain their tenancy. To this end partners will be working with the relevant statutory and voluntary partners in order to agree an appropriate model for ensuring that support needs are addressed.

4. Confidentiality

4.1. Members operating the policy will take reasonable steps to verify information provided by applicants in support of their applications. This may include undertaking a home visit and making enquiries of third parties such as health professionals or previous landlords.

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4.2. Information provided by applicants will be retained securely and confidentially by all partner organisations.

4.3. Applicants may request a copy of information held by partners about their application, which will include information provided by third parties unless there are exceptional circumstances where it is necessary to protect the identity of the third party concerned. In such exceptional circumstances, every effort will be made to convey to the applicant the information that has been obtained from the third party in a reduced form.

4.4. Partners will share relevant information with other partners prior to an offer of housing.

5. False Information

Applicants who give false or misleading information may have their application rejected or their tenancy terminated. In some cases this may also result in criminal prosecution, substantial fines and even imprisonment.

Part Two: Eligibility

6. Eligibility for allocation of social housing

6.1. Unless an applicant falls within one of the specified ineligible groups referred to below, applications for social housing will be considered from any person or persons over the age of 16, including existing tenants.

6.2. In compliance with the provisions of the Housing Act 1996 (as amended by the Homelessness Act 2002) the following categories of applicant are ineligible for the allocation of social housing:

- Applicants subject to immigration control, unless they have been granted a status which renders them eligible, e.g. persons with refugee status, persons who have been granted Humanitarian Protection, persons who have been granted Discretionary Leave to Remain and persons who have been granted Exceptional Leave to Remain.
- Applicants from abroad who are not subject to immigration control and who are not habitually resident in the Common Travel Area (i.e. the UK, Channel Islands, Isle of Man and the Republic of Ireland). Exceptions to this are outlined in Regulation 5 of the Allocation of Housing (Wales) Regulations 2003.

6.3. As provided by section 160A(7) of the 1996 Housing Act (as amended by the 2002 Homelessness Act), the following category of person may be deemed to be ineligible for the allocation of housing accommodation:

- Applicants, or members of their household, who have been guilty of unacceptable behaviour serious enough to render them unsuitable to be a tenant of a partner landlord. The only behaviour that can be regarded as unacceptable is behaviour by the person that would have entitled a local

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authority to an outright possession order, if the person had been a secure tenant of the local authority at the time.

In assessing whether an applicant is ineligible due to unacceptable behaviour, the partner landlord will consider:

1. Where there is evidence of unacceptable behaviour, was it serious enough for a possession order to have been granted (which includes consideration of the statutory discretionary grounds for possession and questions of reasonableness)?
2. Was the behaviour serious enough to render the applicant or household member unsuitable to be a tenant (which involves consideration as to whether an immediate possession order was made or might have been made as opposed to a suspended order)?
3. Does the behaviour continue to be unacceptable at the time of application?

Partner organisations will act reasonably and consider each application on its merits. We will take into account the applicant's personal circumstances (and those of the applicant's household), including his or her health and medical needs, dependents and any other factors relevant to the application. In particular, the partners will consider any mitigating circumstances relating to mental or physical disability, or mental health. Previous unacceptable behaviour may not justify a decision to treat the applicant as ineligible where the applicant can show that the behaviour has improved.

6.4. Applicants deemed ineligible for housing will be provided with advice and guidance regarding their housing options from the Housing Options team when they contact the service.

6.5. Applicants deemed ineligible for housing will be notified of the decision and grounds of this in writing. They will also be informed of their right to request a review and their further right to appeal any decision upon review.

6.6. Where the assessing partner has reason to believe that the applicant may have difficulty in understanding the decision, arrangements will be made for the information to be explained in person, with appropriate support or translation where necessary. Furthermore, in cases where the partner has reason to believe that the applicant cannot be sent written notification or has not received it, the partner will make available at their offices a written statement of the decision and the reasons for it, so that the applicant or someone who represents the applicant may collect it within a reasonable time.

Part Three: The Allocations Scheme

This policy uses a banding scheme in order to prioritise applicants. The scheme is described in this section. It follows housing law regarding reasonable preference, additional preference and local connection. It also makes provision for reducing priority under certain circumstances. These concepts are explained in the following sections.

7. The shared housing register

7.1. As set out in the introduction, each customer contacting a partner organisation will be given housing options advice to enable them to consider their best options for finding accommodation. The advice will be tailored to individual circumstances, including whether the customer is in housing need. All customers may make an application for social housing.

7.2. The banding scheme is designed to give priority to applicants in housing need. The categories of housing need in the scheme are based on the reasonable preference categories set out in section 167 of the 1996 Housing Act, which are stated in section 9 below. Applicants who are given a banding will be recorded on the housing register, whose purpose is to manage applications from people in housing need.

7.3. Applicants who do not fall into any of the categories in the banding scheme will be given no preference for housing and will not be recorded on the housing register. Other housing options available to them will be made clear.

7.4. Customers who are eligible for the allocation of social housing but not given any priority in the scheme and not recorded on the register are still eligible to apply for social housing in situations where a vacancy occurs which cannot be let to anyone in any of the bands. In such situations, partner landlords may seek to let the property via other means, for example by advertising. In this case, any customer eligible for the allocation of social housing (including those not on the register), would be able to apply to live in the property and have their application considered.

8. Reasonable preference

The banding scheme ensures that reasonable preference is given to those applicants who fall within on or more of the following categories:

1) those who are homeless within the meaning of Part 7 of the 1996 Act; this includes people who are intentionally homeless, and those who are not in priority need;
2) those who are owed a duty by any housing authority under section 190(2), 193(2), or 195(2) of the 1996 Act (or under section 65(2) or 68(2) of the Housing Act 1985) or who are occupying accommodation secured by any housing authority under section 192(3);

3) those occupying unsanitary or overcrowded housing or otherwise living in unsatisfactory housing conditions;
4) those who need to move on medical or welfare grounds including grounds relating to a disability; and
5) those who need to move to a particular locality in the district of the housing authority, where failure to meet that need would cause hardship to themselves or to others.

9. Additional preference

The allocation policy gives additional preference to people who fall within the reasonable preference categories and who are deemed to have urgent housing needs.

10. Local Connection

10.1. For determining priorities in allocating housing accommodation to people who fall within the five reasonable preference categories, any local connection (within the meaning of section 199 of the 1996 Act, as amended by section 315 of the Housing and Regeneration Act 2008) that an applicant has with a relevant local authority area, or in rural areas with a community council area, will be taken into account, in the manner set out in this section.

10.2. In this policy, by the phrase "local connection" is meant a connection between a person and a local authority area, i.e. Conwy, Denbighshire or Flintshire.

10.3. An applicant may have a local connection to a local authority area if the applicant or a member of their household has a connection for any of the following reasons:

- They have been resident in the local authority area for the previous 12 months.
- They were resident in the local authority area for 3 out of the previous 5 years.
- They have family associations in the area. Family associations normally arise when someone has a parent, adult child, brother or sister who has resided in the area for a period of at least 5 years at the date of application and both the person and the locally residing relative in question indicate a wish for them to be near them.
- They either provide support for or receive support from some person or specialist provision in the local authority area.
- They have been in employment in the local authority area for the last twelve months.
- They have been offered a job in the local authority area but have a disability and are unable to take up the job offer because of the difficulty of finding adequate accessible housing in the area

- They need to move to the local authority area so that a member of their household with a disability can attend a school or receive specialist support, but are unable to do so because of the difficulty in finding adequate accessible housing in the area. The need must be as a consequence of the disability and the need to move to that local authority area must be evidenced.
- They are serving in the Armed Forces and are either employed or resident in the local authority area.
- They are serving in the Armed Forces or are former members of the Armed Forces who are not currently employed or resident in the local authority area but have previously been resident in the local authority area, including residency as a result of a former posting in the area while serving in the Armed Forces.

10.4. In the situation where a local authority partner has accepted a full duty towards an applicant under homelessness legislation, the applicant will be deemed as having a local connection to the relevant local authority area for the purposes of this allocation policy.

10.5. An applicant may have a local connection to one local authority area within the north east Wales region but not to another. As a result, if an applicant applies to more than one county, they may be placed in different bands with respect to different local authority areas.

10.6. Partners will retain the capacity to refine local connection criteria in particular circumstances via the use of local lettings policies, as per section 17 below.

11. The banding scheme

11.1. The banding scheme consists of four bands, from one to four in descending order of priority.

11.2. The band which an applicant can be placed in depends on whether they fall within one or more of the reasonable preference categories (as defined in section 8), whether they have an urgent housing need (as defined in section 9) and whether they have a local connection (as defined in section 10). When a property becomes available for letting, all applicants for whom the property is suitable (see section 13 below on the allocation of vacant properties) will be ranked in order of priority as follows. Applicants in band one will be given highest priority and then applicants in band two and so on. Within each band, applicants will be ranked by order of the date of their application for housing or the date of their application to transfer, with the applicant waiting the longest given highest priority.

11.3. The banding scheme is described in the appendix to this policy. The bands are summarised as follows:

- Band 1 is for applicants who fall within one or more of the reasonable preference categories, have an urgent housing need and have a local connection
- Band 2 is for applicants who fall within one or more of the reasonable preference categories, do not have an urgent housing need and have a local connection. The only exception is that applicants who are intentionally

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homeless and entitled to reasonable preference will not be placed in band two even if they have a local connection, unless they fall within one of the other reasonable preference categories (i.e. categories 3, 4 or 5 in section 8).

- Band 3 is for applicants who fall within one or more of the reasonable preference categories, have an urgent housing need but do not have a local connection.
- Band 4 is for:
  a. applicants who fall within one or more of the reasonable preference categories but do not have an urgent housing need and do not have a local connection and;
  b. applicants who are intentionally homeless and have a local connection, but do not have an urgent housing need and, aside from being intentionally homeless, do not fall within any other reasonable preference category.

11.4. Exceptional circumstances may arise in which a partner landlord determines that a management move is necessary for one of their tenants. This may only be done when the circumstances or the urgency of the circumstances are not adequately covered by the banding scheme. In this situation, the partner landlord may allocate a property to the particular resident in preference to applicants on the common register, irrespective of the banding scheme or date of application. Such management moves must be authorised and will be audited.

12. Reduced priority

12.1. In compliance with provisions set out in the 1996 Housing Act, section 167 (2A), this policy allows that certain applicants who are entitled to reasonable preference may have their priority within the allocations scheme reduced because of any behaviour of the applicant (or a member of their household) which effects their suitability to be a tenant. This definition is distinct from that which entitles landlords to deem an applicant ineligible for social housing, as set out in section 6 above.

12.2. Categories of behaviour which may result in applicants being given reduced priority are as follows (in each case the behaviour may be on the part of any member of the household):

- Applicants who have engaged in anti-social behaviour and who have not maintained a satisfactory undertaking to address that behaviour.
- Applicants who have been convicted of using their home for immoral or illegal purposes.
- Current tenants who have been subject to action for breach of tenancy.
- Tenants wishing to transfer where their current property is in such poor condition that it cannot be re-let within a reasonable timescale.
- Applicants who have rent arrears owing to a current or previous landlord and who have not made and maintained a satisfactory arrangement to repay the debt.
- Applicants who have deliberately provided false or misleading information or failed to disclose information relevant to their application. In these cases

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applicants will be asked to complete a new application. The date of this new application will be taken and they may be given reduced preference for the new application.

- Applicants who have refused two reasonable offers. In this case applicants will be removed from the register and if they re-apply may be given reduced priority.
- Applicants who are deemed to have deliberately worsened their housing circumstances. For example, this may apply where an applicant gives up settled accommodation in order to move into less settled or overcrowded accommodation.
- Applicants who have behaved in a way which affects their suitability to be a tenant (or whose household contains a member who has done this).

12.3. In compliance with provision set out in the 1996 Housing Act, section 167 (2A), this policy also allows that certain applicants who are entitled to reasonable preference may have their priority within the allocations scheme reduced because of financial resources available to the person, which it would be reasonable for them to use to meet their housing needs. This may apply for example when the person has legal or financial interests in a property and/or sufficient income or savings.

12.4. In deciding whether to reduce priority, the administering organisation will act reasonably and consider each application on its merits. It must have regard to the applicant's personal circumstances (and those of the applicant's household), including his or her health and medical needs, dependents and any other factors relevant to the application. In particular, it must consider any mitigating circumstances relating to mental or physical disability, or mental health.

12.5. When considering cases of behaviour, previous behaviour may not justify a decision to reduce preference where that behaviour can be shown by the applicant to have improved.

12.6. All decisions regarding reducing priority must be approved by a senior officer of the administrating organisation. Cases of reduced priority will be monitored and the process reviewed as part of the annual review.

12.7. The sanction imposed on an applicant if a decision is taken to reduce priority will be to reduce priority to band 4. Applicants who are already in the lowest band cannot have their priority reduced.

12.8. In circumstances where an applicant has their priority reduced they will be provided with appropriate advice and guidance and support.

12.9. Applicants who are given reduced priority will be notified of the decision and the grounds of this in writing. They will have the right to appeal and to ask for the decision to be reviewed. If a decision is reviewed, the applicant will be informed of the decision of the review and the grounds for it.

12.10. Applicants who have their priority reduced because of unacceptable behaviour will be informed that if they change their behaviour and present satisfactory evidence of this, they will have the sanction removed. In this situation, the date of application for the purposes of ranking of applicants in any shortlist will be the date when the reduction of preference was removed.

12.11. Rehousing of some applicants with an offending background may be subject to Multi Agency Public Protection Agreements (MAPPA). In such circumstances housing allocation arrangements will be based on the appropriate risk assessment criteria with the relevant agencies concerned.

13. Allocation of vacant properties

13.1. At the point of application, applicants are asked about their choice of area and property type. However, each property type is usually only let to particular categories of household. The guidelines for this matching are given below.

13.2. Some types of property are designated for specific categories of applicant. The main examples of this are:

- Designated sheltered housing schemes have age restrictions which apply to tenants and members of their households.
- Homes that have been purpose built, adapted or are considered accessible by people with mobility needs will be offered first to people whose physical needs are suited to the property.
- Houses will normally only be let to families with children, where this is the children's principal home.
- Some flats and maisonettes will have restrictions regarding pets

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13.3. Applicants will normally be registered for property types on the basis of the table below. Note that a household would be eligible for an additional bedroom for each child or other member of the household over 16, where they are not members of a couple. Couples are expected to share a bedroom.

Household make up	**Number of bedrooms**
Single person	1 bedroom or bedsit
Pregnant women (in couple or single)	1 or 2 bedroom
Couple	1 bedroom
Couple or single parent with one child under 16	2 bedrooms
Two person household not in couple	2 bedrooms
Couple or single parent with two children under 16 of same sex, or with two children of opposite sex, both under 10	2 bedrooms
Couple or single parent with two children under 16 of opposite sex, with at least one child over 10	3 bedrooms
Couple or single parent with three children under 16	3 bedrooms
Couple or single parent with four children under 16, in any of the following cases: - all of same sex; - 2 boys and 2 girls - 3 of one sex and 1 of the other sex, where at least 2 children of different sex are under 10	3 bedrooms
Couple or single parent with four children under 16, 3 of one sex and 1 of the other sex, where either the 3 of one sex are all over 10 or the child of the other sex is over 10	4 bedrooms
Couple or single parent with five children under 16	4 bedrooms
Couple or single parent with more than five children under 16	4 or more bedrooms

The table above is a general guide only and procedure may vary in areas due to local demand, supply, special circumstances or any local letting policies. Situations which may require a variation from the table include:

- Where there is a limited supply of properties with a small number of bedrooms relative to demand and there is a reasonable supply of properties with a large number of bedrooms relative to demand, applicants may be considered for and offered properties with more bedrooms than they require;
- Where an applicant is in urgent need, but the supply of suitable properties is limited, they may be considered for and offered properties with more bedrooms than they require;

- Where an applicant is homeless, but the supply of suitable properties is limited, they may be considered for and offered properties with more bedrooms than they require.
- Where pregnancy or the age of household members mean that the household would qualify for a larger property within a reasonable period of time, applicants may be allowed to register for properties which they would currently under-occupy.
  In each case an affordability assessment will be made and the applicant's ability to afford the rent would be taken into account in determining whether to offer the property.

13.4. Applicants who require an additional bedroom for a non-resident carer will normally be registered for properties with an additional bedroom.

14. Who Can Be Considered As Part of The Household

14.1. When assessing an application the partners will consider the circumstances of the household. A household is considered to be:

- Persons who are part of the household at the date of registration, or at the start of the tenancy in the case of existing tenants, and are still in occupation
- Partners who are living together in a relationship
- Children born since the registration date, or the start of the tenancy, or other dependent children joining the household where the applicant or tenant is the principal carer of the child. Evidence will need to be produced to confirm dependent relationship(s). Tenants must inform the organisation of any change to their household
- An adult relative who has become a member of the household because they are in need of support and cannot live independently. (this also applies to transfer applications)
- Housing applications from partners who are not living together due to lack of space in either of their accommodations will be considered as a household with both accommodations being taken into account when assessing the application

15. Offers and refusals

15.1. Applicants have a choice as to whether to accept an offer of a property. If a property is refused without good reason, housing options will contact the applicant to discuss their reasons. If as a result of two unreasonable refusals, it is considered that the applicant's requirements are unlikely to be met, the applicant will be removed from the register, subject to right to review. They will be notified of this decision and the grounds in writing and of their right to review. Where necessary, this notification will be done in an alternative language or form. Any re-application may be given reduced priority.

15.2. Applicants owed a duty under homelessness legislation may be offered a property which falls outside their preferred options. Such offers will be made in line

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with the relevant statutory procedures. If such a reasonable offer is refused, then the applicant may have their priority within this policy reduced, in line with the section on reduced priority. In these circumstances applicants are entitled to a time limited review and if this found in their favour, they would be reinstated.

16. Removal from the register

16.1. Under certain circumstances, applicants may be removed from the register. These are as follows:

16.2. Applicants who have provided false or misleading information or failed to disclose information relevant to their application. In these cases applicants will be asked to complete a new application. The date of this application will be taken and they may be given reduced preference for this new application, as stated above

16.3. Applicants who have refused two reasonable offers. In this case they will be removed from the register and if they re-apply may be given reduced priority.

16.4. Applicants who fail to respond to correspondence including offer letters within the set response times. These applicants will be removed from the register through a formal notification and appeal process.

17. Local Lettings Policies

17.1. The policy recognises that partners may wish to include policies designed to tackle local housing issues through the use of local letting policies.

17.2. All local lettings policies will be based on a sound evidence base and will be developed after a robust assessment of this evidence base has been carried out.

17.3. Examples of local housing issues which may require local lettings policies include:

- concentrations of deprivation
- under occupation
- overcrowding
- facilitating tenant employment through job related moves
- the needs and sustainability of rural communities, for example where affordability of housing is an issue.
- allowing transfers for existing social tenants even where they do not have reasonable preference.
- Some properties, usually in defined locations, can only be let subject to additional occupation criteria as they are subject to a Planning Obligation under s106 of the Town and Country Planning Act 1990.
- Regeneration areas
- Large new developments

17.4. The development of local lettings policies will follow the protocol which accompanies this policy and may be modified from time to time. This protocol and local lettings policies will be reviewed and monitored via a mechanism set up by the partner organisations.

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18. Monitoring and review of Allocations policy

18.1. The operation of the policy will be monitored on an on-going basis. It will also be subject to an annual review. Where appropriate, recommendations for alterations will be submitted for approval. These would then have to be ratified by each partner before being adopted.

19. Reviews and appeals

19.1. An applicant has the right to be informed, upon request, of any decision about the facts of their case which is likely to be, or has been, taken into account in considering whether to allocate housing accommodation to them.

19.2. An applicant has the right to request a review of any decision made in relation to their housing application, including:

(a) any decision about the facts of their case which is likely to be, or has been, taken into account in considering whether to allocate housing accommodation to them;
(b) any decision as to their eligibility for the allocation of social housing;
(c) any decision as to the assessment of their application in relation to the banding scheme;
(d) any decision made in relation to removing an applicant from the register in accordance with section 16;
(e) any decision in relation to reducing priority in accordance with section 12;
(f) any decision made by one of the local authority partners in relation to whether there is reason to believe that they are homeless or threatened with homelessness and, if so, any consequent decisions relating to eligibility for assistance, to any duties owed, to notifying or referring to another authority, to the suitability of accommodation offered or any other matter relevant to their housing application.

19.3. On a request for a review being duly made, the partners shall review the decision.

19.4. Applicants will be informed of the decision of the review and the grounds for it.

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Appendix: The Banding Scheme

The criteria for determining which band an applicant is placed in are set out below. All decisions taken will be consistent with this scheme.

BAND 1

This band applies to those applicants who meet the following criteria:

1. **They fall within one or more of the 5 reasonable preference categories set out in section 8 of this policy; AND**
2. **They have an urgent housing need (as in the examples below); AND**
3. **They have a local connection as defined in section 10 of this policy**

Examples of Urgent Housing Need:

1. **Urgent medical, welfare or disability related need**

Applicants whose household includes someone who:

(a) has a medical condition which is life-threatening or likely to become so, and which is directly linked to their housing conditions and likely to improve with rehousing

(b) has been assessed by the relevant practitioner as having a need to move urgently to an accessible property.

(c) Has a serious physical or mental illness, disability or medical condition or behavioural disorder, which is causing serious dysfunction to themselves or the family unit such that they are completely unable to cope in their present accommodation and re-housing would alleviate the problem. For example, terminal illness or advanced progressive condition.

(d) Is hospitalised and is unable to return to their home as it is totally unsuitable for their long term needs by way of design, location and/or is unsuitable for disabled adaptations.

(e) is disabled and unable to access essential facilities within the property e.g. bathing or WC, or access to the property itself is totally unsuitable. The property cannot be economically adapted to meet their needs.

(f) needs to move to provide support to a relative or person with serious illness, disability or medical condition and that person can only cope in their present accommodation with the applicant's support.

(g) is living in overcrowded accommodation which leaves the person vulnerable to serious infection, for example where they are suffering from late stage HIV.

Evidence will be required in these cases to support the validity of the claim

2. Loss of home as result of a disaster:

Awarded to applicants with a reasonable prospect of an accommodation offer within a relatively short period who suddenly and permanently lose their existing home as a result of a disaster.

3. Leaving armed forces or serious injury whilst serving in armed forces:

(a) Any applicant who needs to move to suitable adapted accommodation because of a serious injury, medical condition or disability which he or she, or a member of their household, has sustained as a result of service in the Armed Forces.

(b) People needing accommodation because of leaving the armed forces and the loss of military accommodation. People who have left the armed forces under Discharge as of Right (DAOR) are excluded from this provision and will not be given band one status under this category.

4. People accommodated by the local authority in care or approved supported housing who are deemed ready to move on

5. Urgent cases where the household needs access to social housing to prevent a child from being taken into/remaining in care

Examples include:

(a) Foster parents who urgently need accommodation to take a child..

(b) Cases where a child care plan has identified the need for accommodation to prevent the child being looked after by the authority (e.g. for child in need/looked after child/child protection).

6. Existing tenants who are either under-occupying by one or more bedroom and wish to transfer to a smaller property or who are occupying an adapted property which they do not need, provided that one of the following applies:

- **They are suffering financial hardship because of welfare reform;**
- **Their moving would release a property for someone in urgent need who would otherwise probably have to wait an unreasonably long time to be**

re-housed.

7. Homeless due to violence or threat of violence :

Those owed a full homelessness duty as a result of violence or threats of violence likely to be carried out and who as a result require urgent re-housing including:

(a) Victims of domestic or other violence;

(b) Victims of hate incidents (including crimes and non-crimes in policing terms and this will cover victims of hate violence, threats of violence and hate harassment of any kind;

Witnesses of crime, or victims of crime, who would be at risk of intimidation amounting to violence or threats of violence if they remained in their current homes.

8. Exceptional case of urgent need where the circumstances or the urgency of the circumstances are not dealt with elsewhere in this scheme.

Such cases may or may not be transfer tenants. Each case will be judged, authorised and recorded according to the agreed procedure and regularly monitored.

BAND 2

This band applies to those applicants who meet the following criteria:

1. **They fall within one or more of the 5 reasonable preference categories set out in section 8 of this policy; AND**
2. **They have a local connection as defined in section 10 of this policy; AND**
3. **They do not have an urgent housing need**

The only exception is that applicants who are intentionally homeless and entitled to reasonable preference will not be placed in band two even if they have a local connection, unless they fall within one of the other reasonable preference categories (i.e. categories 3, 4 or 5 in section 8)

Examples of those who will fall within this band are as follows:

1. **Applicants who are homeless within the meaning of Part 7 of the Housing Act 1996, with the exception of applicants who have become homeless intentionally under the definition of intentionality contained in section 191 of the 1996 Act.**

This category includes homeless applicants both in priority need and not in priority need, provided they have not become homeless intentionally.

The definition of homelessness used is contained in sections 175-177 of the Housing Act 1996 Part 7. Under this definition a person who does not have accommodation which is legally and physically available to them to occupy and which is reasonable for them to occupy would be classed as homeless. This includes the following:

- Applicants who have no accommodation available to them where they can live with other people who normally live with them as a member of their family or other people who might reasonably be expected to live with them.
- Applicants who have accommodation available to them but the partners agree that it would not be reasonable for them to continue to occupy it.
- Applicants who have accommodation but they cannot secure access to it or, in the case of a moveable structure such as a caravan, there is no lawful place they can live in it.

People will be accorded this status depending on an assessment by the relevant local authority's homelessness team or the team of a contracted out service as applicable. Applicants who refuse a reasonable offer made to them under homelessness legislation may have their priority reduced.

2. **Applicants who are owed a duty by a local housing authority under section 193(2) or 195(2) of the Housing Act 1996, who are occupying accommodation secured by any such authority under section 192(3) of the 1996 Act, or who are unintentionally threatened with homelessness within 56 days and are in priority need.**

This category includes applicants who are:

(a) unintentionally homeless and in priority need and who have been accepted as being owed a full duty under section 193(2);

(b) unintentionally homeless and not in priority need but for whom accommodation has been made available by the authority under section 192(3);

(c) unintentionally threatened with homelessness in the next 56 days and are in priority need (this includes those unintentionally threatened within 28 days, in priority need and owed a duty under section 195(2) of the 1996 Act).

This category does not include applicants who have become homeless, or are threatened with homelessness, intentionally.

People will be accorded this status depending on an assessment by the relevant local authority's homelessness team or the team of a contracted out service as applicable. Applicants who refuse a reasonable offer made to them under homelessness legislation may have their preference reduced.

3. Applicants suffering from unsatisfactory housing conditions

This category includes the following:

(a) Applicants whose current property:
    (a) lacks a bathroom with facilities or the facilities are located in an insanitary location e.g. within kitchen;
    (b) lacks a kitchen and/or appropriate facilities;
    (c) lacks an inside W/C;
    (d) lacks a hot or cold water supply to the property due to defect with the property;
    (e) lacks an electrical supply due to defect with property;
    (f) lacks a gas supply due to defect with property where such a supply is required to operate existing or necessary services such as heating.

(b) Applicants who share facilities with occupiers who are not part of the applicant's household on a permanent basis. This applies to the sharing of a kitchen, bathroom/shower or toilet.

(c) Applicants living in overcrowded housing. A housing situation is deemed to be overcrowded if it lacks at least one bedroom. This must be on a permanent basis. The following are taken to be minimum bedroom requirements:
    a. A married couple or couple living together need one bedroom.
    b. A married couple or couple living together with a child under 12 months need one bedroom.
    c. A single person over the age of 16 or a single parent needs one bedroom (applicable to a single parent with a child under 12 months).
    d. A child 10-16 can only share a bedroom with a child of the same sex.

(d) Applicants who have been referred by environmental health for re-housing because they are living in accommodation where category 1 hazards exist. Note that all customers residing in insanitary or hazardous housing will be referred to environmental health in order to resolve the problem and enable the customer to remain in their home. The person would only be referred for

re-housing if, despite their best efforts, it is the opinion of environmental health that the problem cannot be resolved within a reasonable period of time.

4. People who need to move on medical or welfare grounds (including grounds relating to disability)

The following categories of applicant would qualify:

a) Applicants whose household includes someone with a medical condition which is directly linked to unsuitable housing and where re-housing is necessary to significantly improve their health.

b) Current accommodation presents access problems to a member of the household which have a detrimental impact on their welfare, which cannot be resolved in the current property and would be significantly alleviated if they were suitably re-housed. Such cases would be assessed by the relevant practitioner as requiring a move to an accessible property.

c) Applicants whose household includes someone who has social care needs which are not being met and re-housing is necessary to significantly improve their care.

5. **People who need to move to a particular locality, where a failure to do so would cause hardship**

Cases include:

a) It is unreasonable for the applicant to stay in their current property due to exceptional financial hardship.

b) The applicant or member of their household is at risk of being admitted to residential care or hospital if re-housing is not made.

c) The applicant needs to move due to relationship breakdown and there is a need to safeguard and promote the welfare of children associated.

d) The applicant is a care leaver, vulnerable and has a high housing need that is best met by the provision of long term settled housing. Applicants must be a former 'relevant child' as defined by the Children Leaving Care Act 2000.

e) The applicant or member of their household has permanent employment which cannot continue unless they live in a specific locality within the area and are otherwise adequately housed.

f) The applicant is giving or receiving essential support, which can only be delivered if they live in a specific locality within the area.

6. Exceptional case of housing need where the circumstances are not dealt with elsewhere in this scheme.

Such cases may or may not be transfer tenants. Each case will be judged, authorised and recorded according to the agreed procedure and regularly monitored.

BAND 3

This band applies to those applicants who meet the following criteria:

1. **They fall within one or more of the 5 reasonable preference categories set out in section 8 of this policy; AND**
2. **They have an urgent housing need; AND**
3. **They do not have a local connection as defined in section 10 of this policy**

Examples of urgent housing need are as follows:

1. **Urgent medical, welfare or disability related need**

Applicants whose household includes someone who:

(a) has a medical condition which is life-threatening or likely to become so, and which is directly linked to their housing conditions and likely to improve with rehousing
(b) has been assessed by the relevant practitioner as having a need to move urgently to an accessible property.
(c) Has a serious physical or mental illness, disability or medical condition or behavioural disorder, which is causing serious dysfunction to themselves or the family unit such that they are completely unable to cope in their present accommodation and re-housing would alleviate the problem. For example, terminal illness or advanced progressive condition.
(d) Is hospitalised and is unable to return to their home as it is totally unsuitable for their long term needs by way of design, location and/or is unsuitable for disabled adaptations.
(e) is disabled and unable to access essential facilities within the property e.g. bathing or WC, or access to the property itself is totally unsuitable. The property cannot be adapted to meet their needs.

(f) is living in overcrowded accommodation which leaves the person vulnerable to serious infection, for example where they are suffering from late stage HIV.

Evidence will be required in these cases, in line with the agreed procedures, to support the validity of the claim

2. Loss of home as result of a disaster

Awarded to applicants with a reasonable prospect of an accommodation offer within a relatively short period who suddenly lose their existing home as a result of a disaster.

3. Leaving armed forces or serious injury whilst serving in armed forces

(a) Any applicant who needs to move to suitable adapted accommodation because of a serious injury, medical condition or disability which he or she, or a member of their household, has sustained as a result of service in the Armed Forces.
(b) People needing accommodation because of leaving the armed forces and the loss of military accommodation. People who have left the armed forces under Discharge as of Right (DAOR) are excluded from this provision and will not be given band one status under this category.

4. People accommodated by the local authority in care or approved supported housing who are deemed ready to move on

5. Urgent cases where the household needs access to social housing to prevent a child from being taken into/remaining in care
Examples include:
(a) Foster parents who urgently need accommodation to take a child.
Cases where a child care plan has identified the need for accommodation to prevent the child being looked after by the authority (e.g. for child in need/looked after child/child protection).

6. Exceptional case of urgent need where the circumstances or the urgency of the circumstances are not dealt with elsewhere in this scheme
Such cases may or may not be transfer tenants. Each case will be judged, authorised and recorded according to the agreed procedure and regularly monitored.

BAND 4

This band applies to those applicants in either of the following cases:

a. **They fall within one or more of the 5 reasonable preference categories set out in section 8 of this policy AND they do not have a local connection as defined in section 10 of this policy AND they do not have an urgent housing need;**
b. **They are intentionally homeless and have a local connection, but do not have an urgent housing need and, aside from being intentionally homeless, do not fall within any other reasonable preference category.**

Examples of those who will fall within this band are as follows:

1. **Applicants who are homeless within the meaning of Part 7 of the Housing Act 1996.**

   This category includes homeless applicants both in priority need and not in priority need, and who are homeless either unintentionally or intentionally.

   The definition of homelessness used is contained in sections 175-177 of the Housing Act 1996 Part 7. Under this definition a person who does not have accommodation which is legally and physically available to them to occupy and which is reasonable for them to occupy would be classed as homeless. This includes the following:

   - Applicants who have no accommodation available to them where they can live with other people who normally live with them as a member of their family or other people who might reasonably be expected to live with them.
   - Applicants who have accommodation available to them but the partners agree that it would not be reasonable for them to continue to occupy it.
   - Applicants who have accommodation but they cannot secure access to it or, in the case of a moveable structure such as a caravan, there is no lawful place they can live in it.

   People will be accorded this status depending on an assessment by the relevant local authority's homelessness team or the team of a contracted out service as applicable.

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2. Applicants who are owed a duty by a local housing authority under section 190(2), 193(2) or 195(2) of the Housing Act 1996 (or under section 65(2) or 68(2) of the housing Act 1985) or who are occupying accommodation secured by any such authority under section 192(3) of the 1996 Act.

This category includes applicants who are:

(a) unintentionally homeless and in priority need and who have been accepted as being owed a full duty under section 193(2);

(b) unintentionally homeless and not in priority need but for whom accommodation has been made available by the authority under section 192(3);

(c) threatened with homelessness in the next 28 days and owed a duty under section 195(2) of the 1996 act (i.e. have not intentionally become so threatened and are in priority need);

(d) are owed a section 190(2) duty, have been assessed as being in priority need, but are intentionally homeless and have been provided with accommodation for a period of time to enable them to secure their own accommodation.

People will be accorded this status depending on an assessment by the relevant local authority's homelessness team or the team of a contracted out service as applicable.

3. Applicants suffering from unsatisfactory housing conditions

This category includes the following:

(a) Applicants whose current property:

a. lacks a bathroom with facilities or the facilities are located in an insanitary location e.g. within kitchen;

b. lacks a kitchen and/or appropriate facilities;

c. lacks an inside W/C;

d. lacks a hot or cold water supply to the property due to defect with the property;

e. lacks an electrical supply due to defect with property;

f. lacks a gas supply due to defect with property where such a supply is required to operate existing or necessary services such as heating.

(b) Applicants who share facilities with occupiers who are not part of the

applicant's household on a permanent basis. This applies to the sharing of a kitchen, bathroom/shower or toilet.

(c) A housing situation is deemed to be overcrowded if it lacks at least one bedroom. This must be on a permanent basis. The following are taken to be minimum bedroom requirements:

a. A married couple or couple living together need one bedroom.
b. A married couple or couple living together with a child under 12 months need one bedroom.
c. A single person over the age of 16 or a single parent needs one bedroom. (applicable to a single parent with a child under 12 months).
d. A child 10-16 can only share a bedroom with a child of the same sex.

(d) Applicants who have been referred by environmental health as residing in insanitary or hazardous housing posing a category 1 hazard, where it has been impossible for the environmental health department to satisfactorily resolve the issue.

Note that all customers residing in insanitary or hazardous housing will be referred to environmental health in order to resolve the problem and enable the customer to remain in their home. The person would only be referred for re-housing if, despite their best efforts, it is the opinion of environmental health that the problem cannot be resolved within a reasonable period of time.

4. People who need to move on medical or welfare grounds (including grounds relating to disability)

The following categories of applicant would qualify:

a) Applicants whose household includes someone with a medical condition which is directly linked to unsuitable housing and where re-housing is necessary to significantly improve their health.

b) Current accommodation presents access problems to a member of the household which have a detrimental impact on their welfare, which cannot be resolved in the current property and would be significantly alleviated if they were suitably re-housed. Such cases would be assessed by occupational therapy as requiring a move to an accessible property. These cases will be managed through an accessible housing register.

c) Applicants whose household includes someone who has social care needs which are not being met and re-housing is necessary to significantly improve their care.

5. **People who need to move to a particular locality, where a failure to do so would cause hardship**

Cases include:

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a) It is unreasonable for the applicant to stay in their current property due to exceptional financial hardship.

b) Applicants who need to downsize because they are unable to afford their current property due to welfare reform.

c) The applicant or member of their household is at risk of being admitted to residential care or hospital if re-housing is not made.

d) The applicant needs to move due to relationship breakdown and there is a need to safeguard and promote the welfare of children associated.

e) The applicant is a care leaver, vulnerable and has a high housing need that is best met by the provision of long term settled housing. Applicants must be a former 'relevant child' as defined by the Children Leaving Care Act 2000.

6. Exceptional case of housing need where the circumstances are not dealt with elsewhere in this scheme.

Such cases may or may not be transfer tenants. Each case will be judged, authorised and recorded according to the agreed procedure and regularly monitored.

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SARTH Common Allocations Policy Equality Impact Assessment

Name of project, policy, function, service or proposal being assessed	SARTH Common Allocations Policy (CAP)
Names and roles of officers completing this assessment	Gary Jordan (Cartrefi Conwy), Roy Carroll (Tai Clwyd), Nik Weatherall (WWH), Neil Moffat (Clwyd Alyn), Viv Perry(North Wales Housing), Faye Davies (FCC), Dawn Kent (FCC)
Department or Directorate	Housing Departments in each partner
Contact details of lead officer for this assessment	Lead Officers as on SARTH Steering group
Date assessment completed	13.06.13.

1. Aims and Objectives of the project, policy, function, service or proposal being assessed

		Action Points (these have been transferred to section 3)
Is this an existing project, policy, function or service, a review or a new proposal?	New policy; existing function	
What are the aims and objectives of the service?	AIM: To allocate our social housing stock in a transparent, fair, consistent and accessible way, which prioritises the people in our communities according to their housing needs and which meets our legal requirements. (p.2 in CAP)	

	OBJECTIVES (GUIDING PRINCIPLES, p. 5 in CAP): • To ensure that preference for social housing is given to those in housing need and that those in greatest need are given the highest priority. • To give higher priority to applicants with a local connection to the area for which they are making an application than to those who have no such connection • To ensure that the system is fair, confidential and accessible to all potential applicants. • To make the best use of all the available housing stock • To ensure consistency in the way in which applicants are treated by all the partner organisations • To provide a responsive service that treats everyone as an individual • To empower applicants and support them to make informed and realistic choices about where they want to live • To provide appropriate, accurate and realistic advice relating to the availability of affordable housing at the point of application • To maximise applicant satisfaction and improve the applicant service	
What are the main activities of the service?	To allocate social housing and provide housing options advice.	
Will the service be contracted out or	No	

commissioned?		
Will it be delivered in partnership?	Delivery is to be decided by all partners. Delivery may be led by one or more partners.	This should be monitored for equality impact when decision is made.
Which staff members will carry out the function?	To be decided. Will be designated officers in administering partner organisations. Lets to be done by each partner landnord.	This should be monitored for equality impact when decision is made. Comprehensive training will be required for those involved in delivery of function
Who is responsible for the service?	Heads of service for each partner.	
Whose needs is this service designed to meet? How does it fit in with the wider aims of the organisation?	Everyone who comes to us looking for housing: - To offer advice to each customer on affordable housing - Register those identified by policy to be in need - Allocate social housing to those identified to be in most need The policy fits with the wider aims of each partner.	1. There should be a fundamental review of monitoring to determine how to monitor the effect of advice: - Storing information - Monitoring outcomes - Record all responses, including those who do not want to say/respond - How will IT allow us to do this? – this should be considered when specifying and procuring IT 2. Each partner to provide reference for where it fits with wider aims

Are there any aspects of the service which will be governed by the service provider's judgement? If so, is there clear guidance for staff to prevent any bias?	Yes, decisions relating to the following: Eligibility (section 6); Local connection (section 10); Banding and registration (section 11 and appendix); Reduced priority (section 12); Allocation in relation to household size (section 13 and 14); Offers and refusals (section 15) Removal from the register (section 16); Development of local letting policies (section 17); Review of allocation policy (section 18); Reviews and appeals (section 19)	Robust procedures must be developed to give guidance for interpreting the scheme. The procedural document should be developed as a live document and continually reviewed. Training should be provided on interpretation of policy. Links should be made to legislation, e.g. 1996 housing act and 2002 homelessness act, as stated in policy. These aspects should be considered when determining service model used.

2. Notes on analysis

Each partner carried out an analysis of their register to assess the impact of the proposed policy. This involved reassessing applicants and banding them in the new scheme. Cartrefi Conwy carried this out for their whole register. Other partners carried through partial analyses, depending on what was possible with their registers. Each partner looked at cases to estimate the impact. There was no observed impact resulting from moving from the current scheme to a banding scheme. This was judged to be consistent with the intended approach to base the scheme on the housing act categories. However, various actions were identified to ensure there was no impact resulting from how the policy is implemented and administered. These are set out below.

Cartrefi Conwy mapped the points awarded to current applicants onto the proposed SARTH Banding scheme. An analysis was then made of different size properties in Llandudno and in Penmaenmawr to look at the potential impact on the protected characteristics.

Clwyd Alyn examined their list and estimated which current applicants would no longer be registered because they would not meet the criteria. This allowed them to consider whether this effect disproportionately affected any group.

Flintshire council and North Wales Housing examined a particular area, in Connah's Quay and Colwyn Bay respectively, and re-banded the applicants in the SARTH bands. This allowed them to see whether there was any disproportionate effect on any group.

The results are set out in the table below.

<table>
<tr><th>Age</th><th>Impact or potential impact of the change to proposed SARTH banding scheme</th><th>Actions to mitigate</th></tr>
<tr><td>Identify the impact/potential impact of the service on older people and younger people.</td><td>No observed impact due to banding scheme.

Flintshire County Council (FCC) looked at 2 bed properties in Connah's Quay. No significant impact by age.

Cartrefi Conwy (CC): considered 1,2,3 and 4 bed properties in Penmaenmawr. There was no significant swing from one age group to another.

Clwyd Alyn (CAHA): examined which applicants would be removed from the list. Estimated this to be 329 out of 2109, and there is normal spread across age groups:

<table><tr><td>Age group</td><td>Number of people</td></tr><tr><td>17-24</td><td>57</td></tr></table></td><td></td></tr>
</table>

	25-44: 147 45-59: 65 60+: 59 North Wales Housing (NWH): Looked at Colwyn Bay flat 1 or 2 bed. Ages range across age spectrum and are spread across the bands. No identified impact.	
Gender	**Impact or potential impact**	**Actions to mitigate**
Identify the impact/potential impact of the service on women, men and transgender people.	FCC: allocations to couples are slightly raised in the model. This is not significant. CAHA: the split between males and female main applicants in the group who come off the register in the model is as expected: Male=119; female=210. This is similar to the overall picture. CC: Overall, there is no significant impact. The case of I bedroom properties shows on first examination, some impact. However, the nature of the impact varies when we look at different bands. To enable this analysis, we looked at how many people ell into each band in the proposed policy. This determined the size of the groups into which to break the current register. We then broke the current register into the same size groups, so we can compare the same segments of the list. We included group 5, corresponding to the people who would be removed from the register in SARTH (44 applicants) and the people who fell into the bottom group of 44 in the current register. This gives the following table:	Procedural clarification is needed regarding when people are deemed to be sharing facilities. The EIA has been done by Cartrefi Conwy on the assumption that people still living at home, but over 18, are viewed as sharing facilities with people not part of their household and hence given band 2 or 4, depending on local connection. If the interpretation is counter to this, a further analysis should be done to ensure no impact occurs, particularly in relation to I bedroom properties.

Band/ group	CC current register		SARTH proposed scheme		
	F	M	F	M	TOTAL
1	1	5	5	1	6

2	15	24	9	30	39	
3	0	0	0	0	0	
4	9	7	5	11	16	
Unregistered/5	17	27	23	21	44	

We see more females in band 1 compared to group 1 in the current register and also more females in band 5 (unregistered compared to bottom of current register); we see more males in bands 2 and 4. Overall, we might interpret this has a swing in favour of males, though the increased number of females in band 1 might mean that in reality more females would be re-housed – it would depend on supply.

However, when we look at the reasons for these changes, we see that they are a result of justifiable policy decisions and not arbitrary discrimination:

In considering actual examples of female applicants who have moved down the list and would be unregistered in SARTH, we see that they are all either owner-occupiers or private tenants who are under-occupying. They get points for this in Cartrefi Conwy's scheme but would not get any priority in SARTH, because they are not tenants of a partner landlord. So, this apparent negative impact on females is due to the policy of giving priority to under-occupying tenants of partner landlords but not to other people under-occupying, and is a policy decision in response to welfare changes.

On the other hand, the observed swing from males to females at the very top of the list (band 1 in SARTH compared to the top 6 on Cartrefi Conwy's current list) is simply a result of the SARTH policy of prioritising under-occupation of their tenants and of urgent medical. In this case, these were disproportionately female.

When we considered 2,3 and 4 bedroom properties in Penmaenmawr, we did not observe

similar swings and similar skewed consequences of the SARTH policy. Overall, we have the following results for Penmaenmawr applicants:

Band/ group	CC current register		SARTH proposed scheme		
	F	M	F	M	
1	4	5	8	1	9
2	46	32	41	37	78
3	1	0	1	0	1
4	11	8	7	12	19
5	69	40	74	35	109

Overall, the picture shows no significant impact in any direction.

Regarding the interpretation of the policy we make the following comment: In making their analysis, Cartrefi Conwy followed their own current policy regarding when to classify people as sharing facilities. This means that people who stay at home and live with their parents would get sharing facilities points when they become 18 9cartrefi Conwy call this “insecure tenancy” but classify it as sharing facilities for pointing. The partnership needs to agree the procedural interpretation of 2sharing facilities” in the SARTH policy and ensure that the decision does not impact one group over another. If the procedural decision is different to Cartrefi Conwy’s interpretation, then an analysis of the impact should be made, in particular in relation to I bedroom properties, where this may have most impact. Whilst this was brought out by the analysis of sex, it is a more general point and will be recorded as such in section 3 of this document.

NWH: no significant change was observed.

Disability	**Impact or potential impact**	**Actions to mitigate**
Identify the impact/potential impact of the service on disabled people (ensure consideration of a range of impairments, e.g. physical, sensory impairments, learning disabilities, long-term illness).	Partners found it difficult to transfer the information on their current registers across to the SARTH bands in order to re-band applicants. Partners acknowledged the general difficulty in determining when to award medical or disability points and the difficulty in determining the exact reason why points or bands were awarded in their current schemes in order to translate this into the SARTH scheme. This is evidence that the wording should be changed slightly to make this task more precisely achievable. It is suggested that we change the band 1 category 1© definition to: "has serious physical or mental illness, disability or mental condition or behavioural disorder, which is causing serious dysfunction to themselves or the family unit such that they are completely unable to cope in their present accommodation and re-housing would alleviate the problem. For example, terminal illness or advanced progressive condition." The purpose of this is to make it clear that this case is at a higher level of unsatisfactory housing than the band 2 case. This will allow the assessing organisation to differentiate more easily between levels of medical need and award bands in a way that does not significantly change how prioritisation is done. On the other hand the development of the accessible housing register should deliver a better service to customers. Moreover, the decision to allow disabled people to register on the general needs and accessible registers will increase options. This way, adaptable properties will also be available. NWH: limited evidence that disabled people might be more advantaged - of 11 disabled people in the list for Colwyn bay, 4 moved from band 2 to band 1.	Ensure procedural guidance is clear to guide assessment. Ensure evidence is required. Ensure implementation and training emphasize equal access to housing and policy of giving disabled people preference for adapted housing and giving disabled people access to adaptable housing.
Race/Ethnicity	**Impact or potential impact**	**Actions to mitigate**

Identify the impact/potential impact of the service on Black and minority ethnic (BME) people.	The data is partial because of people not giving information. But what we have shows very few people from different ethnicities on the registers, which reflects the general population. For example, CAHA evidence shows 18 out of 329 people removed from the register are non white British. This reflects the background population: DCC: 99.3% are white British FCC: 97.8% white British CCBC: 98.2 white British	
Sexual Orientation	**Impact or potential impact**	**Actions to mitigate**
Identify the impact/potential impact of the service on gay, lesbian and bisexual people.	There are too few people on the register who state they are not heterosexual for meaningful analysis.	Try and make monitoring better going forward to enable analysis.
Gender Re-assignment/ Identity	**Impact or potential impact**	**Actions to mitigate**
Identify the impact/potential impact on transgender people.	There is not enough data on the register for meaningful analysis	Try and make monitoring better going forward to enable analysis.

<table>
<tr><td>Pregnancy and Maternity</td><td>Impact or Potential impact</td><td>Actions to Mitigate</td></tr>
<tr><td></td><td>No observed impact. In CAHA analysis, 47 out of 329 who come of the list are pregnant. This reflects the background data for the whole list.</td><td></td></tr>
<tr><td>Marriage/Civil Partnership</td><td>Impact or Potential impact</td><td>Actions to Mitigate</td></tr>
<tr><td></td><td>No observed impact.</td><td></td></tr>
<tr><td>Religion and belief</td><td>Impact or potential impact</td><td>Actions to mitigate</td></tr>
<tr><td>Identify the impact/potential impact of the service on people of different religious and faith groups.</td><td>No observed impact.

CAHA results table for applicants who would come off the list:
<table><tr><td>Religion</td><td>Number of people</td></tr><tr><td>Hindu</td><td>1</td></tr><tr><td>Muslim</td><td>1</td></tr><tr><td>Christian</td><td>67</td></tr><tr><td>No religion</td><td>61</td></tr><tr><td>Not known/didn’t say</td><td>199</td></tr></table>FCC and NWH also observed no impact.</td><td></td></tr>
<tr><td>Language</td><td>Impact or potential impact</td><td>Actions to mitigate</td></tr>
</table>

<table>
<tr><td>Identify the impact/potential impact of the service on people of different language groups.</td><td>CAHA results table for applicants who would come off the list:

<table><tr><td>Preferred Language of communication</td><td>Number of people</td></tr><tr><td>Welsh</td><td>1</td></tr><tr><td>Hungarian</td><td>1</td></tr><tr><td>English</td><td>182</td></tr><tr><td>Not declared</td><td>142</td></tr></table></td><td></td></tr>
<tr><td>Transfer tenants</td><td>Impact or potential impact</td><td>Actions to mitigate</td></tr>
<tr><td>Identify the impact/potential impact of the service on transfer tenants</td><td>CAHA: 50 out of 329 applicants coming off the list are transfer tenants. These were tenants who were not in housing need and so this is a reasonable impact.</td><td></td></tr>
</table>

3. Actions identified

Policy Amendments – these have been incorporated into the revised policy and taken to steering group

Strand	Observation	Task
Disability	Partners identified the difficulty in reassessing applicants in order to estimate the impact. It was agreed that the wording should allow the assessment to prioritise in a similar way to how partners currently prioritise and thus should not have a substantial impact.	Change the band 1 category 1© definition to: “has serious physical or mental illness, disability or mental condition or behavioural disorder, which is causing serious dysfunction to themselves or the family unit such that they are completely unable to cope in their present accommodation and re-housing would alleviate the

	On the other hand the development of the accessible housing register should deliver a better service to customers. Moreover, the decision to allow disabled people to register on the general needs and accessible registers will increase options. This way adaptable properties will also be available.	problem. For example, terminal illness or advanced progressive condition."
Sexual Orientation	DCC report feedback that young people sometimes become homeless because of issues related to them coming out in their local community. This may relate to hate crime or fear of violence and should be considered a reason to give band 1 priority	Do we need to amend wording in scheme to make it clear that this qualifies as band 1?
Pregnancy/ Maternity	In policy, a pregnant woman is eligible for 1 or 2 bedrooms and may justifiably refuse a 1 bed. Same argument would hold where pregnant woman already has children and would become eligible for more than 2 bedrooms.	Insert statement in policy that where woman is pregnant a review of their bedroom entitlement would be undertaken and they may be eligible for larger property?

Procedures outcomes – to be done during development of procedures and on-going

Strand	**Observation**	**Task**
all	Judgements are required in making assessments in relation to, e.g.: • Eligibility (section 6); • Local connection (section 10);	Ensure all areas where staff must make judgements have clear guidance and governance relating to equalities considerations and legislation.

	• Banding and registration (section 11 and appendix), including application form and medical assessment; • Reduced priority (section 12); • Allocation in relation to household size (section 13 and 14); • Offers and refusals (section 15) • Removal from the register (section 16); • Development of local letting policies (section 17); • Review of allocation policy (section 18); • Reviews and appeals (section 19)	
all	ASB. Policy proposes sanctions which can be applied if people have ASB. Policy has been amended to clearly state that each case must be examined in light of mitigating circumstances, including mental health.	Procedural developments need to ensure guidance is given on fair implementation of this.
All	The analysis was made on the assumption that people who are over 18 and sharing facilities at home with their parents or others would be classified as sharing facilities.	Procedural clarification is needed regarding when people are deemed to be sharing facilities. The EIA has been done by Cartrefi Conwy on the assumption that people still living at home, but over 18, are viewed as sharing facilities with people not part of their household and hence given band 2 or 4, depending on local connection. If the interpretation is counter to this, a further analysis should be done to ensure no impact occurs, particularly in relation to I bedroom properties.
disability	Giving false information. People with mental health problems or	Guidance on how to deal with this fairly is required.

	disability may give false information unintentionally or without understanding the consequences.	
disability	Convictions and evictions – sections on sanctions. These may have happened illegally or without reasonable consideration of the person's disability or condition.	procedures should clarify that individual circumstances relating to disabality or mental health may have led to evictions or convictions and these may mitigate the sanctions we would want to apply.
disability	People with a disability may require longer to arrange viewings or to make a decision on accepting or refusing an offer.	procedures must make clear that more time and support may be required for viewings and acceptance/refusals.
disability	Some people may require larger properties/extra bedrooms for, e.g. carer or storage of equipment.	The procedural document should give examples and clarify interpretation.
Disability and ethnicity	Complicated forms can be a barrier to those with learning difficulties or sensory impairment or language difficulties. Reliance on telephone or internet may also disadvantage certain people with communication difficulties.	Ensure forms are as clear and simple as possible. Access to the service should be by a diverse variety of means, including face to face, possibly with support, e.g. at central location or home visit. Ensure support is available and easily accessible for people to get advice and to apply. Ensure procedures and training makes clear duty to ensure access and support applicants. Need to ensure information is provided in alternative forms.

ethnicity	Gypsy and traveller customers: how would they be treated under the scheme if they wanted to leave their nomadic life?	Procedures should make clear that in this case, the applicant should be referred to homelessness, which would assess the case and this would normally apply. Awareness should be raised within this community about allocations.
ethnicity	Some people will require communication in different languages	Procedures must make clear that we will communicate in different languages and offer support.
Religion and belief	People may require particular facilities in a property for religious or cultural reasons. For example, Muslims or Jews may require two sinks in the kitchen or a shower.	Procedures must make clear that this would constitute reasonable grounds for refusal of viewing or offer.
Religion and belief	People within some religions/cultures may seek viewings/interviews with staff of particular gender and require particular cultural sensitivities to be met, e.g. taking off of shoes in house.	Procedures and training should ensure these factors are widely known and followed in the service.
Religion and ethnicity	Extended families are more likely in certain cultures. There is a danger that properties will not be available for such large families or that officers may not consider the extended family as part of the household.	Procedures should ensure it is clear that extended families can be part of household. Shortage of certain property types should be considered in relation to demand and development. Recording of enquiries, need and advice given will allow this to be monitored in relation to extended family size.

Sexual Orientation	DCC report feedback that young people sometimes become homeless because of issues related to them coming out in their local community. This may relate to hate crime or fear of violence and should be considered a reason to give band 1 priority	Procedures should highlight this possibility that someone may be fleeing hate crime or threat /fear of violence in relation to sexuality. This should be followed by homeless teams and homeless assessment should ensure correct communication to application officers so correct banding is awarded.
Age	ASB is related to age and so younger applicants will be more affected by sanctions than older, on average.	Procedures should make clear that implementation of policy should be fair, reasonable and legal.
Pregnancy/Maternity	In policy, a pregnant woman is eligible for 1 or 2 bedrooms and may justifiably refuse a 1 bed. Same argument would hold where pregnant woman already has children and would become eligible for more than 2 bedrooms.	Procedures should make clear that it is reasonable for someone to refuse a property when they are pregnant and will require extra bedroom within short space of time. This would apply whenever the future birth of a child may mean they become eligible for a larger property. Insert statement in policy that where woman is pregnant a review of their bedroom entitlement would be undertaken and they may be eligible for larger property.
Welsh language	Policy and approach needs to be bilingual.	1. Adhere to Welsh language legislation.

		2. Ensure policy is available in Welsh. 4. Do housing options services need to be bilingual or have proportion of Welsh speaking officers? This may vary by area.

Service delivery development outcomes – to be done during service delivery development and ICT specification

Strand	Observation	Task
all	Assess delivery structure re. impact on equality, particularly in relation to partnership working	Assess delivery structure re. impact on equality, particularly in relation to partnership working
all	Monitoring: service delivery design should enable better recording of information on need and outcomes of advice given, in relation to equality and housing need IMPORTANT: specify IT to record presenting need in relation to equality and outcomes of getting advice.	Monitoring: service delivery design should enable better recording of information on need and outcomes of advice given, in relation to equality and housing need. Specify IT to record presenting need in relation to equality and outcomes of getting advice. Take this forward constructively with IT suppliers
gender	Location of HOT centres should not discourage women (or any other group) from attending	
Disability and ethnicity	Policy talks about need to make some things clear "in writing". Need to ensure information is also provided in other forms.	
Disability and ethnicity	Complicated forms can be a barrier to those with learning difficulties or sensory impairment. Reliance on telephone or internet may also disadvantage certain people with communication difficulties.	Ensure forms are as clear and simple as possible. Access to the service should be by a diverse variety of means, including face to face, possibly with support, e.g. at central location or home visit. Ensure support is available and easily

		accessible for people to get advice and to apply. Ensure procedures and training makes clear duty to ensure access and support applicants.
Religion and ethnicity	Extended families are more likely in certain cultures. There is a danger that properties will not be available for such large families or that officers may not consider the extended family as part of the household.	Procedures should ensure it is clear that extended families can be part of household. Shortage of certain property types should be considered in relation to demand and development. Recording of enquiries, need and advice given will allow this to be monitored in relation to extended family size. – ICT implications
Age	Having particular properties designated for particular age groups should be justified on basis of need.	This issue should be noted and fed into housing strategy by individual partners, to ensure the age designation of properties accords with recognised housing need. SARTH ICT should be specified to enable collecting of data on need in relation to age.
Age	Changes to housing benefit for people 35 and under - assumption they will share accommodation.	Needs monitoring. Budgeting advice should include this.
Welsh language	Policy and approach needs to be bilingual.	1. Adhere to Welsh language legislation. 2. Ensure all customer facing material is bilingual. 4. Do housing options services need to be bilingual or have proportion of Welsh speaking officers? This may vary by area.

Training outcomes – to be done in lead up to implementation and on-going

Strand	observation	Task

all	Equality awareness and issues should be embedded in service.	Setting up of HOTs must include equality training. Training outcomes should be embedded so that they are done for all new staff on ongoing basis.
Gender identity	Officers are not allowed to ask for evidence of gender reassignment and must be confidential.	Training must make clear what is good practice in relation to gender reassignment/identity.
all	Tasks require judgements	Training must ensure all areas where staff must make judgements have clear guidance and governance relating to equalities considerations and legislation.
all	As in procedures table	Pick up all the tasks listed under the policy and procedures above and cover in training.

Promotion and Marketing outcomes– to be done in lead up to implementation and on-going

Strand	Observation	task
ethnicity	Migrant workers should have awareness raised regarding rights and options	Promotion of SARTH leading up to implementation to migrant groups
age	Older people may not be aware of the policy or register or their options and hence miss out on opportunities.	Promotion of SARTH leading up to implementation to older people and groups
All	Awareness raising through community channels to all sections of community.	Awareness raising through community channels to all sections of community.

AHR development outcomes – being taken forward now by project officer and Jane Richardson. This to be fed through AHR group

Strand	**Observation**	**task**

disability	How will property type and matching of person to property be done?	Develop matching policy.
disability	Service needs to be accessible to all people with physical or mental disability and all vulnerable people.	Ensure service is accessible. Develop links with support agencies

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Report To:	**Partnerships Scrutiny Committee**
Date of Meeting:	**19 December 2013**
Lead Member/Officer:	**Lead Member for Social Care Adults and Children's Services/Head of Adults and Business Services**
Report Author:	**Head of Adults and Business Services**
Title:	**Framework for Integrated Services for Older People**

1. What is the report about?

This report informs Members about the intentions of Welsh Government to establish integrated health and social care services for older people with complex needs.

2. What is the reason for making this report?

A decision is required on the attached draft Statement of Intent document (appendix 1) that Welsh Government have requested be submitted by the end of January 2014. The statement is a regional document as requested by Welsh Government but highlights areas of good practice that have developed in Denbighshire.

3. What are the Recommendations?

That Members provide comment for Cabinet's meeting on 14 January 2014 on the content of the attached draft Statement of Intent for submission to Welsh Government on a regional basis.

4. Report details.

4.1 The attached Welsh Government document, *"A Framework for Delivering Integrated Health and Social Care" (July 2013)* (appendix 2), states that, for older people with complex needs, it wants to bring an end to 'fragmented care' that 'wastes resources, effort and opportunities' and it sets out 'essential requirements that must be put in place as the standard model across Wales'.

4.2 The document defines integrated care for people needing care and support as:

"My care is planned by me with people working together to understand me, my family and carer(s), giving me control, and bringing together services to achieve the outcomes important to me."

Regionally, we have also suggested an organisational definition as:

"A single system of needs assessment, commissioning, and/or service provision that aims to promote alignment and collaboration between the care and the cure sectors". (Ham, 2008)

4.3 The Welsh Government document requires a series of actions to be undertaken regionally and the focus of this report is on those actions required by the end of January 2014.

4.4 All local partners must sign off and publish a Statement of Intent on Integrated Care, setting out clearly how:

- they will build an appropriate workforce across all partners as an early opportunity to enhance the citizen's experience;
- they will ensure a relentless focus on delivering locality based citizen centred, co-produced services, focusing upon the pivotal role of primary care services in delivering person centred care.
- they will maintain robust local partnership arrangements that reflect a willingness to delegate responsibilities;
- they will provide leadership and commitment at all levels and across all sectors, with explicit governance and accountability arrangements;
- a single commissioning plan will operate across partners, moving over time to a consistent approach across Wales;
- collaborative resource management will be managed through options such as a financial governance framework; joint commissioning plans and intentions; pooled and/or integrated budgets;
- pooled budget arrangements will be extended, stating first what these currently are .

4.5 Also, in developing the service, partners should develop shared local health and social care outcome measures that will demonstrate the impact of integration and drive further progress.

4.6 Nationally, the development of integrated service delivery for all people with complex care and support needs is supported by relevant professional bodies such as the Association of Directors of Social Services (ADSS) as a way of improving outcomes for people in need while managing the increasing demands resulting from demographic change and reductions in funding for Local Government.

4.7 The regional statement identifies a number of future intentions, including the exploration of:

- Strengthening governance arrangements,
- Reviewing existing partnerships,
- Developing joint commissioning strategies,
- Identifying existing resources at Locality levels and exploring the potential for pooled budgets to deliver improved outcomes for individuals and organisations,
- Developing co-located teams with single line management arrangements,
- Developing a shared information system,
- Developing outcome-focused, citizen-directed services,
- Implementing a county-based Single Point of Access,
- Implementing the new Welsh Government Guidance "*Integrated Assessment Process for Older People*".

Any changes to current arrangements arising from this exploration will be brought back to Scrutiny and Cabinet for comment and a decision.

4.8 Locally, Denbighshire has a history of working jointly with health services through a number of successful service developments, including:

- Integrated Mental Health Teams
- Denbighshire Health & Social Care Board
- Community Equipment Service
- Co-located Learning Disability Service
- Seasonal Planning

and the intentions in the statement do not affect the future developments we are working on locally such as the Single Point of Access, joint locality teams or roll out of Enhanced Care at Home.

4.9 The work to develop the co-located team in Hafan Lles was intended to be the start of more formal integration in North Denbighshire. This was put on hold as the new Health Board came into existence but the direction of travel from Welsh Government gives us an impetus to refocus on this and, in doing so, to ensure that it also reflects the issues facing rural areas.

4.10 In addition, Denbighshire County Council and Betsi Cadwaladr University Health Board have reached agreement on the arrangements for delivering the first phase of a Single Point of Access for community health and social care services. This will be in place by April 2014 and is a key strand for the delivery of integrated services.

4.11 As part of the work for the single point of access, a range of shared outcome measures have been developed that will be able to inform how well integration is working for people in need as well as organisations. The key questions are:

- Will it improve quality of life?
- Will it improve the quality of care?
- Will it improve the citizen's experience?
- Will it maximise cost efficiencies?

4.12 All of this work is governed through a structure that includes Locality Leadership Teams and The Denbighshire Health & Social Care Board, at which sit senior managers and politicians from the Council as well as senior managers from the Health Board.

4.13 The statement has been written on a regional, sub-regional and on a county wide basis, acknowledging that, at the time of writing, no statement has been received from the Commission for Public Services on future local government arrangements.

4.14 While acknowledging that there is no single model across North Wales for integrated services, the components of a service model identified in the statement are ones the group recognise as meeting 4 key themes identified by older people when asked about the service difficulties they experienced, namely:

- co-ordination of care,
- continuity of care,

- straightforward and consistent referral and communication systems
- access to services

5. How does the decision contribute to the Corporate Priorities?

The development of integrated health and social care services contributes to the corporate priorities:

- Vulnerable People are protected and are able to live as independently as possible
- Modernising the council to deliver efficiencies and improve services for our customers

6. What will it cost and how will it affect other services?

Integration is intended to reduce management costs within community services and this is reflected in the budget plan for Adult & Business Services over the next 3 years.

7. What are the main conclusions of the Equality Impact Assessment (EqIA) undertaken on the decision? The completed EqIA template should be attached as an appendix to the report.

An Equality Impact Assessment will be undertaken as part of the exploration, with a particular emphasis on issues relating to Welsh language and rurality.

8. What consultations have been carried out with Scrutiny and others?

The draft Statement of Intent in appendix 1 has been developed by a regional multi-agency group that has included the Head of Adult & Business Services for Denbighshire. The statement has been discussed at the Health & Social Care Board and is due to be discussed in Cabinet on 14 January for final agreement.

9. Chief Finance Officer Statement

The detailed development of an integrated provision will have to be assessed as detailed proposals emerge to ensure that governance and financial arrangements are fully considered and that costs are equitably absorbed among partners.

10. What risks are there and is there anything we can do to reduce them?

Working together with other agencies through integrated service delivery can bring risks associated with sharing responsibility for different organisational functions. This is mitigated through effective governance structures including the Denbighshire Health & Social Care Board.

11. Power to make the Decision

Article 6.3.2(b) of the Council's Constitution.
S.111 Local Government Act 1972.

Contact Officer:

Head of Adults and Business Services Tel: 01824 706654

Appendix 1

Integrated Health and Social Care Services for Older People with Complex Needs

North Wales Statement of Intent

1 Introduction

The following paper constitutes the Statement of Intent on Integrated Care for Older People with Complex Needs between the North Wales Local Authorities and Betsi Cadwaladr University Health Board.

It has been developed jointly by colleagues from the North Wales Authorities and Betsi Cadwaladr University Health Board, to provide a single regional statement.

Across North Wales, there is a strong recognition of the need to work within a regional footprint—both to accommodate the LHB structure and to maximise efficiencies; whilst also being responsive to local need and historical service developments. This results in service planning and delivery needing to operate on a regional, sub-regional, county and locality level.

Currently the LHB's clinical management structure is under review, whilst Local Authorities are awaiting the outcome of the Williams Review - this inevitably leads to a level of organisational uncertainty. However, the paper has been written to reflect the strategic intent of Partners, with the vision, aims and objectives for integration across North Wales able to be actioned regardless of future organisational structures.

The need to take a more robust and immediate approach to the Integration of Services for Older People, has been clearly disseminated by the Minister and Deputy Minister for Health and Social Services. This message is one that partner agencies across North Wales welcome and indeed there are many examples of strong partnership working which demonstrate the commitment to this approach. Partners intend to build on this in order to develop an ambitious agenda which pushes existing boundaries and develops new, innovative services and systems.

"Integrated working" can have a variety of interpretations and, for the purposes of this report, we are using the following (organisational) definition:

"A single system of needs assessment, commissioning, and/or service provision that aims to promote alignment and collaboration between the care and the cure sectors" (Ham, 2008).

This definition, should also be considered against the narrative to explain integrated care and support to the citizens, developed by National Voices:

"I can plan my care with people who work together to understand me and my carer(s), allow me control and bring together services to achieve the outcomes important to me"[(i)]
We understand that Integrated Care is not about structures, organisations or pathways per se, nor about the way services are commissioned and funded. Its primary purpose is to ensure that citizens have a better experience of care and support, experience less inequality and achieve better outcomes. However, within the current financial climate, it is also essential to recognise the imperative for any change to be at least cost neutral in the long term. When considering any move to Integration, we need to ask the following:

- Will it improve quality of life?
- Will it improve the quality of care?
- Will it improve the citizen's experience?
- Will it maximise cost efficiencies?

The paper is also predicated on the understanding that health, social care, third sector and independent services should be designed and delivered to promote and maximise well-being, enabling the person to live independently in their community for as long as possible with services being provided in the person's own home or within community settings to avoid the need for ongoing, acute or institutional care. These core features are the underpinning foundation for recent joint policy - Setting the Direction, Sustainable Social Services, Delivering Local Health Care and A Framework for Delivering Integrated Health and Social Care. They are also fundamental to the new Older People's Assessment Framework and the Social Services and Wellbeing (Wales) Bill.

Through integrated working Partners would expect to utilise their combined skills, knowledge, experience and resources to deliver better outcomes for Older People, specifically:

- Promote citizen ownership and control over their personal well-being and care needs, creating an independent rather than a dependent care culture
- Support older people to live independently and be connected to their home and community, with the aim of reducing the possibility of loneliness and isolation
- Provide proactive as well as reactive care, considering ways in which the individuals needs can be met through a variety of supports within the community and irrespective of their eligibility criteria
- Streamline services and care to better meet the individual needs of the older person
- Reduce duplication and increase awareness of services delivered across all sectors to older people
- Reduce the inappropriate use of longer term and more intensive or acute care
- Drive down the cost of caring for older people

2 Conceptual Framework

In order to plan for and describe the development of Integrated Services, this Statement of Intent has utilised a Partnership Continuum[ii] (see Appendix 1) which can be applied at Strategic, Managerial and Service Delivery levels, with implementation possible on a regional, subregional, county and locality basis.

Integrated working will naturally develop at a different pace for different services in different Localities across North Wales. However, we will ensure that learning is shared through partnership structures in a timely fashion to inform new developments. This may be, for example, through a shared website with a resource library and common templates for key documents and/or regular learning events.

Learning from key documents such as "Collaboration in Social Services Wales"[iii], "Making integrated care happen at scale and pace"[iv] and other experiences nationally have highlighted the issues which help and hinder integration and will bring pragmatism to our debate.

3 Model for the Integration of Health and Social Care Services for Older People

Within North Wales, there is no one agreed model for integration which encapsulates all public health, primary, community, acute, social care, independent and third sector services. However the following components of a service model:

- Integrated Structures within a Governance Framework
- Operational/Service Integration
- Prevention and early intervention
- Intermediate Care/Short Term Intervention
- Longer Term Community Support
- Sub Acute/In-patient Care
- Planned workforce
- Streamlined back office functions

are ones that partners recognise which can meet the 4 key themes identified by older people when asked about the service difficulties they experienced ie:

- co-ordination of care,
- continuity of care,
- straightforward and consistent referral and communication systems,
- access to services[v]:-

The development of a North Wales Integrated Service Model for Older People is a clear priority for Partners and one which we will work to achieve over the next 12 months. In this undertaking, we recognise that there may be variations between the 6 Local Authority Areas as to which of the components listed above will be adopted, at what stage in the Partnership Continuum and whether at strategic/managerial or service delivery level.

4 Current Arrangements and Future Intent

The following sections provide a baseline of current "integration" together with the intent and aspiration for the future in North Wales.

4.1 Leadership to Drive the Vision

Current arrangements

i) The **North Wales Regional Leadership Board** is comprised of:

- The Leaders and Chief Executives of the six North Wales Councils
- The Chair and Chief Executive of the Betsi Cadwaladr University Health Board
- The Chair and Chief Officer of the North Wales Fire and Rescue Service
- The Police and Crime Commissioner for North Wales
- The Chief Constable of North Wales Police

A key objective for the North Wales Regional Leadership Board is the promotion of joint working between local authorities and between local authorities and other public services like police, health and fire. To this end it manages a portfolio of collaborative projects.

ii) Partnership working within North Wales is further supported by the **Social Services and Health Programme Board**. This Board is chaired by a sponsoring Chief Executive and its membership consists of Directors of Social Services, Lead or Executive members for Social Care, Betsi Cadwaladr University Health Board officers and WLGA, WG and SSIA representatives.

iii) Social Services Directors also meet formally with BCUHB Executive Directors on a quarterly basis at the **NWSSIC/BCUHB Quarterly Strategic Forum**.

iv) Each LSB, within its Single Integrated Plan, has a commitment to improve collaborative working.

v) Locality working is the foundation for Integrated services in North Wales. Within the joint working arrangements in North Wales key partners come together at the (regional) **Community Services Partnership Forum**. This Forum includes representatives from BCUHB (in relation to public health, primary care, community health services and mental health), independent contractor professions, social services (from each of the six Local Authorities) and the 3rd Sector.

The Forum was originally established to drive forward the development and implementation of locality working and other key elements for delivering community services laid out in *Setting the Direction*.

Discussion is now underway to ascertain whether the Forum can take a broader strategic role to become a regional Delivery Group which has the responsibility of driving forward all the required actions outlined in both *"A Framework for Delivering Integrated Health and Social Care"* and *"Delivering Local Health Care"*. Through this Forum, the needs of the older population of North Wales for co-ordinated and consistent service delivery will be planned, using locality, county, regional and national data.

Future intent

i) The need for strong county governance structures which promote and support joint leadership at strategic, managerial and service delivery levels has been recognised, with a local Framework structure (attached as Appendix 2) showing the links between localities, counties and the whole region of North Wales. This has been adapted to meet the needs of each County. The County Forum level of the framework has been established with a key intent to support integrated working by unlocking barriers and unnecessary bureaucracy.

ii) The new Chair of Betsi Cadwaladr University Health Board has recently instigated a Partnership Review, the findings of which will help to inform strategic plans for Integration

4.2 Commissioning

Current arrangements

i) The BCUHB Director of Public Health Annual Report 2012 provides information on, and further links to, population needs assessment and priorities relating to the health and well-being of older people across North Wales.

ii) As an initial move towards a single commissioning plan, a regional working group comprising social care and health managers has been established to scope existing provision and identify the continuum of community based services which come under the broad umbrella of "intermediate care services".

iii) The North Wales Commissioning Hub for high cost, low volume placements is a positive example of regional joint commissioning activity and one which can be built on to develop joint procurement of residential placements, oversee a regional contract and ensure a consistent approach to fee setting.

Future Intent

i) Commissioning is a broad concept and there are many definitions. It can be described as the means to secure the best value for local citizens and taxpayers. It is the process of translating aspirations and need, by specifying and procuring services for the local population which deliver the best possible health and wellbeing outcomes for individuals and provide the best possible health and social care provision within the best use of available resources.

ii) For Older People's services, such benefits can be realised by planning and commissioning services jointly across social care and health in partnership with the 3rd and independent sector at a locality, county and regional level. An initial element of this activity will be the development of a Market Position Statement.

iii) Risk stratification will also be incorporated as this enables appropriate services to be targeted in order that pro-active, personalised care planning can be achieved. Users who require case management due to the complexity and unpredictability of their condition could then expect to receive care via co-ordinated care pathways that will ensure a smooth transition between services.

iv) A key issue will be to ensure that providers of health and social care services operate in an enabling culture, supporting independence and avoiding unnecessary escalation, e.g. hospital admission.

4.3 Resource Management/Pooled Budgets

Current arrangements

i) All counties have a Pooled Budget for Community Equipment Services.

ii) In **Denbighshire**, there is also a pooled budget agreed for the provision of health and social care support workers.

Other LA information to be added

Future intent

i) All organisations are required to make significant efficiencies over the next few years and this could be a barrier to the further development of formal pooled budgets. However, it could also be argued that pooling budgets could lead to efficiencies. As with any aspect of Integration, the rationale for taking such action requires the citizen and organisational benefits to be explored. This is an identified objective in respect of the Intermediate Care services working group referenced above.

ii) However, it is clear that we need to have an improved understanding of the resources available within the County, preferably by locality, so as an initial step partners will work together to map out the current budget, estate and staffing currently allocated to services for Older People.

4.4 Managerial/Service Integration

4.4.1 Workforce

Current arrangements

i) All organisations provide staff development opportunities that support staff from both health and local authorities as well as utilising Social Care Workforce Development grants to support developments in the 3rd and independent sector.

ii) In **Denbighshire**, there is a single line management arrangement for Adult Mental Health Services and co-location of health and social care staff for Learning Disability Services and a small team for Older People's Services.

Other LA information to be added eg re ECS

Future intent

i) There is an ambition across North Wales to move to a more integrated workforce structure for Older People. The predictions for future demand will be based on demographic change and the shift of services from ongoing, acute or institutional care to the community, whilst also taking into account additional demand arising from the need to address well-being, social inclusion, public health and the expected rise in the management of chronic conditions.

ii) We will determine the workforce required to meet the agreed Integrated Service Model for Older People to ensure that we have sufficient staff with the right skills in the right place. It is axiomatic that this is a particular challenge for the rural areas of the region.

iii) We will explore opportunities for the joint location of teams - noting the need for pragmatism in the shared cost implications of such provision.

iv) Shared arrangements have been identified as key in leading change and cutting across the fragmented services and silo working that characterise dysfunctional systems. We need to develop well co-ordinated, integrated pathways to ensure that citizens do not experience disconnect. We intend to commence discussion to explore the options of establishing joint Locality Managers who would have operational and developmental responsibility for the management of a complex range of specialist, multi-agency services in a cost effective and responsive way, integrating established practices and multi-disciplinary staff across care pathways.

v) A recent Partnership Assessment exercise undertaken by the Locality Teams in each County has provided an analysis of current working arrangements and identified areas for improvement. This assessment will provide a baseline for the future.

4.4.2 Back Office functions

The need to ensure that Integration is based on a whole systems/organisational approach is highlighted in *"Collaboration in Social Services in Wales"*[ii]. This document evidences the risks to developing integrated services when all key departments, e.g. finance, human resources, information, are not engaged in the journey from the outset. They need to be involved in agreeing the level to be achieved on the Partnership Continuum. Effective integrated working needs to be supported by policies and procedures that are at best joint and at least aligned. There is also a need for shared

training programmes, "joint" data management and information systems that "talk" to each other.

For the Health Board, support functions such as HR, payroll and procurement are provided by the all Wales Shared Services Partnership.

However, effective integrated working would best be supported by policies and procedures that are at best joint and at least aligned and we will explore this in the context of the all Wales Partnership.

Current arrangements

i) In **Denbighshire**, the co-located Learning Disability Team use a single client database, PARIS, which is managed by the Local Authority. There are WASPI agreements in a number of services to support joint working.

Other LAs to include any examples of co-ordinated systems and processes

Future intent

i) Within North Wales we will consider how development of joint information systems can be taken forward within the current model of the shared services partnership. This will consider the national procurement programme for a Community Care Information System.

ii) The intention is to support the integrated working objectives which in themselves deliver improvements for individuals and more efficient working practices. In general a single agile system for community health and social care would enable:

- Improved decision making – through access to more complete data. This should improve patient outcome and help avoid admissions and improve service planning
- Improved coordination – between authorities and thereby resulting in efficiencies and better service to patients
- Improved patient safety - through less transcription errors, improved timeliness, reduction in 'lost' referrals, traceability to one point
- Reduced visits to base – through access to information on the move
- Reduced duplication in data capture and checking information
- Reduction in unnecessary interventions
- Increased confidence in the identity of the patient

4.5 Citizen Centred /Co-produced services

Current arrangements

In North Wales, we recognise the value not only of adopting healthy lifestyle behaviours, but ensuring strong social networks are in place to support individuals. Being an active member of a community can increase the level of control people have over their lives and contribute to improved health and well-being. Co-production – using the experience, knowledge and abilities of professionals, partner agencies, people using services and

their communities – can contribute to improved outcomes. It can also help ensure that better value for money is achieved and can help in empowering communities.

The Director of Public Health's Annual Report 2013 recognises and supports the importance of such approaches. "Co-production means that people share decisions about their health and wellbeing with health and social care professionals. It means that health and social care workers move towards a facilitation role and away from the traditional fixing role. It means a shift of power, and it means that everyone needs the skills to take part in shared decision making."

Co-production approaches are being used in the planning and development of some community based initiatives and the six Local Authorities are developing a shared understanding of this methodology.

We are also exploring the potential development of social enterprise schemes – businesses that trade to tackle social problems, improve communities, people's life chances, or the environment. The Local Authorities and the Health Board have identified the need to develop a shared approach to social enterprise as part of the transformational change required for the implementation of the Social Services and Wellbeing Bill. Our proposals for use of the funding for implementation include the commissioning of expertise to support us in this approach.

(all to insert examples)

In **Denbighshire** – the North Denbighshire community healthcare services project has been working with service user and community representatives, who are taking part in the development of proposals for the planned new community hospital in the locality. We are exploring the potential for social enterprise or entrepreneurship to support local people becoming involved in the hospital facilities and services, working with other local agencies.

Future Intent

i) We will explore together how we can build on early work on co-production, working to embed the principles into our planning and development of future services.

   The Local Authorities and the Health Board will work with LA Regeneration departments and established social enterprises across North Wales to research, explore and learn more about the development of social enterprises and co-operatives. Although there are examples of well-established social enterprises operating across North Wales there is room to learn from these, develop these further and to establish Social Enterprises and / or Co-operatives in other service areas. North Wales will undertake a series of events to learn more about the development of such initiatives and will strive to establish further initiatives across social care and health services.

(Any county-specific initiatives??)

ii) The Locality Leadership Team recognises the need for an Outcomes Focused approach, in working directly with older people and also when developing services.

The new Assessment Framework will ensure outcomes are captured by whichever professional undertakes the assessment, whilst the recent regional document "Developing Joint Outcomes for Localities" will enable partners to agree the priority outcomes to be achieved through respective organisational actions

.

iii) The provision of pathways that encompass self-management through to end of life care will be developed.

Should also include Older People's Strategy Work in this section?

4.6 Service Delivery Integration

Current arrangements

In **Denbighshire**, Community Mental health Teams for adults are provided through a single line management structure. The Health & Social Care Support Workers are managed locally by the Local Authority through a pooled budget. The Local Authority provides professional input to the Enhanced Care Service and supported the Seasonal Plan.

Each LA needs to state here what they are currently doing jointly with Health/ other partners

Future Intent

As above

In **Denbighshire**, the Local Authority is working with BCU in the development of the North Denbighshire Healthcare Complex and the Llangollen Primary Care Centre and the roll out of Enhanced Care Services in the Central and South Locality area.

4.7 Engagement

Current arrangements

Within the regional Locality model, Locality Stakeholder Groups were identified as the mechanism for engaging directly with the population, to discuss current provision and identify future need/ options for change. This approach was initially used to debate changes to health provided community services.

Local Service Boards are developing engagement strategies to enable local communities to be better able to understand the work of the LSBs. Similarly, shared engagement strategies around the Single Integrated Plans are being used or developed.

Initial exploration of shared approaches to engagement and consultation has commenced through the North Wales Consultation Officers group, which comprises representatives of the six Local Authorities and more recently the Health Board.

The advantages of a shared approach are recognised in the Guidance for Engagement and Consultation on Changes to Health Services, which anticipates that in engagement and consultation, Local Service Board partners should be fully involved to ensure that proposals are seen and addressed within the context of the "whole system" of public service provision.

I

n **Denbighshire**, there is an Older People's Strategy Group, a My Life, My Way Group and contracts with 3rd sector organisations for advocacy and consultation in order to inform service quality and developments. We are currently engaging with groups to explore 'Supporting Independence in Denbighshire', characterised by 'SID', an older man representing individuals with a range of different social, health and care needs and how services can support his independence and wellbeing.

Each LA needs to state here what else they are currently doing jointly with Health/ other partners eg shared participation strategy

Future Intent

The need to review the working and focus of Locality Stakeholder Groups has been identified and will be discussed within the Community Services Partnership Forum. These groups present an opportunity for a shared approach between the six Local Authorities and the Health Board.

We will explore opportunities for development of shared engagement and communications. As part of the transformational change under the Social Services and Wellbeing Bill, it is proposed that a regional strategy is developed to be delivered over 3 years which would secure effective communication, including consideration of suitable materials such as banners, leaflets, materials for media and engagement with communities. This is to underpin a shared approach to community engagement and information.

We will continue to explore and identify opportunities for bringing together of activities on the spectrum of participation - communication, information, engagement and consultation, shared decision making – within the governance arrangements of each organisation.

Need to add Welsh Language issues here?

4.8 Transforming Access

Current arrangements

Each LA needs to state here what else they are currently doing jointly with Health/ other partners

In **Denbighshire**, there has been a project team developing a Single Point of Access (SPoA) for health and social care services for adults. Agreement has been reached on what will be included in Phase 1 of the development, in order to use the learning from this to inform both local and regional approaches.

Future Intent

SMW to ask Alwyn Jones to provide a statement re regional working

In **Denbighshire**, during Phase 1 the SPoA will:

- Process all referrals for health and social care community services to support Denbighshire residents' hospital discharge.
- Process all Enhanced Care Referrals for North and Central & South Denbighshire
- Process all other referrals for District Nursing team in Rhyl. (For referrals for all other District Nursing teams, the SPOA will forward referrals to the appropriate office for onward processing)
- Process all referrals for Community Therapy services in Denbighshire (but not 'self-referrals')
- Process all referrals for Community Hospitals and prepare and submit 'bed-states' (twice daily).
- Fulfil First Contact Team responsibilities to Adult Social Care services
- Coordinate a service response according to an individual's presenting needs.
- Where multiple referrals are made for a patient/service user the SPoA will inform the referrer and all services which other services are to be involved, with details of each care coordinator where appropriate.
- Offer telephone advice, information and signposting (or referral as appropriate) to non-statutory sector community services in Denbighshire.
- Maintain and develop the Directory of Services for Denbighshire, publish the information on the Family Information Service website and become involved in future public-information developments in the county.
- Record and analyse SPOA activity.

The SPOA workers will be co-located and managed by a single Team leader but their work will not be fully integrated. A 'health' staff member will always be on duty to lead on Health referrals and a Social Services staff member will be on duty to lead on Social Services referrals. All workers will be familiarised with each other's procedures so that work can be shared but workload will be managed according to the resources available. Exceptions will be noted and capacity will be monitored daily by the Team Leader so that issues can be escalated immediately.

D) Assessment of Older people

Future intent

We will implement the Guidance in respect of Integrated Assessment, Planning and Review Arrangements for Older People, as required by Welsh Government on December 2nd 2013, recognising this action as being the catalyst to support the broader integration of care.

5 References

(i) Integrated Care and Support—our shared commitment
National Collaboration for Integrated Care and Support, May '13

(ii) adapted from Community Based Collaborations
Oregon Centre for Community Leadership 1994
(iii) Collaboration in Social Services Wales,
SSIA 2013
(iv) Lessons from experience—Making integrated care happen at scale and pace
King's Fund, March 2013
(v) Mc Cormack et al 2008

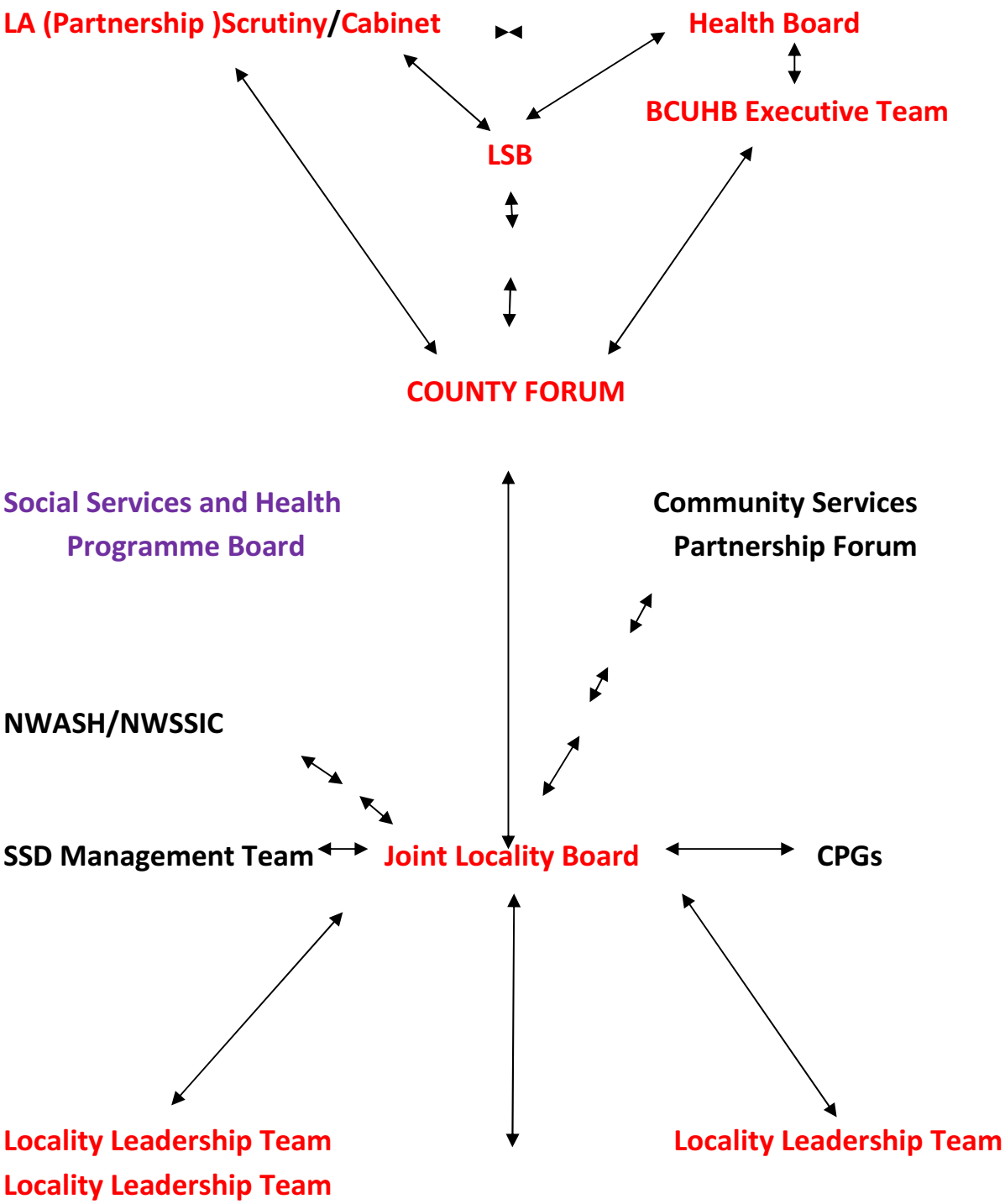
Appendix 1

Partnership Continuum

Levels	Purpose
Networking	* Dialogue and common understanding * Clearing house for information * Create base of support
Cooperation or Alliance	* Match needs and provide coordination * Limit duplication of services * Ensure tasks are done
Coordination	* Share resources to address common issues * Merge resource base to create something new
Coalition	* Share ideas and be willing to pull resources from existing systems * Develop commitment for a minimum of three years
Integration	* Accomplish shared vision and impact benchmarks * Build interdependent system to address issues and opportunities

Appendix 2

COUNTY STRUCTURE FOR INTEGRATED COMMUNITY BASED SERVICES



Version 5-5/11/13 ⟷ ***direct reporting*** ↔ ↔ **informing**

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Consultation Document

A Framework for Delivering Integrated Health and Social Care

For Older People with Complex Needs

Date of issue: **22 July 2013**
Action required: Responses by **31 October 2013**

Overview

Demographic and other trends in Wales mean that there is increased demand for both acute and community care services for older people, particularly those aged 85 and more. Frailty, dementia and the effects of multiple chronic conditions are more prevalent in this population group. Building on investment in collaborative working over the last ten years and more, Ministers believe that these changes require a new prioritised and robust response to integrate health and social services for older people with complex needs

A task group of NHS, Third Sector and local authority social care leaders has been working with and advising Welsh Government during the development of the Framework, and also considering options to support roll out and implementation. At this stage, we would welcome your views on the proposed Framework for Integration.

We are committed to further dialogue at a national and regional level to shape how integration in Wales is progressed which will be taken forward initially through the meetings of the Health Minister with LHB Chairs and the Deputy Minister's National Partnership Forum for Social Services which includes cross party local government representation. The Welsh Government led Multi-stakeholder Task Group will also need to have an on-going co-ordinating role and in supporting development and implementation of the Framework.

Ministers want to give priority and momentum to the Framework and to allow partners the opportunity to plan for implementation of integrated services during 2013/14 before implementation commences fully from April 2014. Ministers have asked that each local health board and local government partnership should on a public services foot print basis, develop an agreed Statement of Intent for integration of health and social services and submit these by the end of January 2014 for consideration.

It would therefore be helpful to receive your initial views and comments on the Framework and the way forward outlined by end October 2013. We would welcome shared responses across partnership groupings in line with locally agreed preferences.

How to respond

Please respond by email or in hard copy

Social Services Directorate
Department of Health and Social Services
Welsh Government
Crown Buildings
Cathays Park
Cardiff
CF10 3NQ

Email:FrameworkIntegratedServicesOlderPeople ComplexNeeds @wales.gsi.gov.uk

Further information and related documents

Large print, Braille and alternate language versions of this document are available on request.

Contact details

For further information:

Social Services Directorate
Department of Health and Social Services
Welsh Government
Crown Buildings
Cathays Park
Cardiff
CF10 3NQ

Email:FrameworkIntegratedServicesOlderPeople ComplexNeeds @wales.gsi.gov.uk

Data protection

How the views and information you give us will be used

Any response you send us will be seen in full by Welsh Government staff dealing with the issues which this consultation is about. It may also be seen by other Welsh Government staff to help them plan future consultations.

The Welsh Government intends to publish a summary of the responses to this document. We may also publish responses in full. Normally, the name and address (or part of the address) of the person or organisation who sent the response are published with the response. This helps to show that the consultation was

carried out properly. If you do not want your name or address published, please tell us this in writing when you send your response. We will then blank them out.

Names or addresses we blank out might still get published later, though we do not think this would happen very often. The Freedom of Information Act 2000 and the Environmental Information Regulations 2004 allow the public to ask to see information held by many public bodies, including the Welsh Government. This includes information which has not been published. However, the law also allows us to withhold information in some circumstances. If anyone asks to see information we have withheld, we will have to decide whether to release it or not. If someone has asked for their name and address not to be published, that is an important fact we would take into account. However, there might sometimes be important reasons why we would have to reveal someone's name and address, even though they have asked for them not to be published. We would get in touch with the person and ask their views before we finally decided to reveal the information.

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6. **The next steps**

Annexe A - Maturity Matrix

Joint Foreword

Mark Drakeford AM, Minister for Health and Social Services
Gwenda Thomas AM, Deputy Minister for Social Services

It is excellent news that people in Wales are living longer and healthier lives than ever before. We now need to ensure that our services adjust to help people of all ages enjoy their lives to the full in line with the commitment in our *Programme for Government* to '*develop high quality, integrated, sustainable, safe and effective people-centred services that build on people's strengths and promote their well-being*'.

We know that there is going to be a greater demand in future for care services for older people, particularly those aged 85 and more. *Together for Health* sets out our ambition for person-centred health services provided as close to home as possible. *Sustainable Social Services* envisages a social care service based on outcomes focused portable assessments and enabling people to make informed decisions, with more consistent care eligibility and planning. The *Social Services and Wellbeing (Wales) Bill* will significantly strengthen the legislative requirements for Health Boards and Local Government to integrate services.

Our policy aim is to improve existing services and develop a wide range of preventative services that can help people of all ages manage their own lives at home and avoid as far as possible having to go into hospital or residential care.

The core concern of this framework is to bring an end to fragmented care that confuses and frustrates providers and recipients alike. Fragmentation wastes resources, effort and opportunities. The document sets out essential requirements that we believe must be put in place as the standard model across Wales. We are not at this point looking to structural changes to achieve this, but change there must be.

It complements the framework for developing community services issued by Welsh Government in June 2013, *Delivering Local Health Care: accelerating the pace of change.* The two should be implemented through a single process of rapid, integrated action, involving local health boards, local government and their partners in the independent and third sector partners.

This Framework has been developed with the NHS, Local Government, Directors of Social Services and the Third Sector, and others such as Care Forum Wales have indicated their support for this approach. We encourage all interests to do the same to improve the services we provide to older people in Wales. It is this practice of 'co-production' that we wish to see both in the planning and the delivery of services and extending to include those who receive the services.

We commend it to you and would ask that you let us have your views and comments on it.

1. Overview and Context

Wales already has a higher proportion of people over 85 than the other countries of the United Kingdom and it is likely to rise in the next decade. If services are to help older people have a happy, independent life, action is needed now to ensure the right services are in place, especially in light of the current financial challenges. Services that are fragmented or unreliable or undermine people's ability to live where and how they would like will neither use increasingly scarce resources well nor meet the needs of people who need support.

A new pattern of services is needed, building on, adapting and developing the good foundations already in place. Recognising the growing evidence that demonstrates the benefits of integration, this document sets out how the Welsh Government ambition for truly integrated health and social care services for older people is to be implemented. Partners across Wales are expected now to move rapidly on making this model the norm. A marked change is needed over the next three years.

The term 'integration' has many definitions which reflect the spectrum of levels at which integration can take place. Integration is the opposite of fragmentation. For people needing care and support it should mean:

> 'My care is planned by me with people working together to understand me, my family and carer(s), giving me control, and bringing together services to achieve the outcomes important to me.'

To achieve this, care delivery must be aimed at achieving improved user and patient care through better co-ordination of services. Integration requires a combined set of methods, models and processes that seek to bring about this improved co-ordination.

The essential elements are that:

- service providers take down the barriers that have prevented effective collaboration and shape the service around a common understanding of the outcomes important to the individual
- the recipient will have a greater say and more control over the care received.

This framework:

- summarises the relevant policy and key principles;
- provides clear definitions;
- sets out the Welsh Government's expectations for how all the different partners need quickly to develop and deliver integrated health and social care services, not as something extra but as the normal way of working;
- identifies what the evidence indicates as the core requirements on which to base local planning and delivery; and
- states the outcome-based indicators that will help establish the present baseline position and measure progress.

It is anticipated that this approach will make health and social care outcomes better and more consistent, and strengthen community-based care. Good multi-disciplinary assessment will become standard practice, the role of the GP more central, and

early intervention, reablement and intermediate care part of a single co-ordinated system. Dignity and privacy will be protected.

While it takes time to achieve this, there is already good practice in place on which we must build. Examples include the areas that have pioneered frailty services, joint locality teams and community resource teams, and in mental health and learning disability services. There has also been solid progress in creating integrated support for families with complex needs. The principles applied there and lessons learned will be essential in supporting rapid progress.

2. The Case for Change

People in Wales are living longer and healthier lives than ever before, and services to meet their needs must keep up. Wales has the highest rate of growth for those aged 85 years and over of the UK countries - by 2030 people aged over 85 will jump by 90%, to 85,000

Older people have higher levels of frailty, dementia and chronic conditions, often in combination with each other - already there are more than 42,000 people with dementia in Wales, which affects two thirds of older people in residential care, and by 2021 the number is projected to rise by 30% and as much as 44% in some rural areas.

This will drive a growing demand for services. Community services and home based care will have to expand at a time when real term resource increases to meet this growing demand is no longer assured.

There is research and anecdotal evidence that services are fragmented, both within and across organisational and sectoral boundaries. Like others, older people want to be in control of their own lives and continue to be part of and contribute to their community. This implies that services should offer graduated, co-ordinated support to help them live independently in their own home for as long as possible. Evidence shows how disrupting older people's usual living arrangements can very quickly undermine their confidence and capability, even to the extent of making it impossible for them to live independently as before.

Providing community-based, fully co-ordinated services that are designed to support them and give them a say and the chance retain control of their lives is clearly the model that older people want and need to experience. Services that are co-ordinated and work as one can best achieve that.

This also chimes with the wish of people working within health and social care services. They recognise the need to empower older people, and welcome models of care and support that respects people's broader sense of personal wellbeing and a strong community.

Refocusing services, then, is a high priority area. Integrated models can better meet older people needs. They can also help address the increasing demand for care and support both now and in the future. Not changing is simply not an option. Urgent action is needed.

Change is achievable. There are already many examples across Wales of good integrated working including through: single agency responsibility for certain mental health services, integrated children's services - Integrated Family Support Service and Families First, integrated hospital discharge services, joint reablement and rehabilitation services and joint equipment stores. The Welsh Government 'Invest to Save' funding already supports frailty service models across much of Wales. On an on-going basis, the Invest to Save process, the Regional Collaboration Fund and the Wales Council for Voluntary Action's Wales Wellbeing Bond provide partners with access to resources to support further development.

Further progress is essential, and quickly. LHB and related Councils must plan a year on year increase in shared budgets and resources and set a specific locally agreed target for the proportion of resources relating to older people that are committed to a pooled budget. Action is essential now on what the King's Fund describe as a 'burning platform' with no alternative but to accelerate the pace and scale of developing integrated health and social care as core services.

3. What do we want to achieve?

The recognition that change is essential opens an opportunity to create a new truly integrated system. It should have two main characteristics.

1. It should be a consciously planned and managed system, built on ambition. Working closely together to reduce barriers between them, local partners will need to refocus their activities around those receiving care. This will require attention to:

    - preventative interventions that stop an avoidable slide into increasing dependency upon services;

    - locating and linking services in community settings with smooth transitions between different elements and into more specialised services;

    - creating fully integrated referral pathways that enable service users too easily cross organisational and sectoral boundaries without any harm or loss;

    - capturing once, and addressing all the needs of the service user

    - a balanced set of services operating where necessary 24 hours a day, integrating early intervention services, support for independent living, rehabilitation and reablement, intermediate care, end of life care and pathways into specialist services and less often used services;

    - full engagement all parts of secondary care focusing especially on those points of the pathway where the risk of undermining independence is greatest;

    - enabling service users to take part in developing their plan of care, with a named single point of contact, and to express their views regarding how the care is delivered;

- enabling carers to take part in developing the plan of care, receive an assessment of their support needs, have access to relevant, up-to-date and targeted information at every stage and express their views regarding how the care is delivered;

- initiate joint action when young carers are identified who may appear to be at risk or a 'child in need' because of their caring role are identified

2. It should be built with and for service users and the local community. Services should not be designed and run with out reference to the people they serve. The definition of integration in Section 2 focuses on the experience of the recipient of services.

   There must then be a strong commitment in developing services to increase the voice of the users and the community. This should aim both to support and facilitate community wellbeing in the broader sense and also to encourage and help individuals and communities to take more responsibility and control for themselves.

   Services should recognise that communities and individuals are themselves assets. Together service providers and recipients can help create a more effective service. Professionals have specific training, experience and skills while the recipient of care knows best his or her needs, preferences and situation. Planners and others need to build on this potential to 'co-produce' the best service and best outcomes.

   The same idea of co-production can apply in developing healthier communities and reducing dependency. A fully integrated approach can also build on community-oriented actions such as:

   - specific initiatives to develop social networks;
   - encouragement for volunteering, including time banking;
   - working on 'community currencies' which not only strengthen the social resilience of communities, but also local economies;
   - developing models of social enterprise.

3. There must be a real commitment to constant monitoring and improvement. Explicitly moving to a more integrated approach means that responsibilities are sometimes not so clear. The partners will need to work closely together to ensure there are safe and clear governance arrangements for delegating responsibilities, sharing resources, and ensuing accountability. There must be careful attention to reviewing quality and outcomes, even more important when services are in flux.

4. Making it Happen

In making the necessary changes, a decision has been made that at this point reforms to structures are ruled out, but change there must be. The requirement therefore is that local bodies now progress along a clearly defined path, linking at each stage their actions to those being delivered in parallel in response to *Delivering Local Health Care.*

In doing so they should draw on the mass of evidence that suggests that, while there are many ways of integrating care, the key principles remain consistent. These have been helpfully summarised by the King's Fund[1] and based on their work sixteen issues are set out in the box below that must be taken into account in developing and mainstreaming integrated services for older people over the next three years.

The core planning issues

To be clear about:

1: our common cause – why we are doing this
2: our shared narrative - why integrated care matters
3: our persuasive vision – what it will achieve
4: shared leadership – how we are going to do this
5: how to build true partnership
6: what services and user groups offer the biggest benefits
7: how to build from the bottom up and the top down
8: how to pool resources
9: how to use commissioning, contracting, money and the independent sector to create integration
10: how to avoid the wrong sort of integration
11: how to support and empower users to take more control
12: how to share information safely
13: how to use the workforce effectively
14: how to set objectives and measure progress
15: how to avoid being unrealistic about the costs
16: how to build this into a strategy

Actions required:

1. Local partners must **by end of December 2013** assess their current situation and action required, both at footprint and locality/cluster level, against the 16 issues in the box above, and define local action required.

2. All local partners must **by end of January 2014** sign off and publish a Statement of Intent on Integrated Care.

[1] *Making integrated care happen at scale and pace: Lessons from experience.* London: King's Fund, March 2013

The Statement must include the baseline assessment required under 1 above and set out clearly how:

- they will build an appropriate workforce across all partners as an early opportunity to enhance the citizen's experience;

- they will ensure a relentless focus on delivering locality based citizen centred, co-produced services, focusing upon the pivotal role of primary care services in delivering person centred care.

- they will maintain robust local partnership arrangements that reflect a willingness to delegate responsibilities;

- they will provide leadership and commitment at all levels and across all sectors, with explicit governance and accountability arrangements;

- a single commissioning plan will operate across partners, moving over time to a consistent approach across Wales;

- collaborative resource management will be managed through options such as a financial governance framework; joint commissioning plans and intentions; pooled and/or integrated budgets.

- how pooled budget arrangements will be extended, stating first what these currently are .

3. The Welsh Government will use the baseline assessments in the Statement of Intent as a means of reviewing progress in delivering the requirements in this document.

4. Also **by end of January 2014**, in developing the service, partners should, using the evidence base and their own experience and assets, develop shared local health and social care outcome measures that will demonstrate the impact of integration and drive further progress.

5. Partners should ensure **by September 2014** that local planning mechanisms reflect the requirement that collaborative planning at local level is based upon a citizen-centred model that allows older people in Wales to have a voice and to retain control of their life.

6. Partners need to **by December 2014** to have developed within mainstream services for older people integrated services for older people with complex needs, designed in line with this Framework will be embedded**.**

The maturity matrix included at Annex A in this Framework provides an additional tool for partners to use to establish the current position of collaborative service planning and delivery locally, and to organise the journey forward and capture progress.

5. Measuring Success

Recognising and reporting success in integrating health and social care services is essential. All partners will already have performance targets and outcome measures in place that gauge progress in developing integrated services.

As stated above local partners will be expected to establish their baseline position, both at a public service footprint and locality/cluster level against the 16 issues and to set these out in the Statement of Intent and also to agree their own priorities and measures for use in assessing the pace of change. These should be reported to the LHB Board and the Local Authority and to other interested bodies on a regular basis.

In addition, the Welsh Government will use the key indicators below adapted from the Audit Commission's '*Joining up health and social care: Improving value for money across the interface*' (December 2011), along with data available on carers to monitor progress.

The Performance Indicators: Indicator		Anticipated direction of travel
1	Emergency admissions to hospital for people aged 65 and over	Decrease
2	Emergency bed usage for people aged 65 and over	Improved performance benchmarked against CHKS © Peer Group
3	Shift in balance from care home to home care provision	More people supported to live in their own homes
4	Admissions and re-admissions avoided by appropriate community based intervention models	Increase
5	Falls data captured and submitted to the Reducing Harm from Falls Collaborative	Continuous improvement Benchmarked with collaborative
6	Admissions to care home direct from acute hospital	Decrease
7	Discharge to usual place of residence	Increase
8	Number of people choosing where to die (end of life services)	Increase
9	Unplanned hospital attendances	Decrease
10	Readmission within 14 days of discharge	Decrease
11	Delays in transfer of care due to waits for packages of care or modifications to the home environment	Decrease
12	The proportion of carers assessments undertaken	Increase

6. The next steps

A 12 week consultation process will now commence. This will seek not only responses to specific issues, for example how best to capture and measure success, but will also give people using services and carers, the public, interested organisations, local statutory bodies and providers, and others an opportunity to share their views on the overall intentions and the proposed approach.

Responses should be sent by 31 October to:

Social Services Directorate
Department of Health and Social Services
Welsh Government
Crown Buildings
Cathays Park
Cardiff
CF10 3 NQ

A Maturity Matrix to Support Health and Social Care Integrated Care Partnerships

Using the matrix: Identify the level you believe your partnership has reached for each key element and then draw an arrow to the level you the level you intend to reach within the next 12 months. Review the partnership's maturity matrix position on a frequent basis.

Progress Levels / Key Elements	0 No	1 Basic level Principle accepted and commitment to action	2 Early progress Early progress in development	3 Results Initial achievements evident	4 Maturity Comprehensive Assurance in place	5 Exemplar Others learning from our consistent achievements
Purpose and vision		Purpose debated and agreed. Values and priorities agreed, and documented. Political agreement to integration confirmed and documented cross Health, Social Care, Third Sector and Partners. 'Health and Social Care Integration Partnership' (H&SCIP*) understands its role.	Priorities and stretch goals have been agreed with stakeholders =. Robust mechanism for adding and removing services and/or care settings agreed. Plans rooted in local population needs.	Evidence priorities are being met, with progress towards stretch goals in some areas. Evidence of citizen engagement and public accountability testing purpose and vision. Existing partnership work considered.	Systematically match how purpose dovetails with population needs. Evidence that integrated care is enhancing the quality of services and experience for the citizen	Confidence in achieving purpose and vision as population health benefitting in accordance with plans. Local health planning, local authority commissioners, third sector and other partners have been influenced. Evidence of reduction of waste and duplication through tackling duplication and fragmentation
Strategy		All stakeholder strategies relevant to work gathered and timetable set for developing integrated strategy. Base for all 'H&SCIP' strategic decisions. Political sign-off of strategy by all partners	Strategy development underway. Arrangements in place for areas of joint planning/commissioning and investment opportunities.	'H&SCIP' has a current published strategy, which includes improvement milestones and how they will be measured and monitored.	Strategy refined in light of successful achievement of milestones, and new intelligence and aspirations	Strategy has benefitted other health and social care economies, as well as influencing the strategic direction of all local partner organisation.
Leadership of the local health and social care integration economy		'H&SCIP' leadership agreed and appointed. Key stakeholders aware of leaders and how to contact. Relevant stakeholders identified and invited to participate. Local health, social care, third sector and partner resources understood.	Leadership development for 'H&SCIP' discussed and agreed. Development plans initiated. Stakeholders understand leadership issues. Relevant stakeholders regularly attend and provide input into work programme	Results of partnership working systematically reviewed. Relationships with partners are positive and ongoing dialogue about planning, commissioning, contracting decisions and joint investment opportunities. Public health voice is evident in decisions.	Review of success of leadership approach. Ongoing succession plans in place. Benefits of partnership working have enabled the majority of stakeholders to meet their improvement objectives and resource allocation.	Benefits of partnership working have enabled majority of stakeholders to exceed their improvement objectives. Outcomes improved and this is traceable back to initiatives from the 'H&SCIP'
Governance		Membership and terms of reference for the 'H&SCIP' Board drafted and shared.	'H&SCP' board set up and first annual cycle of business agreed. Relationships with relevant local organisations being developed.	Local stakeholders have clearly incorporated 'H&SCIP' Board accountabilities into their own governance arrangements.	'H&SCIP' Board has reviewed its first year of working through a structured annual review process and made improvements to structure and organisation	Good governance benefits identified and the 'H&SCIP' Board know better governance practice has influenced local partner organisations.
Information and intelligence		Information requirements identified and format of initial dashboard agreed	Developed a dashboard of key information and information improvement continues. KPIs reflect shared performance objectives across health, social care and partners	'H&SCIP report confidence with levels of intelligence they receive, and that information systems are reliable and working. H&SCIP receiving evidence of performance improvement against KPIs.	'H&SCIP' informed by real-time intelligence, demonstrating improved outcomes, quality and efficiency across health and social care.	A single information system established and utilised across the partners. Outcomes and performance benchmark against best performers.
Expertise and skills		Skills and expertise for 'H&SCIP' have been identified and agreed	Induction and development plans for 'H&SCIP' partners and staff are up and running	The 'H&SCIP' influencing skills are evident by success in positive change to local planning and the pattern of local service provision.	The 'H&SCIP' supports LHBs, Local Authorities, Third Sector and partners by valuing key planning/skills. The H&SCIP Board acts as a forum to bring in specialist skills and expertise to support planning/commissioning.	The 'H&SCIP' influences the organisational development of partner organisations. The local health and social care economy is recognised as being a good career choice for planning/commissioning professionals.

*The H&SCIP is generic term for the purpose of this matrix. Please replace with your local equivalent.

Source: Adapted from the London Health and Wellbeing Board Maturity Matrix

Consultation Response Form

Your name:

Organisation (if applicable):

email / telephone number:

Your address:

Question XX: We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:

Please enter here:

Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please tick here: ☐

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Report to: **Partnerships Scrutiny Committee**

Date of Meeting: **19th December 2013**

Lead Member: **Lead Member for Social Care and Children's Services**

Report Author: **Head of Children and Family Services**

Title: **Development of a National Adoption Service for Wales**

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1. What is the report about?

1.1 To seek Scrutiny's views on the plan to establish a National Adoption Service for Wales, supported by Regional Adoption Collaboratives.

1.2 To seek support that Wrexham County Council continues to act as the lead authority for the North Wales Adoption Service.

2. What is the reason for making this report?

To assure Scrutiny Committee that the Council's statutory functions in relation to providing an Adoption Service are fully met, in accordance with legislation and guidance.

3. What are the Recommendations?

That Scrutiny Committee:-

3.1 provides observations on the contents of this report and;

3.2 supports the proposals for achieving a National Adoption Service in Wales as detailed in the report of the Association of Directors of Social Services (ADSS) Cymru.

3.3 supports the proposal that Wrexham County Council will continue to act as the lead authority for the North Wales Adoption Service.

4. Report details.

Adoption must be seen in the broader context of planning placements and permanence for children and as part of an integrated system of services for meeting their needs and promoting their well-being. Adoption Services as a whole are complex, provided to a wide range of service users from very young children who are being placed for adoption to older adults who are seeking to be re-united with their birth families.

There is a clear requirement that children in care must have plans for permanence in place which consider the full range of permanence options and which are put into effect with appropriate urgency.

Scrutiny Committee will be aware that the creation of a National Adoption Service is one of the key policy strands of the Welsh Government and that, if enacted, the Social Services and Well-Being (Wales) Bill will allow Ministers to prescribe arrangements by local authorities.

Working closely with the Welsh Local Government Association (WLGA), ADSS Cymru produced a functional model for delivery of Adoption Services across Wales. A copy of this report is attached at Appendix A. The model was endorsed by the Expert Advisory Group on Adoption established by Welsh Government. The outline proposal developed by ADSS Cymru was agreed in principle by Leaders at WLGA Council in April.

Subsequently, in a Written Statement on 25th April 2013, the Deputy Minister for Children and Social Services endorsed the proposals for achieving a National Adoption Service and the development of a Functional Model for the delivery of services across Wales, as presented by ADSS Cymru and the WLGA. A copy of the Written Statement is attached at Appendix B.

The proposals outlined in detail in Appendix A, provide an ambitious but realistic pathway for creating an effective and responsive National Adoption Service. This will help to ensure:

- A new direction for the delivery of Adoption Services that is particularly suited to the Welsh context.
- Timely implementation of the improvements required.
- An increase in the pace of collaboration and the capacity to build sustainable services for the future.
- A reduction in bureaucracy and a streamlining of service delivery.
- An improvement in service accessibility for all key stakeholders.
- Maintenance of the essential integrity and coherence between all elements of Adoption Services, to prevent a mismatch between the needs of children requiring adoption placements and the adopters being recruited.
- Long term and lasting improvements to address the weaknesses identified in some elements of current service provision.
- A central place for the significant contribution made by the Voluntary Sector as valued co-producers and delivery partners.
- Collective opportunities for local authorities to respond effectively to rising pressures within the care system.

The proposal will be underpinned by a National Standardised Performance Framework that will allow the National Adoption Service to identify, review and highlight key performance measures. The framework will set performance thresholds and make clear the Welsh Government's minimum expectations for timeliness in the adoption system, for both the child and prospective adopter.

The **National Adoption Service** will be responsible for:

- Establishment of a National Board.

- Monitoring the delivery of services in accordance with the national performance framework.
- Producing an Annual Report and action plan.
- Developing a national marketing and awareness raising strategy.
- Providing a single point of contact for anyone seeking information about adoption.
- Providing a database of information.
- Developing and maintaining a National Adoption Register.
- Co-ordination of Adoption Panels, Panel Members, Pre-Approval Training, Post Adoption Support Services and provision of the Independent Review Determination Service.
- Acting as a Centre of Excellence for Adoption in Wales.

The functional model proposes five **Regional Adoption Collaboratives** are established, to deliver the functions of the National Service including:

- Ensuring compliance with legislation, regulation and the performance management framework.
- Recruitment and assessment of prospective adopters.
- Ensuring appropriate matching of children.
- Provision of the whole range of support services including birth parent counselling, step parent adoptions, intermediary services and letterbox contact.
- Ensure effective links are maintained with local authorities Children's Social Services.

The proposed five regional collaboratives are:

- North Wales – Wrexham, Flintshire, Gwynedd, Conwy, Denbighshire and Ynys Mon;
- South East Wales – Blaenau Gwent, Monmouthshire, Torfaen, Newport and Caerphilly;
- West & Mid Wales – Ceredigion, Carmarthenshire, Pembrokeshire and Powys;
- Western Bay – Bridgend, Neath Port Talbot and Swansea; and
- Mid & South Wales – Cardiff, the Vale of Glamorgan, Merthyr Tydfil and Rhondda-Cynon-Taff.

These collaboratives are currently at different stages of development. The North Wales Adoption Service has been operational since 1st April 2010. Overall it is seen as functioning reasonably well, but we are undertaking a review of various aspects to ensure it is as effective as possible. This review will focus on reshaping and strengthening governance arrangements; service structure and location; strengthening systems and practice and will inform developments going forward. This will also include a review of the funding relationship and the basis of that going forward.

It is planned that all five Regional Collaboratives will be established by April 2014.

In addition, each **local authority** will retain responsibility for the following:

- Assessment and care planning and reviewing of Looked After Children and young people.
- Ensuring the Agency Decision Maker functions are fulfilled.
- Assessment of the Adoption Support needs of children for whom the plan is adoption.
- Involvement in the matching and linking of children and adopters.
- Providing birth parent counselling.
- Making applications to the Courts for appropriate orders.
- Attending Adoption Panels where proposed matches are being considered.

5. How does the decision contribute to the Corporate Priorities?

It is a significant contribution to ensuring that children are safeguarded and enabled to develop appropriately in circumstances of stability and permanence

6. What will it cost and how will it affect other services?

A Task and Finish Group will be established with representatives from Welsh Government, ADSS Cymru, Care and Social Services Inspectorate Wales (CSSIW), British Association for Adoption and Fostering (BAAF), Voluntary Adoption Agencies and each of the five Regional Collaboratives. The purpose will be to produce a robust change programme for implementing the functional model.

It is recognised that Programme Management capacity is required to drive through these changes in a timely fashion and the Deputy Minister has awarded £50k to ADSS Cymru to support the implementation.

The following key milestones have been agreed:

- Membership and brief of the Task and Finish Group – June.
- Identification of the five Lead Authorities – June.
- Development of a common Implementation Plan format – July.
- Support Lead Authorities in their role – July.
- Outline business components for the infrastructure of the National Service – July.
- Regional Implementation Plans in place – August.

There are no sustainability or climate change implications as a result of this report.

Adoption services are governed by a number of detailed Statutory Regulations and it is acknowledged that changes to these Regulations will be required in due course. However, progress in implementing key aspects can be made pending the required changes. In advance of any legislative requirements that may be included in the Social Services and Well-Being (Wales) Bill, each local authority will need to make its own decision regarding the case for change.

There are no crime and disorder implications arising from this report

7. What are the main conclusions of the Equality Impact Assessment (EqIA) undertaken on the decision?

There are no equal opportunities issues arising from this report

Existing policy and procedures will need to be reviewed and revised to incorporate the impact of local, regional and national delivery of adoption services.

8. What consultations have been carried out with Scrutiny and others?

Provision of an adoption service is a Council wide responsibility. This report has been considered by the Lead Member for Social Services

9. Chief Finance Officer Statement

The national service model should be monitored to ensure that costs do not increase from the current level of net expenditure. Any additional costs arising from administering and hosting the new arrangements should be properly distributed between participating authorities.

10. What risks are there and is there anything we can do to reduce them?

Risks as relevant are managed through the management arrangements of the North Wales Adoption Service overseen by the Heads of Children's Services across Wales

11. Power to make the Decision

The Social Services and Well-being Wales Bill outlines provisions for the establishment of a National Adoption Service and for local authorities to make arrangements to establish regional adoption collaboratives

Article 6 of the Council's Constitution outlines Scrutiny's powers with respect to this matter

Background Papers

Appendix A Proposals for Achieving a National Adoption Service in Wales and Development of the Functional Model – ADSS Cymru, April 2013.

Appendix B Written Statement by the Deputy Minister – 25th April 2013.

Contact Officer
Head of Children & Family Services
Tel: 01824 706652

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Leading Social Services in Wales
Yn arwain Gwasanaethau Cymdeithasol yng Nghymru

Appendix A

PROPOSALS FOR ACHIEVING

A NATIONAL ADOPTION SERVICE IN WALES

AND

DEVELOPMENT OF THE FUNCTIONAL MODEL

ADSS Cymru Uned Fusness / Business Unit
c/o Torfaen County Borough Council
Fairfield House
Civic Centre
Pontypool NP4 6YB
Ffon / Tel: 01633 648574
Ebost / Email:adss.cymru@torfaen.gov.uk
Dyddiad / Date:15/04/13

Proposals for achieving a National Adoption Service in Wales and Development of the Functional Model

- This paper sets out ADSS Cymru's proposals for achieving, as quickly as possible, radical reforms to Adoption Services in Wales and the creation of a National Adoption Service. It is grounded in a strong and shared commitment to building only on the best of current practice and to ensuring that the changes enable us to keep the child's best interests throughout their life at the core of adoption work.
- Adoption should be seen in the broader context of planning placements and permanence for children and as part of an integrated system of services for meeting their needs and promoting their well-being. There is a clear requirement that children in care must have plans for permanence in place that consider the full range of permanence options and that are put into effect with appropriate urgency. These plans should be agreed as soon as possible after admission and reviewed regularly thereafter.
- As a leadership organisation, ADSS Cymru acknowledges that reform on the scale set out in this document is delivered most effectively if there is a strong consensus across the key stakeholders and a coherent and professional approach to managing change. With others, local government has a key role to play in helping to generate these preconditions and so the plans have been produced in collaboration with the WLGA. A clear political mandate across local government has been achieved in respect of those issues which touch most directly on its role in bringing about change.
- The proposals acknowledge the significant contribution that the Voluntary Sector plays in the delivery of Adoption Services in Wales and its unique expertise. It is only by the statutory and voluntary sectors working together inclusively and collectively, drawing on best practice, that the vision of a National Adoption Service can be realised. Key voluntary adoption organisations have been involved in

considering the plan put forward by ADSSC, in part through the national Expert Reference Group which has endorsed the proposals.

- The proposals provide an ambitious but realistic pathway for creating an effective and responsive National Adoption Service, a goal to which local government is committed. The Local Government Implementation Plan for Sustainable Social Services includes responsibility for developing the operational model. These proposals build on two previous papers submitted to the Expert Reference Group and they are underpinned by the ten principles for adoption services devised by BAAF (December 2011).
- The proposals will help to ensure:
  - A new direction for the delivery of Adoption Services that is particularly suited to the Welsh context.
  - Timely implementation of the improvements required.
  - An increase in the pace of collaboration and the capacity to build sustainable services for the future.
  - A reduction in bureaucracy and a streamlining of service delivery.
  - An improvement in service accessibility for all the key stakeholders in every aspect of Adoption Services.
  - Maintenance of the essential integrity and coherence between all the elements of Adoption Services, to prevent a mismatch between the needs of children requiring adoptive placements and the adopters being recruited.
  - Long-term and lasting improvements to address the weaknesses identified in the some elements of current service provision.
  - A central place for the significant contribution made by the Voluntary Sector as valued co-producers and delivery partners.
  - Collective opportunities for local authorities to respond effectively to rising pressures within the care system.
- Adoption Services are governed by a number of detailed Regulations. These proposals recognise that changes in Regulations may be required in due course but progress in implementing key aspects can be made, pending those changes.

Context

1. In February 2011, *Sustainable Social Services: A Framework for Action* made clear that some services could be delivered more effectively at a national level. The Deputy Minister was keen to pioneer this approach in exploring, with stakeholders, the remit and functions of a National Adoption Service.

2. The Deputy Minister is clear that the new powers being sought under the Social Services and Well-Being (Wales) Bill will allow Welsh Ministers to direct local authorities (adoption agencies) to come together to form such a service. The law is to be underpinned by a National Standardised Performance Framework that will allow the National Adoption Service management team to identify, review and highlight key performance measures - such as how swiftly local authorities place children in need of adoption and how swiftly they deal with prospective adopters. The framework will set performance thresholds and make clear the Welsh Government's minimum expectations for timeliness in the adoption system, for both the child and the prospective adopter. It will allow local authority adoption agencies and others to monitor their own performance and compare it with that of others.

3. The case for change is widely accepted: BAAF estimate that 1 in 4 children available for adoption will not be placed primarily because an adoptive parent resource is not available. There are clearly issues about variability, both in performance between different local authorities and in the experience of prospective adopters. Services are insufficiently coordinated and they have not tackled well enough issues about supply and demand, to overcome barriers to recruitment and matching.

4. In November 2012, following an in-depth inquiry into adoption in Wales, the Children and Young People Committee published recommendations

calling for radical action. It proposed a major shift in the way adoption services are organised and delivered, re-invigorating the momentum and the aims of the 2002 Adoption Act and strategies for placement choice and stability.

5. The Deputy Minister then repeated her commitment to establishing a National Adoption Service, which will have the power to deliver services across Wales. She has established her expectations about what the new system must offer:
   - eradicating 'drift' for children in care
   - eliminating waiting lists for training and assessment
   - improving the matching process
   - allaying adoption breakdown by providing comprehensive adoption support services
   - streamlining the process and ensuring better linking and understanding between social workers
   - providing the widest choice of placements through the increased use of voluntary adoption agencies; and
   - most importantly, ensuring consistent delivery across Wales.

6. The Children and Young People Committee recognised too that some services are best delivered regionally. The Deputy Minister supports this approach "as the key to change is not the location of the service, but rather the delivery of a national framework for the recruitment, training and approval of prospective adopters. The focus of the National Adoption Service will be on promoting excellence and driving continued improvements, ensuring that opportunities for collaboration are maximised whilst maintaining the necessary local links and knowledge, which are crucial aspects of adoption services."

7. Adoption Services are complex, provided to a wide range of service users from very young children who are being placed for adoption to older adults who are seeking to be re-united with their birth families

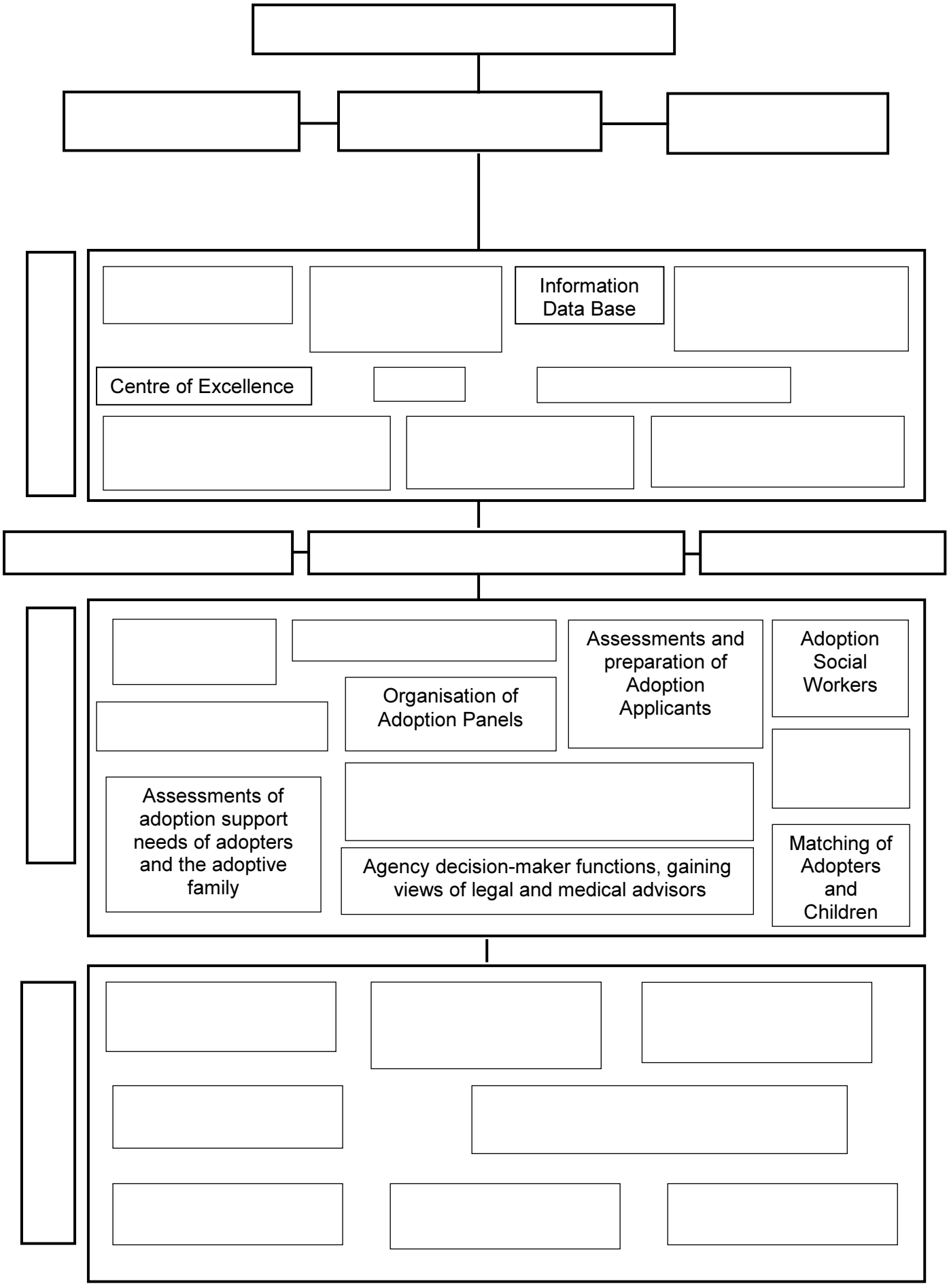
and governed by a large number of detailed Regulations. These proposals are formulated as an appropriate response to that complexity.

8. One of the crucial tasks has been to ensure that the proposals provide a means of addressing urgently the concerns outlined earlier, without sacrificing the acknowledged strengths within the existing system – what the Deputy Minister describes as "achieving change without detriment." For this reason, ADSS Cymru has worked with the WLGA to ensure that there is support for the proposals from local authorities across Wales as well as from the professional leadership organisation for social services. We believe the National Adoption Service would reap great benefits from harnessing this support for change.

9. The report of the *National Inspection of Adoption and Permanency Services delivered by Local Authorities*, undertaken by CSSIW in 2009/10 has also been re-visited. These proposals incorporate the strengths the Inspectorate identified in the provision of Adoption Services across Wales and address the areas that were identified as requiring attention.

10. A functional model for the National Adoption Service is set out in the chart overleaf. To ensure a seamless service, co-ordinated activity between the national, regional and local elements is critical. It is only in this way that children, adopters and those affected by adoption will receive the best possible service regardless of where they live in Wales.

National Adoption Service – Functional Model



A The National Adoption Service

11. Welsh Government would establish a national performance management framework. All Agencies will be required to operate within the framework set for by the National Service.

12. The National Service would undertake the following roles and functions.

i **Monitoring delivery in accordance with the national performance management framework.** The Regional Adoption Collaboratives described later would be accountable to a National Board for their performance and the National Board would have the powers to intervene if they are not delivering the service to the required standards. The Regional Adoption Collaboratives will have day-to-day line-management of the staff delivering the service at a regional level.

ii **Establishing a National Board** with the following membership:

- Representatives from Voluntary Adoption Agencies
- Adoptive Parents
- Adopted Adults/Young People
- The senior responsible officer of the lead Local Authorities for the Regional Adoption Collaboratives
- NHS representative
- Education representative
- Academic representation
- Director of Operations of the National Adoption Service (in attendance).

iii **Producing an Annual Report and action plan on the delivery of Adoption Services in Wales.** The Annual Report should be presented to the Board and to the Deputy Minister. In addition, the Director of Operations will produce bi-annual reports for the Deputy Minister.

iv **Developing and delivering a national marketing and raising awareness strategy.** This would involve developing a national brand, a set of images to be used uniformly, to ensure brand recognition across Wales. Potential adopters would get a more accessible and consistent message. It will also help dispel some of the commonly held myths about the children who are seeking adoptive parents and which adults who can adopt children. The national marketing strategy will need to pay particular attention to attracting adopters for children whose circumstances make placement more difficult to achieve.

v **Providing a single point of contact for anyone who is seeking information about adoption.** A National Adoption website and helpline will provide consistent information to children, young people and adults who may be interested in any aspect of adoption. It will also provide information on inter-country adoption. There is an increasing use of the Internet and social media sites by service users to gain information. It is essential that the National Service keeps abreast of these developments and maximises the opportunities they create.

vi **Providing a database of information** to monitor where the greatest demand for services is being received by the Regional Collaboratives. This will allow resources to be deployed to areas of greatest demand or need.

vii **Developing and maintaining a National Adoption Register.** This will enable linking and matching of children requiring adoptive placements with adopters across Wales, a service currently delivered by BAAF. It will maximise the opportunities for Welsh children being placed in Wales. A number of existing collaborative arrangements currently operate regional registers and a National Register could build on those experiences. Close links would be needed to the systems operating in

the other three Administrations in England, Northern Ireland and Scotland.

viii **Providing the Independent Review Determination Service.** This service is currently commissioned by Welsh Government and delivered by BAAF. The service is being delivered to a high standard and it would be appropriate for this service to continue to be delivered at a national level only.

ix **Co-ordination of Adoption Panels** and **Panel Members** to ensure that all the Adoption Panels are performing to the same required standards and Panels in all the Regional Collaboratives are being held frequently enough to avoid any delay for prospective adopters. It would also administer a list of suitably qualified panel members who could be called upon if any of the Regions were experiencing difficulties in ensuring quoracy on their Panels.

x **Co-ordination of Pre-approval Training Courses** to ensure they are being held at regular intervals across the Regions, to avoid any delay for prospective adopters and to ensure consistency in the course content.

xi **Co-ordination of Post Adoption Support Services** to ensure there is a robust range of adoption support services in place, particularly to support children with complex needs and their adopters

xii **Acting as a Centre of Excellence for Adoption in Wales.**
The National Service will ensure that a set of policies and good practice guidelines are developed and maintained which reflect the very best practice in the delivery of all adoption services. It will arrange specialised training for staff in the Regional Collaboratives so that they are properly equipped for their role. There should be links to academic institutions and opportunities for promoting research.

Governance Arrangements at the national level

13. The National Adoption Service will have a Director of Operations who will be accountable professionally to the National Board for Adoption Services. The Director will prepare and present bi-annual information reports to the Deputy Minister and an annual report to the National Board.

B Regional Adoption Collaboratives

14. Five regional adoption collaboratives would be created in Wales, building on existing and emerging networks. This change will:
    - Assist in implementing as soon as possible the National Adoption Service.
    - Cause least disruption for children, approved adopters and adoptive applicants.
    - Ensure the speedy and appropriate matching of children requiring adoptive placements, making best use of knowledge about these children held locally.
    - Concentrate practitioner and managerial expertise, experience and skill into the regional hubs.
    - Achieve far greater consistency in the delivery of services.
    - Embed a culture of statutory and voluntary sectors working in partnership to deliver the objectives of the National Adoption Service.
    - Achieve efficiencies in number of adoption Managers required to deliver the service, staff accommodation required and support services needed.
    - Achieve appropriate economies of scale
    - Ensure sustainable services
    - Ensure regional contribution to marketing strategies, to recruit the numbers and types of adopters required.
    - Reduce the number of Adoption Panels required.

- Allow the Director of Operations to ensure resources are deployed to areas that have a particular need at any one time.

15. The Regional Collaboratives would deliver the following functions of the National Service.

i Ensure compliance with legislation, regulations and the performance management framework set by the National Board.

ii Report on a regular basis to the Director of Operations and in turn to the National Board on performance.

iii Recruit and assess adoptive applicants and provide pre-approval training. This will include the initial counselling service to ensure a speedy, knowledgeable response to possible applicants.

iv Ensure that the children requiring adoptive placements are appropriately matched with adopters who can meet their needs for their entire childhood.

v Manage and host Adoption Panels to ensure compliance with Regulations.

vi Ensure that the statutory and voluntary sectors, working in partnership, provide the range of integrated post adoption support services as prescribed by the current Regulations and subsequently in accordance with the standards set by the National Service. These can include a number of services provided by colleagues in health, education, CAMHS, as well as letter-box contact with birth parents and relatives.

vii Deliver birth parent counselling for birth parents and relatives who have had their children removed from their care and placed for adoption. Close working relationships with Children's Social Workers and other key stakeholders are essential in the delivery of this service.

viii Undertake stepparent adoption assessments, as directed by the courts

ix Provide intermediary services for those adopted adults who are seeking to be re-united with their birth families

x Provide inter-country adoption services for those adults who are seeking to adopt a child from abroad.

xi Engage with key stakeholders- the judiciary, statutory and voluntary agencies.

xii Employ and manage staff delivering functions of the National Service at a regional level.

xiii Link to each Local Authority Children's Services Department within the region to assist with the training and support of social work staff and to ensure a seamless service for children, adopters and prospective adopters.

16. It is planned that the five Regional collaboratives will be:
    - North Wales - Wrexham, Flintshire, Gwynedd, Conwy, Denbighshire and Ynys Mon;
    - South East Wales - Blaenau Gwent, Monmouth, Torfaen, Newport and Caerphilly;
    - West & Mid Wales - Ceredigion, Carmarthenshire, Pembrokeshire and Powys;
    - Western Bay – Neath Port Talbot, Swansea, and Bridgend;
    - Mid & South Wales - Cardiff, the Vale of Glamorgan, Merthyr and Rhondda-Cynon-Taff.

17. These Regional Collaboratives are currently at different stages of development. North Wales led the way with their service becoming operational in April 2010 and the South East Wales Service followed in

April 2012. This will facilitate shared learning across Wales, to ensure speedy implementation of these plans. It is planned that all the Collaboratives will be fully operational by April 2014.

Governance arrangements at the regional level

18. Each Regional Adoption Collaborative will have the same set of responsibilities and functions and operate within a performance management framework developed at a national level. Each Collaborative will be accountable to the Director of Operations for its performance and then to the National Board. The Director of Operations, in consultation with the National Board, will have the powers to intervene if the performance of a Regional Collaborative is not meeting required standards.

19. It is likely that one local authority within each Regional Collaborative will agree to act as the lead authority for the delivery of all the regional roles and functions. The Senior Responsible Officer from the lead Authority will be a member of the National Board. This will ensure accountability of the Regional Collaboratives to the National Board.

20. Directors of Social Services will continue to exercise their statutory accountabilities through a Regional Collaborative Board and maintain the link to the executive and scrutiny functions of their own local authorities.

C The Local Authority Adoption Service

21. Each local authority will retain the following roles and responsibilities.

i Assessment and care-planning for children in need and those looked after conducting timely Looked After Children Reviews where the recommendation is for adoption to be the plan for that child.

ii Ensuring the Agency Decision Maker functions are fulfilled in compliance with Regulations.

iii Undertaking the assessment of adoption support needs of children for whom the plan is adoption.

iv Being involved in the matching and linking of children with prospective adopters.

v Providing Birth Parent counselling for parents who have had their children removed from their care and placed for adoption.

vi Making applications to the Courts for care orders where the plan is for adoption.

vii Attending Adoption Panels where a proposed match between a child and prospective adopter is being considered.

viii Ensuring that staff maintain their knowledge and understanding of best practice in adoption.

Next Steps:

22. A task and finish group will be established with representatives from Welsh Government, ADSS Cymru, CSSIW, BAAF, VAA and each of the Regional Collaboratives. The purpose will be to produce a robust change programme for implementing the functional model as set out in this paper.

23. Programme management capacity would need to be available on a temporary basis to drive through these changes in a timely fashion. It might be possible to consider allocating responsibility for any posts to ADSS Cymru and/or one of the social services regional improvement collaboratives. A time-framed project plan would be produced for the task and finish group. The creation of the National Service will require fundamental change at many different levels. Robust financial analysis

and planning will be required to cost the delivery of a National Adoption Service. New IT systems will be required and there are significant Human Resource implications.

24. It is anticipated that this initiative will be taken forward using the wider leadership framework established for the ten-year strategy set out in *Sustainable Social Services for Wales: A Framework for Action*. The National Social Services Partnership Forum, Strategic Leadership Group and the Local Government Implementation Board will exercise oversight of the change programme. The Boards of Directors for the Regional Social Services Improvement Collaboratives will have a key role in steering through these changes to the required timescales at the regional and local level.

25. It is recognised that each of the agreed Regional Collaboratives are at different stages. Each Region will be required to develop its own detailed project plan, using a common format and approach. The project plans for each Region will need to reflect the performance management framework agreed by the National Service Board. It is planned that all five Regional Adoption Collaboratives will be established by April 2014.

26. ADSS Cymru awaits Welsh Government direction on the development of the National Service as outlined in these plans. We very much welcome the opportunity to work with the Welsh Government and colleagues in the Voluntary Sector to ensure we deliver a sustainable National Adoption Service of which Wales can be proud.

PE/170413

Llywodraeth Cymru
Welsh Government

Appendix B

WRITTEN STATEMENT
BY
THE WELSH GOVERNMENT

TITLE	The Establishment of a National Adoption Service – 'case for change'
DATE	25 April 2013
BY	Gwenda Thomas AM, Deputy Minister for Children and Social Services

You will recall that in February 2011, *Sustainable Social Services: A Framework for Action* was published, this document provided the platform that identified the need for a major shift in adoption services and my vision of a national adoption service. Evidence had been collated from various sources, and although able to demonstrate excellence within some areas, there remained a great disparity in service delivery across Wales which reaffirmed the need for radical reform.

The proposal of a national adoption service was one of the key strands identified within the consultation on the principles of the Social Services and Well-being (Wales) Bill, which ran between March and June 2012; officials visited the established adoption services and consortiums throughout Wales and explored the key issues, challenges, best practises and lessons learned of working within a collaborative. The information gleaned from these visits consolidated the need for an Expert Advisory Group on Adoption to be established.

The Group brought together key stakeholders from within the adoption system in Wales and provided a community of understanding and common purpose to oversee coordinate and deliver improvement of services and outcomes for children and young people in Wales for whom adoption is in their best interest. Delivering on these improvements included the introduction of a national adoption service and consideration of a national service model proposed by ADSS and WLGA. The remit identified was simple, I wanted to see greater collaboration and partnership working, a model which operated under a two tier system, dispelled duplication and delay, addressed current concerns and provided the mechanism for driving performance improvements across Wales ensuring a service that encouraged and welcomed a broad range of adopters to meet the diverse needs of our looked after children.

In conjunction with the task of reform undertaken by the Expert Advisory Group the Children and Young People Committee also identified a need to review the delivery of adoption services in Wales and calls for evidence from the Committee were made in December 2011. After an in-depth scrutiny of the evidence presented both verbally and written the Committee presented its report in November 2012 which compounded our earlier findings and remit of a national service. I was encouraged and heartened that we had the same shared values and aspirations on such an important agenda.

I am pleased to inform Members that good progress has been made; discussions have concluded in the group and a consensus has been reached. I have now received a functional model for a national adoption service proposed by the Association of Directors of Social Services in conjunction with the Welsh Local Government Association, and endorsed by the Expert Advisory Group - it is a model that I believe will achieve the step-change and radical reform we have all sought.

The proposal acknowledges the significant contribution and the unique expertise the Voluntary Sector plays in the delivery of adoption services in Wales. Embedded in the proposal is the message that 'only by statutory and voluntary sectors working together inclusively and collectively, drawing on best practice, the vision of a National Adoption Service can be realised'. It embraces a tiered model, the different elements making up an effective and efficient service which is appropriately aligned at a local, regional and national level, the functions of each determined where they best fit in the restructured service model.

It foresees the National Adoption Service having a Director of Operations who will be accountable professionally to the National Board for Adoption Services. He /she will prepare and present bi-annual information reports to me and an annual report to the National Board.

It proposes that five regional adoption collaboratives are created, configuration building on existing and emerging networks, it is planned that these will be:

- North Wales - Wrexham, Flintshire, Gwynedd, Conwy, Denbighshire and Ynys Mon;
- South East Wales - Blaenau Gwent, Monmouth, Torfaen, Newport and Caerphilly;
- West & Mid Wales - Ceredigion, Carmarthenshire, Pembrokeshire and Powys;
- Western Bay – Neath Port Talbot, Swansea, and Bridgend;
- Mid & South Wales - Cardiff, the Vale of Glamorgan, Merthyr and Rhondda-Cynon-Taff.

Each collaborative will have the same set of responsibilities and functions and operate within a performance management framework developed at a national level. Each collaborative will be accountable to the Director of Operations for its performance and then to the National Board. The Director of Operations, in consultation with the National Board, will have the powers to intervene if the performance of a Regional Collaborative is not meeting required standards. One local authority within each collaborative will act as the lead authority for the delivery of all the regional roles and functions. The Senior Responsible Officer from the lead authority will be a member of the National Board. This will ensure accountability of the regional collaboratives to the National Board.

Directors of Social Services will continue to exercise their statutory accountabilities through a Regional Collaborative Board and maintain the link to the executive and scrutiny functions of their own local authorities.

Each local authority will retain the role and responsibilities pertinent to the child and aligned to the wider social care legislation.

Next Steps

A task and finish group will be established, and a time-framed project plan will be produced. Representatives on the group will be from Welsh Government, ADSS Cymru, CSSIW, BAAF, VAA and each of the Regional Collaboratives. The purpose of this group will be to produce a robust change programme for implementing the functional model. To facilitate this change programme I am pleased to confirm that I have secured £50K which will assist ADSSC in the commissioning of resource to undertake a number of key tasks looking at both the business model and the processes and procedures for the proposed National Adoption Service. The key milestones undertaken by Autumn this year will be:

- Membership and brief for the Task & Finish Group for the National Service to be established;
- Identification of the five Lead Authorities;
- Development of the common format for the Implementation Plans to be agreed by each Region;
- Begin work on supporting the Lead Authorities in their role;
- Outline business components required for the infrastructure of the National Service; and
- Each Region to have in place an implementation plan.

It is acknowledged that creation of the National Service will require fundamental change at many different levels. It is anticipated that this initiative will be taken forward using the wider leadership framework established for the ten-year strategy set out in *Sustainable Social Services for Wales: A Framework for Action*. The National Social Services Partnership Forum, Strategic Leadership Group and the Local Government Implementation Board will exercise oversight of the change programme. The Boards of Directors for the Regional Social Services Improvement Collaboratives will have a key role in steering through these changes to the required timescales at the regional and local level.

It is recognised that each of the agreed regional collaboratives are at different stages. Each region will be required to develop its own detailed project plan, using a common format and approach. The project plans for each region will need to reflect the performance management framework agreed by the National Service Board. It is planned that all five regional adoption collaboratives will be established by April 2014.

We must remember that adoption must be seen in the broader context of planning for permanence and as part of an integrated system of services for children in care. Children in care need permanence plans that consider the full range of permanence options and it is imperative that these plans are implemented with appropriate urgency, that is why I am carefully considering the potential of introducing further provision within the Social Services and Well- being (Wales) Bill, the purpose of which would be to place a child with their prospective adopter at the earliest possible juncture ,,once a decision has been made that adoption is in the child's best interest and that every effort has been made to rehabilitate the child with birth parents or family and friends. . Hopefully this would negate

disruption to the child and provide earlier permanence for them. The detail of such a provision is currently being explored.

We are about to embark on yet another unique way of working in Wales, championing transformational change in service delivery and I am proud to be apart of that and to witness all sectors working together. We are pressing ahead with this agenda so the Welsh Government can consider any necessary changes required in legislation to accommodate this pioneering way forward.

I would like to conclude by thanking all those involved in embracing partnership and delivering a model which provides us with the first major stepping stone towards a flagship adoption service for Wales.

Report to:	**Partnerships Scrutiny Committee**
Date of Meeting:	**19 December 2013**
Report Author:	**Scrutiny Coordinator**
Title:	**Scrutiny Work Programme**

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1. What is the report about?

The report presents Partnerships Scrutiny Committee with its draft forward work programme for members' consideration.

2. What is the reason for making this report?

To seek the Committee to review and agree on its programme of future work, and to update members on relevant issues.

3. What are the recommendations?

That the Committee:

3.1 considers the information provided and approves, revises or amends its forward work programme as it deems appropriate;

3.2 nominates representatives to serve on the Business Planning & Performance and the Highways & Environmental Services Service Challenge Groups; and

3.3 nominates a representative to serve on the Economic and Community Ambition Programme Board.

4. Report details.

4.1 Article 6 of the Council's Constitution sets out each Scrutiny Committee's terms of reference, functions and membership, whilst the rules of procedure for scrutiny committees are laid out in Part 4 of the Constitution.

4.2 The Constitution of Denbighshire County Council requires scrutiny committees to prepare and keep under review a programme for their future work. By reviewing and prioritising issues, members are able to ensure that the work programme delivers a member-led agenda.

4.3 For a number of years it has been an adopted practice in Denbighshire for scrutiny committees to limit the number of reports considered at any one meeting to a maximum of four plus the Committee's own work programme report. The objective of this approach is to facilitate detailed and effective debate on each topic.

4.4 The Committee is requested to consider its draft work programme for future meetings as detailed in appendix 1 and approve, revise or amend it as it deems appropriate. When deciding on the work programme members are asked to take into consideration:

- issues raised by members of the Committee
- matters referred to it by the Scrutiny Chairs and Vice-Chairs Group
- relevance to the Committee's/Council's/community priorities
- the Council's Corporate Plan and the Director of Social Services' Annual Report
- meeting workload
- timeliness
- outcomes
- key issues and information to be included in reports
- whether the relevant lead Cabinet member will be invited to attend (having regard to whether their attendance is necessary or would add value). (In all instances this decision will be communicated to the lead member concerned)
- questions to be put to officers/lead Cabinet members

4.5 When considering future items for inclusion on the forward work programme members may also find it helpful to have regard to the following questions when determining a subject's suitability for inclusion on the work programme:

- what is the issue?
- who are the stakeholders?
- what is being looked at elsewhere
- what does scrutiny need to know? and
- who may be able to assist?

4.6 As mentioned in paragraph 4.2 the Constitution of Denbighshire County Council requires scrutiny committees to prepare and keep under review a programme for their future work. To assist the process of prioritising reports, if officers are of the view that a subject merits time for discussion on the Committee's business agenda they have to formally request the Committee to consider receiving a report on that topic. This is done via the submission of a 'proposal form' which clarifies the purpose, importance and potential outcomes of suggested topics. One request, seeking the Committee to consider matters relating to the North Wales Residual Waste Treatment Project, has been received (see Appendix 2 attached). Members are asked to consider this request.

4.7 <u>Regional Commissioning Hub</u>
As a consequence of an unforeseen delay with the presentation of the above report to the Social and Health Programme Board the report's presentation to this Committee has also been delayed until February 2014. Consequently as a result of this rescheduling, and if members agree to accept the North Wales Residual Waste Treatment Project on

to its work programme, the Committee will have too many items to examine at its February meeting. Members are therefore asked to consider whether they wish to proceed with the five items listed or whether any of the items should be rescheduled or received as information or consultation reports outside of the formal meeting.

4.8 Cabinet Forward Work Programme
When deciding on their programme of future work it is useful for scrutiny committees to have regard to Cabinet's scheduled programme of future work. For this purpose a copy of the Cabinet's forward work programme is attached at Appendix 3.

4.9 Progress on Committee Resolutions
A table summarising recent Committee resolutions and advising members on progress with their implementation is attached at Appendix 4 to this report.

5. Service Challenge Groups

As a result of Councillor Huw O Williams' resignation from the Committee vacancies for committee representatives have arisen on the service challenge groups for Business Planning & Performance and Highways & Environmental Services. The Committee is asked to appoint a representative to serve on these Service Challenge Groups. For reference purposes a copy of the Scrutiny Service Challenge representatives is attached at Appendix 5.

6. Economic and Community Ambition Programme Board

The Council's scrutiny committees have each been asked to appoint a representative to serve on the above Board. A copy of the Board's terms of reference including members' roles and responsibilities is attached at Appendix 6. Training and support will be provided to the appointed member by the Corporate Programme Office. It is expected that the person appointed will act as the Committee's lead for Economic Development. The Board's next meeting is scheduled for 11 February 2014.

7. Scrutiny Chairs and Vice-Chairs Group

7.1 Under the Council's scrutiny arrangements the Scrutiny Chairs and Vice-Chairs Group (SCVCG) performs the role of a coordinating committee. The Group met on 5 December 2013, no items were referred to this Committee for consideration.

8. How does the decision contribute to the Corporate Priorities?

Effective scrutiny will assist the Council to deliver its corporate priorities in line with community needs and residents' wishes. Continual

development and review of a coordinated work programme will assist the Council in monitoring and reviewing policy issues.

9. What are the main conclusions of the Equality Impact Assessment (EqIA) undertaken on the decision?

No Equality Impact Assessment has been undertaken for the purpose of this report as consideration of the Committee's forward work programme is not deemed to have an adverse or unfair impact on people who share protected characteristics.

10. What will it cost and how will it affect other services?

Services may need to allocate officer time to assist the Committee with the activities identified in the forward work programme, and with any actions that may result following consideration of those items.

11. What consultations have been carried out?

None required for this report. However, the report itself and the consideration of the forward work programme represent a consultation process with the Committee with respect to its programme of future work.

12. What risks are there and is there anything we can do to reduce them?

No risks have been identified with respect to the consideration of the Committee's forward work programme. However, by regularly reviewing its forward work programme the Committee can ensure that areas of risk are considered and examined as and when they are identified, and recommendations are made with a view to addressing those risks.

13. Power to make the decision

Article 6.3.7 of the Council's Constitution stipulates that the Council's scrutiny committees must prepare and keep under review a programme for their future work.

Contact Officer: Scrutiny Coordinator
Tel No: (01824) 712554
Email: dcc_admin@denbighshire.gov.uk

Note: Items entered in italics have <u>not</u> been approved for submission by the Committee. Such reports are listed here for information, pending formal approval.

Meeting	Lead Member(s)	Item (description / title)		Purpose of report	Expected Outcomes	Author	Date Entered
6 February 2014	**Cllr. Eryl Williams** *(required)*	1.	Regional School Effectiveness and Improvement Service [**Education]**	To detail the progress achieved following the establishment of the RSEIS, the benefits realised to date from its establishment, any problems or issues encountered since its establishment which are yet to be resolved and any proposals to expand the Service's remit	Evaluation of the effectiveness of the RSEIS to date in delivering economies of scale and specialist support to complement the County's education service. Identification of slippages, risks, service gaps or future pressures with a view to recommending mitigating action	RSEIS Chief Executive/Karen Evans	January 2013
	Cllr. Hugh H Evans *(required)*	2.	BIG Plan: Performance Update	To consider the Joint Local Service Board's (LSB) performance in delivering its integrated strategic plan	(i) an evaluation of the effectiveness of the Joint LSB's performance in delivering its plan; (ii) identification of areas of weakness/slippages and measures to address them to improve outcomes for local residents	Emma Horan	December 2012
	Cllr. Eryl Williams/Cllr. Huw Ll	3.	Rural Development Plan Partnership	To scrutinise the relationship between the Partnership and Denbighshire County Council	Identification of good practice and obstacles	Joanna Douglass	By SCVCG

Meeting	Lead Member(s)	Item (description / title)		Purpose of report	Expected Outcomes	Author	Date Entered
	Jones *(required)*			and its achievements in delivering the Rural Development Plan 2007-13	encountered in delivering the current RDP to enable the development of effective mechanisms to deliver any future European/WG funded partnership projects		
	Cllr. Bobby Feeley *(required)*	4	Regional Commissioning Hub for high cost low volume placements	(i) Detail the progress to date with the establishment and running of the hub and the benefits realised to date from its establishment; and (ii) details of the scoping exercise on high cost dementia placements	Evaluation of the Hub's effectiveness in delivering efficiency savings with respect to the procurement of good value high cost placements and identification of any slippages, risks or future measures that may need to be taken	Vicky Poole	December 2012 (rescheduled March 2013 & October 2013)
	Cllrs. David Smith & Eryl Williams	*5*	*North Wales Residual Waste Treatment Project*	*To scrutinise the process involved in awarding 'preferred Bidder' status and issues surrounding approving Inter Authority Agreement 2.*	*Strong and effective project governance arrangements and value for money contract for Denbighshire*	*Jim Espley and Project Officers*	*December 2013*
13 March	**Cllr. Huw Ll Jones**	1	AONB Joint Committee	To scrutinise the effectiveness of the Partnership	Observations on the governance, particularly on the scrutiny arrangements for the new AONB Joint Committee with	Lisa Jones/Huw Rees/Howard Sutcliffe	By SCVCG October 2013

Meeting	Lead Member(s)	Item (description / title)		Purpose of report	Expected Outcomes	Author	Date Entered
					Flintshire County Council and Wrexham county Borough Council		
10 April							
May/June	**Cllr. David Smith**	1	Community Safety Partnership **[Crime and Disorder Scrutiny]** (* particular reference to be included in the report to domestic violence matters and the work undertaken with and to complement the work of the LSCB – see item below)	To detail the Partnership's achievement in delivering its 2013/14 action plan and its progress to date in delivering its action plan for 2014/15	Effective monitoring of the CSP's delivery of its action plan for 2013/14 and its progress to date in delivering its plan for 2014/15 will ensure that the CSP delivers the services which the Council and local residents require	Graham Boase/Siân Taylor	May 2013
	Cllr. Bobby Feeley	2	Conwy & Denbighshire Local Children's Safeguarding Board (* particular reference to be included in the report to domestic violence matters and the work undertaken with and to complement the work of the CSP – see above item)	(i) To monitor the LSCB's achievement and performance in delivering its key priorities for 2013/14 and information on its key priorities for 2014/15 (ii) Analyse data and trends identified in 2013/14 to identify which approaches worked well and which were not as successful; and (iii) To update the Committee	Identification of measures which will ensure that the Authority discharges its functions with respect to child protection	Sue Trehearn/Leighton Rees	November 2013

Meeting	Lead Member(s)	Item (description / title)		Purpose of report	Expected Outcomes	Author	Date Entered
				on the latest national and regional developments with respect to LSCBs			
	Cllrs. Huw Ll Jones	3	Heritage and Arts Service	To give an update on the outcomes of the review and the proposals to be implemented to enhance the effectiveness of the service	Evidence based recommendations with a view to further improving the offer to the public with limited resources	Steve Parker/Samantha Williams	Dec 2012 (transferred from Communities Scrutiny Committee March 2013 and rescheduled by SCVCG April 2013; deferred October 2013)
June/July	**Cllr. Hugh H Evans**	1	BIG Plan: Performance Update	To consider the Joint Local Service Board's (LSB) performance in delivering its integrated strategic plan	(i) an evaluation of the effectiveness of the Joint LSB's performance in delivering its plan; (ii) identification of areas of weakness/slippages and measures to address them to improve outcomes for local residents	Emma Horan	**Cllr. Hugh H Evans**
	Cllr. Eryl Williams	2	Families First (*unless funding	To evaluate and monitor the providers' progress to date in	A thorough analysis of the projects'	Alan Smith/Liz Grieve/Jan	November 2013

Meeting	Lead Member(s)	Item (description / title)	Purpose of report	Expected Outcomes	Author	Date Entered
		changes necessitate an earlier report)	delivering their services, the Families First Action Plan and outcome 4 of the BIG Plan	delivery to date will ensure all commissioned projects are on target to deliver the expected outcomes in line with their tender objectives and ensure better outcomes for service users and effective and efficient use of the financial resources provided	Juckes-Hughes	

Future Issues

Item (description / title)	Purpose of report	Expected Outcomes	Author	Date Entered
Next meeting with BCUHB: (late 2013/early 2014) Localities	To report on the progress with the development and roll-out of the localities service. The report to include the progress achieved with respect to co-location arrangements, the outcomes/impact framework, appointment of GPs locality leaders and buy-in by GPs to the HECS service and the work undertaken to support carers	Improved life experiences for service users and seamless working between Health and Social Care	BCUHB/DCC	June 2013
Hygiene and Infection Control	To receive facts and statistics with respect to the extent of hospital acquired infections within the Health Service in North Wales	Assurances that all possible steps are being taken to minimise the risk to patients of acquiring infections whilst in hospital	BCUHB	June 2013

Update following conclusion of inquiry undertaken by the National Crime Agency in to historic abuse in North Wales Children's' Care Homes	To update the Committee of the outcome of the National Crime Agency (NCA) investigation in to the abuse of children in the care of the former Clwyd County Council, and to determine whether any procedures require revision.	Determination of whether any of the Council's safeguarding policies and procedures need to be revised in light of the NCA's findings	Sally Ellis	November 2012

For future years

Information/Consultation Reports

Information / Consultation	Item (description / title)	Purpose of report	Author	Date Entered
Information Report	Glyndŵr University	To consider current and future developments for the college locally and the educational services delivered for Denbighshire students (including data on student enrolment/qualifications; progression e.g. apprenticeships, employment or FE; how the College works with Denbighshire schools and further education establishments which educate Denbighshire residents; financial information i.e. funding and spending; other partnership arrangements). The report also to include details of the College's vision and ambitions for the future. Consideration of the requested information will assist members to determine whether the College is delivering a high quality of education which meets the needs of Denbighshire students and contributes to the County's economic development ambition.	Professor Michael Scott	September 2013
Information (January/February 2014 – follow-up to the information report produced in September 2013)	Regional Emergency Planning Service	To report the progress to date with the establishment of a regional service and the transitional arrangements from the present service to the new regional service, the development of a partnership Service Level Agreement (SLA), along with details of the appointment of a Manager and Deputy Manager. Consideration of this information will ensure the provision of a resilient and robust Emergency Planning	Rebecca Maxwell/Mike Hitchings	September 2013

		Service that will meet the needs of local residents when emergency situations occur		

06/12/13 - RhE

Note for officers – Committee Report Deadlines

Meeting	**Deadline**	Meeting	**Deadline**	Meeting	**Deadline**
6 February 2014	**23 January 2014**	13 March	**27 February**	10 April	**27 March**

Partnerships Scrutiny Work Programme.doc

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Appendix 2

PROPOSAL FORM FOR AGENDA ITEMS FOR SCRUTINY COMMITTEES			
NAME OF SCRUTINY COMMITTEE		**Partnerships Scrutiny Committee**	
DATE OF MEETING / TIMESCALE FOR CONSIDERATION		**6th February 2014**	
TITLE OF REPORT		**North Wales Residual Waste Treatment Project – Approval of Preferred Bidder & Inter Authority Agreement 2**	
PURPOSE	**1. Why is the report being proposed? (see also the checklist overleaf)**	**Necessary governance check in moving towards contract award (same scrutiny process being undertaken by the other 4 North Walian Councils involved in the project). Cost to DCC will be £1.7m / year (25 year contract)**	
	2. What issues are to be scrutinised?	**Process involved in awarding 'preferred Bidder' status. Issues surrounding approving Inter Authority Agreement 2.**	
	3. Is it necessary/desirable for witnesses to attend e.g. lead members, officers/external experts?	**Yes – Lead member / Project Team**	
	4. What will the committee achieve by considering the report?	**Will test project governance arrangements / contract value for money**	
	5. Score the topic from 0 – 4 on aims & priorities and impact (see overleaf)*	**Aims & Priorities**	**Impact**
		3	**4**
ADDITIONAL COMMENTS			
REPORTING PATH – what is the next step? Are Scrutiny's recommendations to be reported elsewhere?		**Following scrutiny, recommendation to proceed to 'Preferred Bidder' will be taken to Cabinet and also Full Council.**	
AUTHOR		**Jim Espley (Report will be presented by NWRWTP Project Team).**	

Please complete the following checklist:

	Yes	No
Is the topic already being addressed satisfactorily?	x	
Is Scrutiny likely to result in service improvements or other measurable benefits?		x
Does the topic concern a poor performing service or a high budgetary commitment?	x	
Are there adequate resources / realistic possibility of adequate resources to achieve the objective(s)?	x	
Is the Scrutiny activity timely, i.e. will scrutiny be able to recommend changes to the service delivery, policy, strategy, etc?	x	
Is the topic linked to corporate or scrutiny aims and priorities?	x	
Has the topic been identified as a risk in the Corporate Risk Register or is it the subject of an adverse internal audit or external regulator report?	x	

*The following table is to be used to guide the scores given:

Score	Aims & Priorities	Impact
0	No links to corporate/scrutiny aims and priorities	No potential benefits
1	No links to corporate/scrutiny aims and priorities but a subject of high public concern	Minor potential benefits affecting only one ward/customer/client group
2	Some evidence of links, but indirect	Minor benefits to two groups/moderate benefits to one
3	Good evidence linking the topic to both aims and priorities	Moderate benefits to more than one group/substantial benefits to one
4	Strong evidence linking both aims and priorities, and has a high level of public concern	Substantial community-wide benefits

SCORING

Aims & Priorities

4	Possible topic for Scrutiny – to be timetabled appropriately	Priority topic for Scrutiny – for urgent consideration
3		
2	Reject topic for Scrutiny – topic to be circulated to members for information purposes	Possible topic for Scrutiny – to be timetabled appropriately
1		

0 1 2 3 4

Impact

Cabinet Forward Work Plan

Appendix 3

Meeting	Item (description / title)		Purpose of report	Cabinet Decision required (yes/no)	Author – Lead member and contact officer
14 January 2014	1	Finance Report Update	To update Cabinet on the current financial position of the Council	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	2	West Rhyl Housing Improvement Project	Concept design of open green space to be considered	Tbc	Cllr Hugh Evans / Carol L Evans
	3	North Wales Schools and Public Buildings Contractor Framework (NWSPBC Framework) - Contractors Appointment	A decision is required to award the places to become part of the NWSPBC Framework following the tender process.	Yes	Cllr Julian Thompson-Hill / Tania Silva / Sion Evans / Stuart Andrews
	4	Procurement Business Case for Three Counties	To consider the Business Case	Yes	Cllr Julian Thompson Hill / Paul McGrady
	5	Framework for Integrated Health and Social Care	To consider the local response to the Welsh Government's guidance document "A Framework for Delivering Integrated Health and Social Services for Older People"	Yes	Cllr Bobby Feeley / Phil Gilroy
	6	Single Access Route to Housing	To approve a Common	Yes	Cllr Hugh Irving/Peter

Meeting	Item (description / title)		Purpose of report	Cabinet Decision required (yes/no)	Author – Lead member and contact officer
		– Common Allocations Policy	Allocations Policy (CAP) for social housing across North Wales (local authority and registered social landlords)		McHugh/ Sue Lewis
	7	Budget Setting	To consider budget setting proposals.	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	8	Ysgol Llanbedr Review	To review proposals for the closure of Ysgol Llanbedr.	Tbc	Cllr Eryl Williams / Jackie Walley
	9	Clwyd Leisure	To consider the future delivery options for the facilities currently operated by Clwyd Leisure Limited	Tbc	Cllr Huw Jones / Hywyn Williams
	10	Items from Scrutiny Committees	To consider any issues raised by Scrutiny for Cabinet's attention.	Tbc	Scrutiny Coordinator
18 February	1	Finance Report Update	To update Cabinet on the current financial position of the Council	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	2	Advocacy Provision for Children and young people in North Wales	To commission a regional N. Wales advocacy service for vulnerable children and young people	Tbc	Cllr Bobby Feeley / Michelle Hughes
	3	North Wales Residual Waste Project	To agree contractual arrangements for the	Tbc	Cllr David Smith / Steve Parker / Jim

Meeting	Item (description / title)		Purpose of report	Cabinet Decision required (yes/no)	Author – Lead member and contact officer
			disposal of the council's residual waste.		Espley
	4	Items from Scrutiny Committees	To consider any issues raised by Scrutiny for Cabinet's attention.	Tbc	Scrutiny Coordinator
25 March	1	Finance Report Update	To update Cabinet on the current financial position of the Council	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	2	Corporate Plan QPR: Quarter 3 2013/14	To monitor the Council's progress in delivering the Corporate Plan 2012 -17	Tbc	Cllr Barbara Smith / Tony Ward
	3	Response to consultation on Town and Areas Plans – Rhyl, Denbigh & Rhuddlan areas	To approve the Town and Area Plans for Rhyl, Denbigh & Rhuddlan areas	Tbc	Cllr Hugh Evans / Rebecca Maxwell / Peter McHugh / Tom Booty
	4	Items from Scrutiny Committees	To consider any issues raised by Scrutiny for Cabinet's attention	Tbc	Scrutiny Coordinator
29 April	1	Finance Report Update	To update Cabinet on the current financial position of the Council	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	2	Items from Scrutiny Committees	To consider any issues raised by Scrutiny for	Tbc	Scrutiny Coordinator

Cabinet Forward Work Plan

Meeting	Item (description / title)		Purpose of report	Cabinet Decision required (yes/no)	Author – Lead member and contact officer
			Cabinet's attention.		
27 May	1	Finance Report Update	To update Cabinet on the current financial position of the Council	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	2	Items from Scrutiny Committees	To consider any issues raised by Scrutiny for Cabinet's attention.	Tbc	Scrutiny Coordinator
June	1	Finance Report Update	To update Cabinet on the current financial position of the Council	Tbc	Cllr Julian Thompson-Hill / Paul McGrady
	2	Corporate Plan QPR: Quarter 3 2013/14	To monitor the Council's progress in delivering the Corporate Plan 2012 -17	Tbc	Cllr Barbara Smith / Tony Ward
	3	Items from Scrutiny Committees	To consider any issues raised by Scrutiny for Cabinet's attention	Tbc	Scrutiny Coordinator

Note for officers – Cabinet Report Deadlines

Meeting	***Deadline***	*Meeting*	***Deadline***	*Meeting*	***Deadline***

Cabinet Forward Work Plan

December	***3 December***	*January*	***30 December***	*February*	***4 February***

Updated 02/12/13 - KEJ

Cabinet Forward Work Programme.doc

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Appendix 4

Progress with Committee Resolutions

Date of Meeting	Item number and title	Resolution	Progress
7 November 2013	**6. Families First**	***RESOLVED*** *that –* *(a) subject to members' comments above, the providers' progress in delivering services and the latest information regarding programme activities in relation to the Families First Programme in Denbighshire be noted, and* *(b) a further progress report be submitted to the committee in approximately eight months' time or such earlier time if the funding allocation expected for 2014/15 did not materialise.*	Report scheduled into the Committee's forward work programme for June/July 2014
	8. Conwy and Denbighshire Local Safeguarding Children's Board Annual Report and Update on the Integration of the North Wales Local Safeguarding Children's Boards	***RECOMMENDED:*** *that –* *(a) subject to members' comments above the Conwy and Denbighshire Local Safeguarding Children Board's Annual report be received and progress made towards the collaboration of the North Wales Local Safeguarding Children Boards be noted;* *(b) a further report be submitted to the committee in approximately six months' time containing the*	Report scheduled into the

		following – - *progress in delivering the key priorities for 2013/14 and information on key priorities for 2014/15* - *an analysis of data and trends identified in 2013/14 to determine which approaches worked well and which were not as successful, and* - *an update on the latest national and regional developments with respect to Local Safeguarding Children Boards.*	Committee's work programme for May/June 2014

Scrutiny Representatives on Service Challenge Groups 2013/14 **Appendix 5**

Service:	Communities	Partnerships	Performance
Housing & Community Development – Peter McHugh	Cllr Bob Murray	Cllr. Bill Tasker	Cllr. Bill Cowie
Children & Family Services – Leighton Rees	Cllr Win Mullen-James	Cllr. Jeanette Chamberlain-Jones	Cllr. Arwel Roberts
Adult & Business Services – Phil Gilroy	Cllr Bob Murray	Cllr. Ann Davies	Cllr. David Simmons
Legal & Democratic Services – Gary Williams	Cllr. James Davies	Cllr. Meirick Lloyd Davies	Cllr. Dewi Owens
Business Planning & Performance – Alan Smith	Cllr. Cheryl Williams		Cllr. Dewi Owens
Education– Karen Evans	Cllr Huw Hilditch-Roberts	Cllr. Margaret McCarroll	Cllr Arwel Roberts
Customers and Education Support – Jackie Walley	Cllr. Carys Guy-Davies	Cllr. Pat Jones	Cllr. Richard Davies
Communication, Marketing & Leisure – Jamie Groves	Cllr Joseph Welch	Cllr. Dewi Owens	Cllr. Geraint Lloyd Williams
Finance & Assets – Paul McGrady	Cllr Rhys Hughes	Cllr. Dewi Owens	Cllr. Colin Hughes
Highways & Infrastructure – Steve Parker	Cllr Huw O Williams		Cllr. Bill Cowie (sub: Cllr. Meirick Lloyd Davies)
Planning & Public Protection – Graham Boase	Cllr. Huw O Williams	Cllr. Meirick Lloyd Davies	Cllr. Meirick Ll Davies
Strategic Human Resources – Linda Atkin	Cllr. Huw Hilditch-Roberts	Cllr. Dewi Owens	Cllr. Richard Davies

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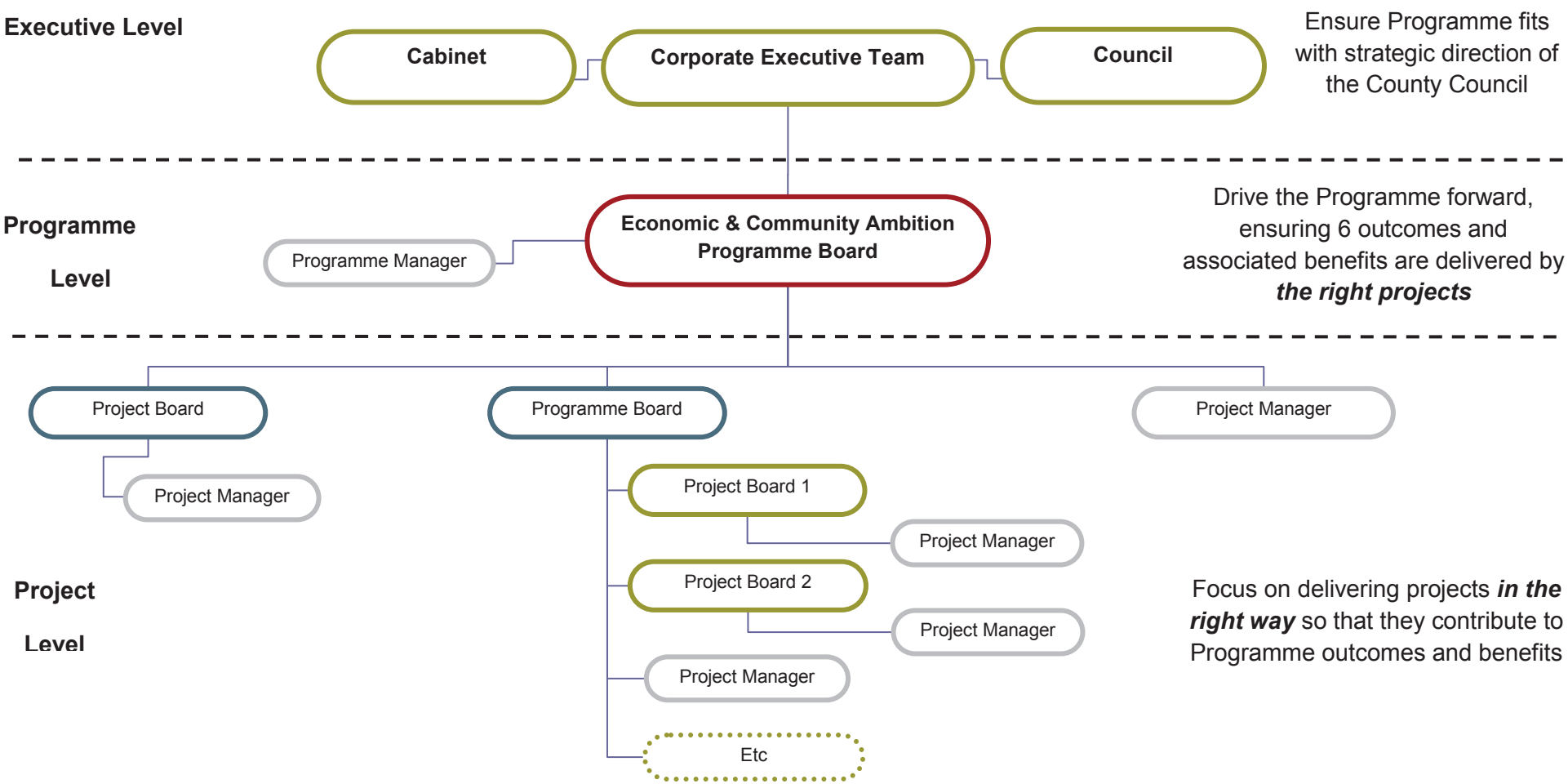
GOVERNANCE PRINCIPLES AND MANAGEMENT

Roles and Responsibilities



Purpose of the Programme Board

The Economic and Community Ambition Programme Board is tasked with driving this programme forward, delivering the outcomes and benefits we expect to achieve for businesses and residents in Denbighshire. At the highest level the programme board is responsible for:

- Clearly and consistently communicating the programme vision, particularly the desired outcomes
- A focus on managing the benefits and the internal and external threats to their achievement
- Co-ordination of a number of projects and their interdependencies in pursuit of the vision
- Leadership, influence, management and directing the transition from 'old' to 'new', including handling cultural change required within the council

Role of the Programme Board

The board must concentrate on effectively delivering strategic change. It must achieve this through:

- Ensuring money is not wasted on projects that do not deliver benefits
- Ensuring that scarce resources are prioritised to deliver maximum benefit
- Continuously improving communication with stakeholders
- Commitment to securing adequate resources to deliver the programme
- Providing better focus on the real drivers of change
- Delivering tangible results
- Involving service users and providers early on and throughout the programme

In undertaking this role the Programme Board will need to:

  - Discuss the strengths, weaknesses and challenges facing Denbighshire and identify and share best practice
  - Discuss the application of alternative ways of providing services
  - Identify, scope and justify candidate projects
  - Analyse the quick wins, longer term wins and decide which projects to approve
  - Select those projects and programmes which will generate significant benefits for businesses and residents
  - Justify, plan, commence and implement projects to an agreed set of targeted outcomes and benefits
  - Co-ordinate the delivery of the agreed set of projects
  - Involve stakeholders and ensure that projects respond to emergent evidence and other changes in the political and operational context
  - Review and maintain the quality and ambition of projects
  - Follow through to implement projects and realise projected benefits

What the Programme Board will not do:

- Micro manage projects
- Take a democratic approach to decision making
- Direct project managers outside of the agreed process
- Bring 'favourite' projects to the table
- Undermine decisions made at the Board

Programme Senior Responsible Owner responsibilities:

- Ensure the Programme stays focused on achieving the vision
- Ensure communication of the Programme vision and outcomes
- Ensure that the Programme remains aligned with Corporate Plan outcomes
- Ensure that the benefits envisaged by the Programme are realised (for example by ensuring that resources are contributed by service areas)
- Report progress to the Corporate Executive Team
- Provide a link with service areas to direct and manage projects, risks, issues, decisions
- Chair and provide strategic management support to the Board
- Provide day-to-day executive management of the Programme
- Provide support to the Programme Manager to manage risks and resolve issues

Programme Manager responsibilities:

- Plan the programme (including assessing and approving component project plans)
- Provide management and monitoring of overall progress
- Be responsible for organising quality assurance and overall integrity of the programme
- Manage the dependencies and interfaces between projects
- Manage the risks to the programme's successful outcomes
- Initiate extra actions where gaps in the programme are identified
- Coordinate the compilation of outcome reports and relevant papers
- Support outcome owners, middle managers and project managers where appropriate
- Establish, convene and manage meetings, events and activities associated with the programme

Staff acting in the Business Change Management role will be responsible for:

- Identifying projects that contribute to achieving programme outcomes and benefits
- Working with the programme manager to ensure that the scope of each project covers the necessary aspects required to deliver the products or services that will lead to benefits
- Assisting the programme manager in identifying, defining and tracking progress towards programme outcomes and benefits
- Ensuring that programme outcomes and benefits are met by exploiting the capability brought about by projects within the programme
- Leading activities associated with benefits realisation and ensuring continued accrual of benefits can be achieved and measured after the programme has been completed
- Ensuring that business as usual is maintained during the transition and that changes are effectively integrated into the business
- Preparing the affected business areas for the transition to new ways of working
- Optimising the timing of the release of project deliverables into the business operations
- Attending Programme / Project Board meetings where required

Project Manager responsibilities:

- Assume responsibility for the day-to-day management of their project
- Design projects with programme outcomes and benefits in mind
- Ensure that their project completes on time and to budget
- Ensure that projects adhere to the Corporate Project Management Methodology
- Ensure Verto is kept up to date with relevant project information
- Attend Board meetings as required

Board relationship with CET/SLT

Programme level authority to deliver strategic change and to take decisions about developing the local economy derives from Cabinet handed down by Corporate Executive Team. The Programme SRO (Corporate Director, Economic and Community Ambition) is empowered to make judgements as to which decisions can be made at the Board and relayed directly to relevant Service Areas, and which decisions need to be referred back to CET and/or Cabinet. The latter are most likely to be decisions that will impact upon the wider organisation, those which may attract significant negative publicity or where the Programme Board view differs significantly from that of a Service Area.

Board relationship with DCC Service Areas

Communication between the Board and DCC Service Areas is two way:

- The Board may report to relevant Heads of Service the outcome of decisions on strategic issues where they relate to or impact on service delivery. The Programme Lead may also give specific direction or instruction to Heads of Service as a result of decisions made at the Board.

- Heads of Service will refer relevant project briefs / business cases to the Board to ensure that they are considered within the broader context of the Board's remit and to secure Board approval before setting up a project. From time to time Heads of Service will also be asked to report on progress with service plans and business as usual activities where these have influence on the programme outcomes.

Board relationship with Scrutiny Committees

The Board may be asked to present its programme to Scrutiny Committees, who will play a key role in providing assurance to the Council that the programme and its Board are delivering in line with the Corporate Plan.