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briefing

Getting ready for *Supporting People*: a guide for small providers



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Supporting people and small providers

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- *Supporting People* is a new Policy and Funding Framework for supported housing. With effect from April 2003, it brings together 'support' charges previously funded out of Housing Benefit (HB), Supported Housing Management Grant (SHMG) Probation Accommodation Grants Scheme (PAGS) and DSS Section 30 grant aid into one pot.

6 Developing your health and safety policy

- These new 'support' monies will be used by local housing departments, social services and probation services to jointly commission services.

7 Developing your confidentiality policy

- This new system was preceded by a set of transitional housing benefit regulations designed to stabilise existing provision by enabling certain support services to be paid by housing benefit and allow an accurate calculation of monies due to be transferred from HB. Post- April 2003, HB will be available to cover narrowly defined 'housing' costs alone.

8 Developing your complaints procedure

- All of this affects both sheltered and supported housing

9 Developing your equal opportunities

- The funding changes meant that providers of supported housing and sheltered housing services must enter into new contractual arrangements with the *Supporting People* Administering Authorities. These contracts will be formally reviewed every three years.

10 Developing your staff

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For some small providers of support services, *Supporting People* is the first time they will have contracted with local statutory bodies. Other small providers have long experience of contracting with, say Social Services or Probation. Even so, the nature of the *Supporting People* system may mean they have to make changes in how they do things.

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This publication is intended as a guide to preparing for the interim contract and offers checklists for providers who need to develop or review the key policies and procedures required for the *Supporting People* Interim Contract.

Glossary of Terms

Accreditation

A process for assessing the viability and competence of an organisation and formally recognising their ability to provide services

Administering Authority

The statutory body that enters into *Supporting People* contracts with providers. This is normally the local unitary Council or the County Council in 2 tier areas.

Benchmarking clubs

Organisations working together formally to review and compare performance and processes and share good practice

Commissioning Body

A local alliance of housing, social services, probation & health bodies that approves the *Supporting People* strategy. The Administering Authority works within this strategy.

Performance indicator

Specific information used in a planned way to measure and assess performance

QAF

The Quality Assessment Framework for *Supporting People*. The QAF defines standards against which providers can carry out self assessments.

Service review

A review of the strategic relevance and the quality, performance and cost-effectiveness of a *Supporting People* service prior to the expiry of its contract

Supporting People Grant

The grant that will be provided to local authorities to pay for the costs of support services from April 2003

Validation visit

A visit by the Administering Authority to check whether the service being provided meet the standards they are required to deliver

The interim contract

Supporting People monies are being transferred from various central government departments and quangos to 150 *Supporting People* Administering Authorities (AAs) around the country. There is the possibility of different areas doing very different things.

The Office of the Deputy Prime Minister (ODPM) has developed a standard interim contract for use between AAs and providers. They want to avoid a situation where AAs and providers have to get involved in myriad negotiations. The model contract is called ‘interim’ because it covers the period from the beginning of *Supporting People* to the first scheme review - after that a ‘steady state’ contract would be used.

Contracts are essential

A contract must be in place with all providers for all services before April 2003 to enable payment of *Supporting People* monies. Providers who run a number of services within a local area may have one contract with a detailed service specification for each service.

Local Variation

ODPM cannot compel AAs to use the model interim contract - but most have done. Some AAs have inserted new clauses or made variations to clauses. There may be a need to include additional clauses to capture previous contractual arrangements with probation services, or variations to insurance clauses may be necessary for small providers. Providers are advised to ensure that the terms of their specific contract are at least as good as those in the model interim version.

Where the Authority already has a contract with a provider, perhaps from social services, it is possible to vary the terms of that contract rather than create a new contract. Again it is worth ensuring that the terms are at least as favourable as the model interim contract.

The interim contract will include a schedule giving a date for the first *Supporting People* Review. Many AA’s already have identified their approach to service reviews in the Shadow Strategy and this process will confirm their dates.

Agreeing the terms of the contract

What should happen if providers and AA’s can’t agree the contract before April 2003? The current proposal (out for consultation) is a six week extension for agreement after which an immediate review kicks in. Unless there is a serious disagreement, we strongly recommend that the contracts are signed in time for April 2003. If a problem arises because you have not provided the AA with information they require, the ODPM’s advice to AA is to move straight to review.

Key Financial Features

There are two main variants of the interim contract:

- a block subsidy contract which applies to services where service users may be charged for support
- a block gross contract which mainly applies to services where service users are not charged for support

Under *Supporting People*, the default assumption is that people receiving support services will be charged for them. The exceptions to this are:

- schemes which offer short term support, and
- individuals who receive full or partial HB.

Some people who do not qualify for HB may still qualify for full or partial subsidy in paying for support under the Fairer Charging regime, (the system used by Local Authority Social Services departments to assess whether service users should pay for care or support.)

A service is short term where it-

- aims to *bring about independent living* within two years or following completion of a time-limited programme of support of under two years intended duration; or
- aims to *increase the capacity for independent living* through a package of time-limited housing related support, which has an intended duration of under two years’

Block Gross Contract

In short term schemes, providers don’t need to collect charges for support. So they can exclude any previously existing reference to such charges from their occupancy agreement, or simply set the charges specified for support to zero. In legal terms, the result is the same: there is no contractual obligation on the tenant to pay for support.

The support is paid through a block gross contract. The AA enters into to a contract with the provider to cover their agreed support costs, initially as

calculated in the original transfer of monies into *Supporting People* in April 2003 or as subsequently agreed at scheme review stage.

In a few areas all local *Supporting People* services are free but the ODPM assume that charges are being collected and reduce the value of the *Supporting People* grant to the local authority accordingly.

Block Subsidy Contract

Recipients of long term support will normally enter into a contractual obligation to pay for the support they receive. There are three ways in which this can happen. Each of these different contractual obligations on the service user generates a different form of contractual subsidy arrangement for the landlord and/or support provider.

Insurance

There is a statutory obligation to have Employers Liability insurance to protect the organisation against damages sustained by the employee while they are at work. The statutory minimum is £5million but £10 million is recommended. The guidance to the interim contract suggests that AA's should consider how to deal with small providers sympathetically but doesn't define 'small'. Public Liability Insurance is not a statutory requirement but is regarded as essential for service providers who deal with the public, including service users. The recommended minimum is £5 million and the recommendation is that Authorities should deal with each case as they see fit.

Information and Monitoring: Before SP Day

There is some basic information required by the AA before the contract is signed and a requirement to demonstrate good employment practice. Most providers who already receive grants will have most of these but at minimum providers will be required to have:

- Health and Safety policy
- Complaints Procedure
- Equal Opportunities policy
- Confidentiality policy

Contractual Basis of Service user's Obligation to Pay for Support in Long Term Schemes	Contractual Implication for Landlord/ Support Providers
<p>In many long term schemes the tenancy or licence will continue to include an obligation on the service user to pay for the support they receive. So the user has to pay - unless they qualify for exemption or otherwise attract subsidy under the Fairer Charging arrangements.</p>	<p>The AA will issue the landlord a block subsidy contract for Supporting People services. This contract commits the AA to paying subsidy only for those service users who are exempt from charging, or who otherwise qualify for total or partial subsidy under the Fairer Charging Mean Test. Individuals can move in and out of qualification for subsidy. So a block subsidy contract means a regular, detailed exchange of information between landlord and AA. All subsidy payments must be credited to individual rent & support accounts.</p>
<p>The service user may be required to enter into a support contract with the support provider, completely separate from their tenancy or licence.</p>	<p>The provider would receive a block subsidy contract, with all the same implications as if support was being charged for under the tenancy.</p>
<p>The service user would remain under a legal obligation to pay but this could not be enforced using the provisions of housing law.</p>	<p>Because the obligation to pay for support was non-tenancy based, the block subsidy contract could be issued to someone other than the landlord - say a local mental health group managing a scheme belonging to a housing association.</p>
<p>The service user may be required to enter into a support contract with the Administering Authority completely separate from their tenancy or licence.</p>	<p>The provider would receive a block gross chargeable contract. The AA would be responsible for identifying charge payers and collecting charges.</p>

Information and Monitoring: From SP Day

Currently there is only a requirement to produce information on 3 basic performance indicators:

- Service availability
- Occupancy
- Staff availability

AA's and providers can agree to use other performance indicators from a library of indicators developed by ODPM. Additionally, a new system of client monitoring will be introduced from April 2003. This will involve all providers completing a client recording form for all service users.

A new Quality and Monitoring Framework has been developed for *Supporting People* funded services and will be used to assess the quality of services at the first service review.

Developing your health and safety policy

'You must comply with the requirements of the Health and Safety at Work Act 1974 insofar as they apply to the provision of the Support Services.'

CHECKLIST	LEGISLATION
If you have more than 5 employees you will need a health and safety policy.	<p>General statement of policy</p> <ul style="list-style-type: none"> ● Statement of intention to provide healthy and safe living and working environments. ● State how the policy will be publicised ● The organisations commitment in writing must be dated and signed <p>Responsibility for carrying out the statement of intent</p> <ul style="list-style-type: none"> ● Name of the Director, secretary or manager responsible for implementing policy ● Names and responsibilities of key individuals responsible for day to day health and safety <p>Arrangements and procedures</p> <ul style="list-style-type: none"> ● Systems and procedures in place for health & safety ● Arrangements for joint consultation with a recognised trade union. ● A list of the main health hazards identified from the assessment of the working arrangements and workplace.
What is the employer's duty with regard to dealing with accidents?	<ul style="list-style-type: none"> ● All accident at the premise need to be recorded in the Accident book ● Three day injury, death, disease and major incidents need to be reported to the local authority
What is the employer's duty in the provision of first aid?	<p>There must be at least one notice telling staff:</p> <ul style="list-style-type: none"> ● the location of the first aid box ● who the first aider or appointed person ● where the first aider or appointed person can be found ● Contents of the first aid box should include the following: one guidance card on first aid, twenty individually wrapped sterile adhesive dressings in assorted sizes, two sterile eye pads, with attachment, four individually wrapped triangular bandages, six safety pins, six medium sized individually wrapped sterile unmedicated wound dressings, two large sterile individually wrapped unmedicated wound dressings, one pair of disposable gloves.
What is the employer's duty in conducting risk assessments?	<p>Employers of 5 or more employees need to record significant findings of the assessment.</p> <p>Identify each main work operation and summarise its associated hazards</p>
What are the steps to conducting a risk assessment?	<ul style="list-style-type: none"> ● Identify potential harm ● Who might be harmed? ● Is the risk adequately controlled? ● What further action is necessary to control the risk? ● Review the risk assessment
What is the employer's duty in conducting a COSHH assessment? (Control of Substances hazardous to Health)	<ul style="list-style-type: none"> ● Employers must ensure that every hazardous substance used or generated in the workplace and to adopt appropriate control and monitoring procedures. ● Employers must ensure that they prevent their employees being exposed to hazardous substances by using less harmful substitutes or different methods of work to reduce the risk. ● Employers must take steps to control any risk identified.
What is the employer's duty with regards to manual handling?	<ul style="list-style-type: none"> ● Employers must assess the risk of injury from manual handling. ● Establish measures to avoid hazardous manual handling. ● Provide information and training on handling loads
Health and Safety audits	<ul style="list-style-type: none"> ● Set out who, when, how and of what safety checks will be carried out
Review of policy	<ul style="list-style-type: none"> ● Identify how the compliance with the policy will be monitored ● Identify how often the policy will be reviewed

This checklist is intended to help providers develop or review a Health and Safety Policy. Every organisation should have a clear policy for ensuring implementation and awareness of health and safety.

Developing your confidentiality policy

The requirements of the interim contract for support services have highlighted the need for a well thought out approach to confidentiality & data protection issues. So, what are the key areas for action? A provider's review of their confidentiality policy could start by addressing these areas.

Aim of Policy	Outline what it aims to do for staff, service users, other agencies, compliance with law
Legislation	The procedure must comply with the Data Protection Act 2000, the Human Rights Act 1998, the Public Interest Disclosure Act 1998 and any contractual requirements.
Who does it apply to	You must ensure that everyone engaged in the support service that may have access to personal information understands their responsibilities and demonstrate evidence of compliance with their procedures. This includes employees, volunteers, self-employed sessional workers, consultants or contractors.
Record keeping	It should to cover accuracy and consistency of record keeping, security of data, information to service users, consent for disclosure requirements and identify responsible persons. Being able to demonstrate compliance means keeping written records - e.g. a file note of the steps taken to check an enquirer's identity, a note of the information given, a signed confidentiality undertaking for a sessional or temporary worker, etc. Contracts of employment, volunteering agreements, contracts with consultants and others should include a clause making explicit the person's responsibilities for confidentiality and data protection.
Disclosure of information	<p>In order for the provider to plan and provide effective support, personal information may need to pass between them and other agencies. Information about when this may be appropriate should be set out in the agreement with the user.</p> <p>In block subsidy contracts with the AA, where subsidy is received for a chargeable service, the provider will also need to clarify how or when they will pass information they have received on changes in a service user's financial circumstances on to the <i>Supporting People</i> Team.</p>
	<p>Your policy should ensure staff understand how to maintain confidentiality in the following situations</p> <ul style="list-style-type: none"> ● Making phone calls on behalf of service users ● Responding to requests for information from other agencies ● Referring someone to another agency ● Typing records or letters ● Providing access to files which contain information about more than one person ● Storing records in public areas ● Deciding which information to pass on to other colleagues ● Where are they are obliged to pass on information even if the service user refuses consent.
Service users' consent	<p>When service users first move into their home or accept a support service, they should be advised what type of information the service provider keeps on record, what can or must be disclosed without their consent, when their consent is needed for disclosure and their rights to see information recorded about them. This advice should be backed up with a section in a handbook or information pack in a language and form comprehensible to the user and accessible to their relative or advocate.</p> <p>A service user should not be asked to sign a blanket, wide ranging consent to disclosure. A confidentiality agreement should set out areas where information will be shared and under what circumstances and serves as a record of their consent. In other cases, the user's consent must be obtained as the need arises.</p>
Breaches of Confidentiality	Your policy should cover what to do if a staff member breaches confidentiality by un-necessarily passing on information about a service user.

Developing your complaints procedure

The Interim Contract requires you to: 'draw up a complaints procedure (if you have not already got one)'. At the reasonable request of the AA you must supply a copy of your records relating to complaints made in relation to the Support Services and your response.

A person's right to complain should be recognised and supported at all levels of the service. A clearly understandable complaints policy that all service users and staff are familiar with will contribute to this. All service users and staff should have the policy and their responsibilities explained at their

induction to the service.

A complaints procedure should follow a staged process with the aim to resolve the issue as early as possible, before it escalates. It is useful to allow more informal complaints to be resolved quickly without the need for a long drawn out investigation. Where

it is not possible to sort them out at this stage then a more comprehensive process can be instigated.

Checklist

In summary a complaints procedure should at least cover the following points:

CHECKLIST	GOOD PRACTICE
Identify the purpose of the policy	Outline what it aims to do and who it is for - staff, service users etc.
Separate procedure for informal complaints and formal complaints	The policy should define the difference between an informal, often verbal, complaint, and a formal, often written, complaint. In all cases a person who makes a complaint needs to feel their concern is being listened to.
Identify to whom complaints should be directed - may depend on who or what the complaint is about	The policy should outline who complaints should be directed to i.e. the person the complaint is about or their line manager, the member of staff responsible for a particular aspect of service provision etc. Any barriers which deter or prevent people from making complaints need to be identified and steps taken to remove them. For instance allowing advocates or other parties who are acting on behalf of the service user (with their permission) to make a complaint. Issues of confidentiality need to be addressed. Service users need to have confidence that they won't suffer detriment as a result of making a complaint.
How should the complaint be made - verbally or in writing	Flexibility is important so that individuals are not discouraged from complaining but informal complaints are usually made verbally and formal complaints are made in writing. The policy should outline what information should be included in the complaint i.e. enough detail for the complaint to be fully investigated, and suggestions for how the complaint might be resolved. Complainants may need support.
What will you do when a complaint is made?	The policy should outline what response a complainant can expect and what action will be taken i.e. how you will investigate the complaint, what action you will take. All complaints should be dealt with promptly and investigated impartially.
How quickly will you acknowledge and respond?	It should state the time limits for responses, e.g. to acknowledge, investigate and provide a full response to complaint. The complainant (or person acting for them) should be informed of the progress and result of the investigation, if there are any delays in response and the reason for the delay.
Will you respond in writing or verbally?	Informal complaints may be responded to verbally, but formal complaints must be responded to in writing within the time scales outlined in the policy. It is good practice to also respond to informal complaints in writing.
What will you say?	The policy should outline the limitations of a response to a complaint i.e. where confidentiality must be maintained. Policies should also outline that responses will include the organisation's view/understanding of the complaint and what action it proposes to take.
What should people do if they are not satisfied with your response?	If a complainant is not satisfied with the response there should be a specified process for appealing the decision. Details of relevant external bodies should be included in the policy.

Developing equal opportunity

EOP is about fairness. Most providers will, of course, be behaving fairly towards their service users, employees and others in any event. But some will need to codify this in a formal procedure for the first time - and everyone will need to check that the procedure is actually working...

The contractual commitment

The interim contract obliges you to, "... use all reasonable endeavours" to make sure that your equal opportunities policy complies with all statutory obligations to avoid discrimination on a wide range of grounds including gender, age, religion, race, disability and sexuality. This obligation covers both staffing and service delivery matters.

Employment

You must observe the Commission for Racial Equality's (CRE) Code of Practice for Employment, and provide the AA with information to allow them to assess your compliance with it. You must inform the AA if it is found you have unlawfully discriminated against any person in the provision of the Support Services. You'd also have to tell the AA how you planned to put things right.

Services

You must give "appropriate consideration" to each service user's race, nationality, cultural or ethnic background, marital status, age, gender, religion, sexual orientation and disabilities. None of this need be onerous - but you do need to adopt a written EOP policy and procedure. These must address the points in the table below:

EOP CHECKLIST	
Aims and public commitment	<ul style="list-style-type: none"> Set out your acknowledgment that discrimination exists and state your intention to combat it in employment and service provision at your project <p><i>Example</i> Averill House acknowledges that discrimination and prejudice exists. We are committed to ensuring that no-one working with us, receiving our services, or applying to do so, is discriminated against in terms of race, colour, nationality, ethnic or cultural origins, disability, gender, marital status, sexual orientation or age</p>
2. Responsible persons	<ul style="list-style-type: none"> State who is responsible for implementing and monitoring the policy and practices <p><i>Example</i> The Averill House project manager is responsible for implementing and monitoring our policy</p>
3. Information	<ul style="list-style-type: none"> Set out how the policy will be developed to take account of the needs and interests of all sections of the community State how policy will be publicised to existing and potential staff, volunteers, service users <p><i>Example</i> We will consult with the local authority, local organisations representing discriminated against groups (inc CRE, others, list) in drafting our policy A copy of our policy will be issued to all users, staff and relatives or carers</p>
4. Action planning	<ul style="list-style-type: none"> Identify the project's present position on engagement of workers and contractors and applications from service users from discriminated against groups Set out where the project should be in the future and what short and long term action is needed if the position needs to be changed. <p><i>Example</i> Averill House currently employs x and accommodates x Compared to the general population/needs of the area as identified in the SP strategy, x group is under-represented among employees/residents Our action plan for 2003/04 is to: - (include image, working practices, any other identified barriers to joining, train staff, develop links with communities)</p>
5. Monitoring	<ul style="list-style-type: none"> Set out how you will monitor the employment, promotion and access to training and development of those you engage to provide your service Set out how you will monitor the applications and acceptances of those wishing to use the project's support services Set out how you will monitor any harassment or discrimination against workers or service users <p><i>Example</i> Averill House (named post) will record the characteristics (list sources of discrimination) of all applicants for housing at the project and of all accepted as residents on the (equivalent to the CORE) form attached</p>
6. Review	<ul style="list-style-type: none"> Make a commitment to review practices regularly to see if delivering outcomes required by action plan Set out who will do this and how often <p><i>Example</i> The monitoring information described above will be compiled and monitored by (named post), compared to the current action plan targets and reported to the (owner/committee/SP team) each quarter/year</p>

Developing your staff

“You must employ sufficient numbers of people of sufficient ability, skill, knowledge, training or experience so as to properly provide, and to supervise the proper provision of, the Support Services”. (extract from the Interim Contract)

Some small providers of *Supporting People* services will be sole traders, and not employ any permanent staff. But even then some temporary cover is necessary if they are ever to be able to take any leave. So basic induction, supervision and appraisal procedures are a must for almost all providers involved with the *Supporting People* programme.

Good staffing practices are vital in motivating staff and ensuring that everyone is aware of their goals. The process starts with induction, which will introduce the employee to the new role and organisation; this is then built on with the supervision process which ensures that appropriate support is provided to the employee. Appraisal processes review the performance of the employee on an annual basis.

Induction

No one can do a job unless it has been clearly explained to them, and they have been fully familiarised with all they need to know before starting. This is called induction. Key elements include:

- Showing the employee around
- Introducing people (colleagues, inc. Committee and Trade Union reps)
- Explaining lines of communication and authority
- Issuing & explaining Terms and Conditions, including arrangements over wages, holiday etc
- Explaining the office systems
- Training
- Covering Health and Safety matters, including emergency procedures
- Issuing a description and outlining the main duties
- Checking for any areas of uncertainty
- Set objectives for the next 3 months and 6 months

AREA	CHECKLIST
Purpose of Supervision	<ul style="list-style-type: none"> • To provide an opportunity for staff to raise concerns with their line manager • To develop a climate for good practice • To support the staff development • To ensure that the staff member is given the resources to do her/his job • To ensure that the staff member is meeting personal objectives which contribute to business and team objectives
Process of Supervision	<ul style="list-style-type: none"> • Supervision meetings should take place at least every 4-6 weeks and last approximately 60 minutes • An agenda should always be drawn up by the supervisor, in consultation with the supervisee, and should contain, amongst other points: <ul style="list-style-type: none"> - progress on objectives - current workload - training and development needs • If a supervision meeting is postponed, the supervisor should rearrange the meeting within 2 weeks of the postponed meeting
Record Keeping	The Supervisor should take notes of all supervision sessions and give a copy to the supervisee.
Confidentiality	All discussions in supervision should be confidential. If the supervisor needs to discuss or disclose information to a third party they should seek agreement from the supervisee.
Disagreements	Areas of disagreement between the supervisor and the supervisee should be recorded on the supervision records. Areas of disagreement that cannot be resolved should be referred to the supervisor's line manager.

Supervision

Every organisation should have a clear policy on staff supervision.

Appraisal

An appraisal is an opportunity for a manager and employee to discuss performance over the last year and set workloads and targets for the next year. The appraisal should aim to motivate the employee and identify strengths and opportunities for further development. It should determine how any necessary performance improvement can be achieved, possibly by focussing on future training needs.

New work objectives should be set - ones that are SMART (Specific, Measurable, Achievable, Realistic, Timed). These should be linked to the overall business plan.

When Things go Wrong

It is a legal requirement that all employees have access to minimum grievance and disciplinary procedures. If you are new to employing staff, you might wish to download template grievance and disciplinary procedural standards taken from "*Routes to resolution, improving dispute resolution in Britain*" this can be downloaded from the DTI website, www.dti.gov.uk

Criminal Records Bureau

“You must carry out checks with the Criminal Records Bureau on all staff employed or (if any) volunteers engaged to provide, or supervise the provision of the Support Services, if this is a statutory requirement” (extract from the interim contract).

The Interim Contract for *Supporting People* contains a requirement that providers should have staff and volunteers checked by the Criminal Records Bureau where this is a statutory requirement. This has caused a lot of confusion and some Local Authorities are insisting that all should be checked. Providers who work with 16-17 yr olds will already be carrying out these checks but should this be a requirement for all providers?

The Criminal Records Bureau (CRB) runs the checking service on the confidential and criminal records of those applying to work with children and vulnerable adults. The relevant statutes are the Police Act 1997, the Rehabilitation of Offenders Act 1974 and their accompanying regulations.

Who is affected?

The Police Act describes “working with” vulnerable adults as ‘involvement in regularly caring for, training, supervising or being in sole charge of them’. The Exceptions Order to the Rehabilitation of Offenders Act states that contact with the vulnerable person must be part of the normal duties of the worker or volunteer.

Definition of a vulnerable adult

The regulations in the Police Act give a three part definition of a vulnerable adult, which states that they must be receiving services, and have a condition and a disability of one of the types listed. As well as health, the

services listed are all types of care or support services. The conditions are:

- a learning or physical disability;
- a physical or mental illness, chronic or otherwise, including an addiction to alcohol or drugs; or
- a reduction in physical or mental capacity

This is classed as a disability where this creates a dependency on others to assist with basic physical functions, impairment in someone’s ability to communicate or impairment in someone’s ability to protect themselves from assault, abuse or neglect.

These definitions cover many but not all clients in the supported housing sector and providers need to consider whether their services are affected.

Levels of checks

The regulations, now in effect, require an enhanced disclosure to be obtained for people working with vulnerable adults. Enhanced disclosures include: details of convictions, including spent convictions, cautions, reprimands and warnings recorded by the police at national level; information from local police records including relevant non-conviction information; and checks on the Departments of Health and Education & Employment lists of people barred from working with the vulnerable. Standard checks are similar to the above but exclude local police information. Enhanced and standard checks can only be obtained by registered bodies. Basic checks can be obtained by any individual about

themselves only, and show only unspent convictions held at national level.

CRB Registration and Code of Practice

Because of the sensitive nature of the information obtained through enhanced and standard checks, these can only be obtained by organisations registered with the CRB who have signed up to their Code of Practice on the handling and use of this information. An organisation wishing to get standard or enhanced disclosures from the CRB must either register or go through an umbrella body which is registered with them. The registering organisation must adopt policies and procedures which ensure compliance with this Code of Practice.

When to make a check

Organisations should review the roles of staff and identify whether they have access to vulnerable adults. Job offers should be subject to satisfactory CRB checks, as well as the usual references. For existing staff, including those appointed before the requirements were introduced, the organisation needs to introduce checks and establish at what intervals re-checks will be made.

For further information, contact the CRB, website www.disclosure.gov.uk or telephone their Information Line on 0870 9090811.

Developing your support planning

'You must provide the Support Services for which you are responsible with all the skill, care and diligence to be expected of a competent provider of services of a similar kind to the Support Services.'

Under *Supporting People* more emphasis is being placed on the quality of support planning and involving service. The accurate assessment of need and individual planning are important steps to ensure service users receive a service that reflects their needs. The Quality Assessment Framework (QAF) and Performance Indicators place a lot of emphasis on this. Not only does needs assessment feature as a standalone objective of the QAF but it is also a means of achieving the requirements of the other standards. Participation of service users is a key element in demonstrating good practice. Services will need to provide evidence that service users are involved and their views and aspirations are taken into account in the needs assessment and support planning process.

Involving the Service User

For support planning to work effectively mutual commitment from the service user and the support worker to work together is essential. With participation a person will take more ownership and responsibility for decisions that are made.

Providers often find it a difficult to encourage service users to become involved. In support planning some of the barriers to participation can be reduced by:

- Explaining the process clearly.
- Describing its purpose
- Recognising users current situation e.g. do they have needs around financial security or housing that need to be met before other aspects are considered?
- Awareness of cultural, social and racial issues for client

AREA	CHECKLIST
Assessment	<p>The assessment process will identify strengths, gaps in skills, issues or problems for the individual. It is a participative process and there may be others involved apart from the user and support worker.</p> <p>A formal Risk Assessment process should be included as part of the Assessment process</p>
Support Planning	<p>Planning can be broken down into six steps:</p> <ul style="list-style-type: none"> ● what needs to be addressed? ● what is the solution or goal ● how can the solution or goal be reached ● who will be involved ● what is the time scale ● when will it be reviewed
Implementation	<p>This is the stage where the issues identified in the assessment and planning stages begin to be addressed. Implementation will depend very much on the issues identified but can involve practical help with life or social skills, accessing other services including leisure, employment activities, counselling or therapy.</p> <p>It is important to clarify who is responsible for doing what at this stage.</p>
Monitoring of the plan	<p>Procedures and pro-formas for recording and monitoring frequency and content of sessions.</p>
Review Plan	<p>Review the progress of the plan. This can be done both informally through regular meetings between the tenant and worker and formal review meetings. The purpose of the review is to look at what has been achieved, identify strategies which have not been effective, help prioritise and allow for changes in circumstances.</p>

- Overcoming any anxiety/tension that support planning is an institutional tool that the service user doesn't need
- Avoiding Jargon
- Using acceptable language e.g. some service users may prefer the term individual plan to support plan
- Using other means to establish preferences and dislikes when a service user has communication difficulties e.g. facilitated communication, video, audio, graphics.
- Describing any restrictions on choice and freedom (agreed with service user) imposed by a specialist programme
- Meeting at a venue where the service user feels comfortable
- Setting objectives that are SMART (Specific, measurable, achievable, realistic and time related)
- Giving the service user a copy of the plan.
- Reviewing the plan on a regular basis

Monitoring and performance review

Supporting People introduces a complex system of performance monitoring, review and accreditation of providers. Most Local Authorities will use this and even if they choose not to, are likely to put in place a similar system.

The interim contract will specify a service review date within three years of the contract being signed. Service Reviews will focus on:

- Strategic relevance (to SP strategy)
- Demand for service (voids)
- Quality - the service will be judged initially against a series of four core standards set out in a Quality Assessment Framework(QAF)
- Costs
- Performance
- Accreditation - the provider will be subject to a process of formal accreditation before they receive a steady state contract

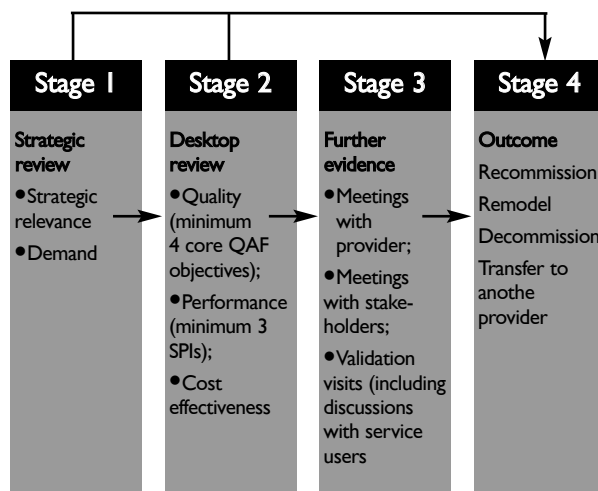
Under each service objective there are more detailed Standards describing the requirements for each objective. The achievement of different standards will result in a service attaining a certain level of performance (A, B, C or D) for each objective. Where Level D assessments are awarded as part of a service review process, providers will have to prioritise achieving level C as soon as possible. In some cases failure to achieve level C will represent a serious risk to service users and/or staff, and will require providers to take immediate action to improve performance in these areas.

have no system in place or one based on other criteria, resources will need to be set aside for the implementation of a framework.

Accreditation

All providers will be automatically accredited on SP day - but this won't last for ever. Accreditation will only last until the first service review. Accreditation is of the whole organisation, not the particular service, however, many small providers will only operate one service so this distinction is likely to be less obvious to them than to others.

Overview of service review process



To assist with the process of assessing services under these objectives a series of tables has been developed, detailing the standards at each level.

Providers can use these tables to assess their performance against the service standards which are aligned to each service objective. Every standard has evidence requirements, so

that the level which has been awarded can be justified to Administering Authorities (AA).

The aim is that the resulting information will contribute to service reviews, helping AAs assess quality and decide if a further more comprehensive review of the service is needed.

The formal guidance for all this claims that the QAF can be used as tool for continuous improvement by providers. Smaller providers might find it somewhat intimidating but, where providers

Accreditation has five dimensions. Providers must show they :

- Are financially viable
- Have competent administrative procedures that are able to properly handle and account for their *Supporting People* grant;
- Have effective employment policies to cover staff development, staff supervision and the health and safety of staff and service users;
- Have robust management procedures to provide *Supporting People* services;
- Are able to demonstrate a track record of competence to deliver services.

There is a system of passporting to full or partial accreditation if organisations already have accreditation under other frameworks such as Investors in People, QuaDs, Charter Mark, the housing Corporation or the National Care Standards Commission

In the long term, only accredited organisations will be able to hold *Supporting People* contracts. Accreditation will last three years or until the next service review, whichever is longer.

The QAF

In all there are 4 core service objectives, regarded as minimum requirements to be met by all providers at first review. These cover:

- Security, Health & Safety
- Protection from abuse
- Fair access, diversity and inclusion
- Needs assessment & support planning

There are a further 13 supplementary service objectives which can be 'mixed and matched' for different types of scheme.

SITRA Conferences & Training

Do you need someone to organise a conference for your organisation?

In the last twelve months, SITRA have organised and run over thirty conferences covering all aspects of emerging supporting housing policy and practices. This has included coordinating many of the ODPM's rolling programme around *Supporting People* as well as cross authority events, inclusive forums and provider events. *Why not let SITRA plan, organise and deliver your event.*

We can offer

- A wide experience and expertise in running conferences of various sizes for Government departments, Local Authorities and providers
- Project management from inception through to the smooth running of the event on the day
- Project management skills in mapping and running conferences
- An existing information network and resource of existing venues, SITRA speakers and courses
- Excellent value for money with discounts for members

For more information about how SITRA can help you with your conference needs please call Andy Lawson, Conferences Officer on 020 7793 4710 or e-mail him at andy@sitra.org

SITRA training

We have expanded our open programme so that it is now delivered at five locations around the country: Newcastle, Birmingham, Bristol, Exeter and London. We offer over 60 different courses covering the full spectrum of legislative, policy, management, key working and personnel skills required by the supported housing sector. Call for our current brochure.

In-house training

We also provide training specifically tailored for your staff and delivered at a place/venue and time of your choosing.

We can offer

- A wide choice of courses from our open programme training guide
- Specific tailor-made courses which meet your particular requirements
- Training for 6-16 staff at a time and at a location of your choice
- Excellent value for money with possible discounts for multiple bookings
- A wide range of experienced trainers with specialist knowledge in supported housing and its related fields

If you want to find out more about how SITRA can work with you for your in-house training requirements, and for details of our rates please call David McDaid, Training Officer on 020 7793 4710 or e-mail davidm@sitra.org

SITRA

Approximately 670 organisations are members of SITRA country wide. Members have access to all SITRA's services and assist in the formulation of policy for the agency.

If you would like to join SITRA please contact the Membership Administrator on 020 7793 4711 and ask for an application form. SITRA provides the following services:

Advice

SITRA provides telephone advice and answers correspondence on all matters relating to the development and management of specialist housing services.

Information

SITRA publishes this Bulletin on a monthly basis as well as regular information leaflets, briefings and publications.

Training

SITRA offers a comprehensive training programme and can also develop in-house training to meet the particular needs of supported housing projects.

Consultancy

SITRA will work with an agency on a consultancy basis to resolve a particular issue, either on a long- or short-term basis.

Policy

SITRA runs seminars on a variety of policy issues. SITRA works with local and central government to ensure that the needs of its members are recognised, understood and met by resource providers.

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SITRA believes all individuals have a right to the housing, support and personal care services appropriate to their needs, delivered according to their own preferences. Such services should be easy to access, of the highest possible quality, and equitably reflect the diversity of user needs.

To this end, our mission is to:

- Seek to influence those with the power to affect the quality and affordability of housing and support provision**
- Provide policy makers and practitioners with accurate, up to date and timely information, guidance and practical support on relevant technical and policy issues to maximise the chances of people with housing and support needs receiving an affordable, high quality service**
- Contribute to the baseline professional standards that typify the sector through the provision of training**
- Promote best practice in the design, commissioning, delivery, monitoring and evaluation of services**