MAYOR AND CABINET

Date: WEDNESDAY, 11 SEPTEMBER 2002 at 6.30 p.m.

Committee Room 2 **Please note time of meeting**
Civic Suite
Lewisham Town Hall
London SE6 4RU

Enquiries to: Mike Brown
Telephone: 020-8-314-8824 (direct line)

MEMBERS

The Mayor (Steve Bullock) (L) Chair
Councillor Moore (L) Vice-Chair and Deputy Mayor
Councillor Best (L) Cabinet Member for Environment
Councillor Donnelly (L) Cabinet Member for Lifelong Learning
Councillor Garcha (L) Cabinet Member for Social Inclusion
Councillor Holder (L) Cabinet Member for Social Care & Health
Councillor McGarrigle (L) Cabinet Member for Culture
Councillor Whiting (L) Cabinet Member for Resources
Councillor Wise (L) Cabinet Member for Housing and Community Safety

Members are summoned to attend this meeting

Barry Quirk
Chief Executive
Lewisham Town Hall
Catford
London SE6 4RU
Date: 3 September 2002

The public are welcome to attend our committee meetings, however, occasionally, committees may have to
Consider some business in private. Copies of reports can be made available in additional formats on request.
### ORDER OF BUSINESS - PART 1 AGENDA

<table>
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<th>Item No.</th>
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</tr>
</thead>
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<td>Minutes</td>
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<td>2</td>
<td>Declarations of Interests</td>
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<td>3</td>
<td>Exclusion of the Press and Public</td>
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<td>4</td>
<td>Appointment of LEA Governors</td>
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<td>5</td>
<td>Local Education Authority – Making of Instruments by Order (Grinling Gibbons)</td>
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<td>6</td>
<td>Supporting People (Draft) Shadow Strategy</td>
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<td>7</td>
<td>Charges for Communal Heating and Hot Water in Council Dwellings</td>
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<td>Draft Statement of Accounts 2001/02</td>
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<td>9</td>
<td>Best Value Review of Looked After Children – Review of Commissioning of Children’s Residential Services</td>
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<td>10</td>
<td>Best Value Review of Looked After Children – Improvement Plan</td>
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<td>11</td>
<td>Implementation of Fair Access to Care Services Guidance Review of Adult Eligibility Criteria</td>
</tr>
<tr>
<td>12</td>
<td>Sixth Form Centre Proposal – Issue of Statutory Notices</td>
</tr>
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</table>

The public are welcome to attend our Committee meetings, however, occasionally committees may have to consider some business in private. Copies of reports can be made in additional formats on request.
Recommendation

It is recommended that the Minutes of the meeting of the Mayor and Cabinet, held on 31 July 2002 be confirmed and signed (copy attached).

Members are asked to make any declarations of pecuniary interests or other interests they may have in relation to items on this agenda (if any). Members are reminded to make any declaration at any stage throughout the meeting if it then becomes apparent that this may be required when a particular item or issue is considered.
**LONDON BOROUGH OF LEWISHAM**

**MINUTES** of that part of the meeting of the MAYOR AND CABINET, which was open to the press and public, held at LEWISHAM TOWN HALL, CATFORD, SE6 4RU on WEDNESDAY, 31 JULY 2002 at 6.30 p.m.

**Present**

The Mayor (Steve Bullock); Councillor Moore (Vice-Chair); Councillors Donnelly, Garcha, McGarrigle, Whiting and Wise.

Apologies for absence were received from Councillors Best and Holder.

<table>
<thead>
<tr>
<th>Minute No.</th>
<th>Action</th>
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<tbody>
<tr>
<td>1</td>
<td>MINUTES (page RESOLVED that the Minutes of that part of the meeting of the Mayor and Cabinet, which was open to the press and public, held on 17 July 2002 be confirmed and signed.</td>
</tr>
<tr>
<td>2</td>
<td>DECLARATIONS OF INTERESTS (page None was declared.</td>
</tr>
<tr>
<td>3</td>
<td>EXCLUSION OF THE PRESS AND PUBLIC RESOLVED that under Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraphs 3 and 9 of Part 1 of Schedule 12(A) of the Act:</td>
</tr>
<tr>
<td>4</td>
<td>CAPITAL PROGRAMME ISSUES – OSCP AND HIP FINAL OUTTURN 2001/02, OSCP AND HIP 1ST QUARTER MONITORING 2002/03 AND OVERALL REVIEW OF CAPITAL PROGRAMME (page RESOLVED that (i) the revised budgets as set out in the Dir.</td>
</tr>
</tbody>
</table>
report be agreed;

(ii) Directorates reimburse the OSCP programme from their revenue resources where they overspend allocated capital budgets unless where specifically agreed by the Mayor and Cabinet that additional budget is allocated;

(iii) the Executive Director for Regeneration and Executive Director for Resources report back to the Mayor and Cabinet regarding the future of Mayfield and Amon Oak;

(iv) the additional capital budgets allocated for schemes outlined in paragraph 4.23 totalling £1.66m and paragraph 4.25 of £70,000 be agreed;

(v) the variation and extension of the existing contract with Lengard Ltd. for the Phase 1A works to include the Phase 1B works at an estimated cost of £505,862 plus fees of £75,281 be approved;

(vi) a funding agreement be entered into with the Deptford Fund to confirm that the Council will fund up to £750,000 on works to the Albany Theatre (initially by way of short term loan but if necessary by way of long term grant in the event that equivalent funding is not ultimately forthcoming from the LDA) on the main terms set out in paragraph 4.11 of the report;

(vii) delegated authority be given to the Executive Director for Resources, in consultation with the Head of Law, to approve and finalise the terms of the funding agreement;

(viii) the contract variations outlined in sections 6.27 - 6.32 of the report inclusive for 2001/02 and for 2002/03 in section 6.33-6.51 inclusive be agreed;
(ix) the final outturn position for 2001/02 and the reasons for variations from forecasts as set out in the report be noted;

(x) the overall review of the Other Services Capital Programme as detailed in section 5 of the report be noted; and

(xi) the final 2001/02 outturn as detailed in section 6 of the report be noted.

5 REPORT BACK ON MATTERS RAISED BY THE OVERVIEW AND SCRUTINY BUSINESS PANEL (page     and Appendix page

It was noted that the Constitution provides for the Vice-Chair of the Overview and Scrutiny Committee to be the Vice-Chair of the Overview and Scrutiny Business Panel; and that the appointment of Councillor Anderson as Vice-Chair of the Panel is dependent on him being elected as Vice-Chair of the Overview and Scrutiny Committee.

RESOLVED that the decisions made by the Overview & Scrutiny Business Panel on 17 and 24 July 2002 be noted.

6 APPLICATIONS FOR LICENSED DEFICITS IN 2002/03 (page

RESOLVED that

(i) a licensed deficit for St Joseph’s Academy of £159,415 repayable over 5 years be approved;

(ii) a licensed deficit for Malory Secondary School of £351,670 repayable over 5 years be approved and the school be asked to continue to seek ways of reducing the overspend to bring it within this balance; and

(iii) the other licensed deficits will be authorised by the Executive Director for Education and Culture in due course, be noted.
RESOLVED that

(i) the Council adopt the principles with regard to attendance set out in paragraph 11.1 of Appendix 1 to the report,

(ii) the improvements common to all options for attendance set out in paragraph 12 of Appendix 1 be agreed;

(iii) option 3, outlined in paragraph 13.3 of Appendix 1 be agreed, subject to finalising agreement with Secondary Schools on the amount of finance to be devolved and subject to Primary Schools agreement to take part in the pilot scheme;

(iv) the proposal set out in paragraph 14 of the report to support good behaviour in schools and provisions for pupils out of school be agreed;

(v) the improvements already put in place during the review as listed in paragraph 10.1 of Appendix 1 to the report, be endorsed; and

(vi) the improvement plan and timetable attached as Appendix 3 to the report be agreed.

RESOLVED that

(i) the scopes of the following Best Value Reviews be agreed:-

The Vice-Chair suggested that the report be referred to the Overview & Scrutiny Business Panel inviting their comments on their role in Best Value Reviews and the allocation of those set out in the report to the Select Committees.
<table>
<thead>
<tr>
<th>Minute No.</th>
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<tbody>
<tr>
<td></td>
<td>• Improving Awards, Benefits and Concessions (Appendix A)</td>
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<td>• Making Lewisham a Cleaner, Greener Place (Appendix B)</td>
</tr>
<tr>
<td></td>
<td>• Improving Lewisham’s Street, Estates and Parks (Appendix C)</td>
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<td></td>
<td>• Creating a Better Informed Lewisham (Appendix D)</td>
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<tr>
<td></td>
<td>• Making Lewisham a Safer Place (Appendix E)</td>
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</tbody>
</table>

(ii) the report be referred to the Overview and Scrutiny Business Panel inviting their comments on their role in Best Value Reviews and the allocation of the reviews set out in the report to the Select Committees.

9 CONSULTATION RESULTS AND IMPLEMENTATION OF INTRODUCTORY TENANCIES AND TENANCY CHANGES
(page and Appendices pages)

RESOLVED that

(i) the views of secure tenants following the consultation on the changes to the existing tenancy agreement, as shown in detail in Appendix B to the report, be noted;

(ii) officers implement these changes with effect from 1 October 2002, and all secure tenants be given four weeks notice of these changes;

(iii) the views of tenants, housing applicants and other stakeholders following the consultation on introductory tenancies, as shown in detail in Appendix C to the report, be noted;

(iv) officers implement this type of
Minute No. 10

PEPYS ESTATE COMPULSORY PURCHASE ORDER (page and Appendices page)

The Mayor and Cabinet heard representations from Mr Flemming of Pepys Estate who spoke against the proposed CPO.

RESOLVED that

(i) a Compulsory Purchase Order be made under Section 17 of the Housing Act 1985 for the acquisition of Aragon Tower, Limberg House, Marlowe House and Millard House, shown on the plan attached to the report in heavy black edging, together with all rights and interests in the land; and

(ii) the Head of Law, Head of Housing and Head of Property & Development be authorised to take such action as may be necessary to make, obtain confirmation of and effect the Compulsory Purchase Order and to acquire all interests under it.

11 STREET CRIME ACTION PLAN (page

RESOLVED that the Street Crime Action Plan be agreed.

12 RESPONSE TO LIFELONG LEARNING SELECT COMMITTEE ON THE RECOMMENDATIONS ON SCHOOL CATERING (page and Appendix

It was noted that the Chair of the Lifelong Learning Select Committee had raised further questions on the response.

RESOLVED that the response to be made to the Lifelong Learning Select Committee be agreed.

13 SOCIAL INCLUSION AND EQUALITIES BUDGET 2002/03 (page and Appendices pages

RESOLVED that
Minute No. Action

(i) agreement in principle be given to the proposals for spend on this budget as outlined in items 1-22, paragraph 5.4 of the report, totalling £176.6k; HP & P

(ii) the immediate funding of items 1-14 totalling £116.4k and outlined in paragraphs 6.7-6.8 of the report, be agreed; and

(iii) delegated authority be given to the Executive Director for Resources for the release of monies itemised as 15-22 in paragraph 5.4 of the report, subject to funding being available later in the year.

14 APPOINTMENT OF DIRECTOR TO THE LONDON EAST CONNEXIONS PARTNERSHIP BOARD (page

RESOLVED that the Cabinet Member for Lifelong Learning become a Director of the East London Connexions Board and that the Head of Culture and Community Services be nominated as an alternate to attend board meetings as required.

Chair
### Recommendation

It is recommended that under Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraphs 3 and 9 of Part 1 of Schedule 12(A) of the Act:-

101 Minutes
1. **Summary**

   The report sets out details of nominees for appointment as authority governors.

2. **Purpose of the Report**

   To consider and approve the appointment of authority governors detailed below.

3. **Policy Context**

   Authority governors fulfil the core value of local government serving local communities.

4. **Recommendation**

   It is recommended that the Mayor considers:

   4.1 the information concerning non-party nominees in Appendix 1, prior to a decision being made on appointment to authority governor; and

   4.2 whether to appoint the nominees set out in paragraph 6.1 below as authority governors.

5. **Background**

   Every governing body, under Section 36 and Schedule 9 of the School Standards and Framework Act 1998, is required to have at least one representative of the Local Education Authority (LEA) as part of its membership. A vacancy has arisen on the governing body of the educational establishments listed in paragraph 6.1 below, and a new appointment is required.
### Nominations

#### 6.1

<table>
<thead>
<tr>
<th>Name</th>
<th>School</th>
<th>Constituency</th>
<th>Reappointment</th>
<th>New</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ms C Amsbury</td>
<td>Elfrida</td>
<td>Lewisham West</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr T Baumgartner</td>
<td>John Ball</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs R Canegan</td>
<td>Pendragon</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr M Canegan</td>
<td>Coopers Lane</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Dr D Daley</td>
<td>Northbrook</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr J Dalymple</td>
<td>Lee Manor</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr J Denton</td>
<td>Merlin</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Ms M Duncan</td>
<td>Rangefield</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Ms M Edmonds</td>
<td>Sir Francis Drake</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mr A Foley</td>
<td>Myatt Garden</td>
<td>Lewisham Deptford</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Miss H Foster</td>
<td>Launcelot</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs C Hawkins</td>
<td>Stillness Junior</td>
<td>Lewisham Deptford</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr I Jones</td>
<td>Fairlawn</td>
<td>Lewisham West</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs A Makinde</td>
<td>Sandhurst Infants</td>
<td>Lewisham West</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Name</td>
<td>School</td>
<td>Constituency</td>
<td>Reappointment</td>
<td>New</td>
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<tr>
<td>Ms S Mant</td>
<td>Sedgehill</td>
<td>Lewisham West</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr M Moore</td>
<td>Greenvale</td>
<td>Lewisham West</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs J Smith</td>
<td>Ennersdale</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Ms H Taylor</td>
<td>Sedgehill</td>
<td>Lewisham West</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Ms E Bond</td>
<td>John Stainer</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mr M Downing</td>
<td>Haseltne</td>
<td>Lewisham West</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Ms S Jeffrey</td>
<td>Chelwood Nursery</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mr T Livingstone</td>
<td>Forest Hill</td>
<td>Lewisham West</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Cllr P Morrison</td>
<td>Crofton</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Dr J Onwumere</td>
<td>Tidemill</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mr A Porter</td>
<td>Rushey Green</td>
<td>Lewisham West</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Ms S Ring</td>
<td>Chelwood Nursery</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mrs M Sanders</td>
<td>Clyde Nursery</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Ms J Smith</td>
<td>Chelwood Nursery</td>
<td>Lewisham Deptford</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mr P Fallon</td>
<td>Malory</td>
<td>Lewisham East</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr R Woolford</td>
<td>Stillness</td>
<td>Lewisham</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>
6.2 Appointments to school governing bodies are usually for a four-year term.

7. Legal Implications

These are contained in the body of the report.

8. Financial Implications

There are no specific financial implications arising from this report.

9. Crime and Disorder Implications

There are no specific implications arising from this report.

10. Equalities Implications

Lewisham Council’s policy is to encourage all sections of the community to be represented as authority governors. In particular, we would encourage further representation from the black community and minority groups, including disabled people, who are currently under-represented, as authority governors.

11. Environmental Implications

There are no specific financial implications arising from this report.

BACKGROUND PAPERS

None

If there are any queries arising from this report, please contact Andy Nichols, Governors’ Services, 3rd Floor, Laurence House, telephone 020 8314-7993
<table>
<thead>
<tr>
<th>Name</th>
<th>School</th>
<th>New</th>
<th>Occupation</th>
<th>Residential Area</th>
<th>Précis of Suitability to be considered as a school governor</th>
<th>Governor Monitoring Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ms Christine Amsbury</td>
<td>Elfrida</td>
<td>Yes</td>
<td>Local Government Officer</td>
<td>Beckenham</td>
<td>Ms Amsbury works closely with a number of agencies including schools, the police, the education psychology service etc. She has teaching experience and this combined with her current role as an education social worker has given her a good understanding of schools and broader educational issues.</td>
<td>White British</td>
</tr>
<tr>
<td>Mr Tony Baumgartner</td>
<td>John Ball</td>
<td>Yes</td>
<td>Solicitor</td>
<td>Lewisham</td>
<td>Mr Baumgartner has many years experience both as a solicitor and as a university academic. He has excellent analytical, interpersonal and decision making skills.</td>
<td>White other</td>
</tr>
<tr>
<td>Mrs Rachael Canegan</td>
<td>Pendragon</td>
<td>Yes</td>
<td>Voluntary worker</td>
<td>Catford</td>
<td>Mrs Canegan has been a voluntary work for many years working with young people.</td>
<td>Black Caribbean</td>
</tr>
<tr>
<td>Name</td>
<td>School</td>
<td>New</td>
<td>Occupation</td>
<td>Residential Area</td>
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</tr>
<tr>
<td>Mr Michael Canegan</td>
<td>Coopers Lane</td>
<td>Yes</td>
<td>Civil Servant</td>
<td>Catford</td>
<td>Mr Canegan has worked in the diplomatic service for over 18 years and has developed skills in marketing, project management, financial planning, problem solving, personnel matters and team working.</td>
<td>Black Caribbean</td>
</tr>
<tr>
<td>Dr Dona Daley</td>
<td>Northbrook</td>
<td>Yes</td>
<td>University Lecturer</td>
<td>Catford</td>
<td>Dr Daley has held several management positions within higher education establishments and currently is course director for a management course at the Open University.</td>
<td>Black Caribbean</td>
</tr>
<tr>
<td>Mr Jason Dalrymple</td>
<td>Lee Manor</td>
<td>Yes</td>
<td>Accountant/Consultant</td>
<td>Lee</td>
<td>Mr Dalrymple works for Pricewaterhousecooper and has particular skills in financial planning, problem solving, project management and IT.</td>
<td>White British</td>
</tr>
<tr>
<td>Mr John Denton</td>
<td>Merlin</td>
<td>Yes</td>
<td>Union Leader</td>
<td>Grove Park</td>
<td>Mr Denton is the London Regional Secretary for the Communication Workers Union and has skills in strategic planning, financial planning, problem solving, personnel, project management, decision making and communications.</td>
<td>White British</td>
</tr>
<tr>
<td>Name</td>
<td>School</td>
<td>New</td>
<td>Occupation</td>
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<tr>
<td>Ms Monica Duncan</td>
<td>Rangefield</td>
<td>Yes</td>
<td>Headteacher</td>
<td>West Norwood</td>
<td>Ms Duncan has been a teacher for 22 years and is currently the head at Crofton Secondary school. She is committed to raising the standards of education for all.</td>
<td>Black British</td>
</tr>
<tr>
<td>Mr Andrew Foley</td>
<td>Myatt Garden</td>
<td>Yes</td>
<td>Charity Worker</td>
<td>Lewisham</td>
<td>Mr Foley is a programme manager with Help the Aged. Prior to this he taught in Namibia and Sierra Leone.</td>
<td>Irish</td>
</tr>
<tr>
<td>Miss Helen Foster</td>
<td>Launcelot</td>
<td>Yes</td>
<td>Broadcaster</td>
<td>Lewisham</td>
<td>Miss Foster is a programme maker/producer with BBC. She has skills in strategic planning, problem solving, team working, decision making and IT.</td>
<td>White British</td>
</tr>
<tr>
<td>Mrs Celene Hawkins</td>
<td>Stillness Juniors</td>
<td>Yes</td>
<td>None</td>
<td>Brockley</td>
<td>Mrs Hawkins is the Chair of a local society and has many years experience of organising events. She has been a parent governor for five years.</td>
<td>Irish</td>
</tr>
<tr>
<td>Mr Ivor Jones</td>
<td>Fairlawn</td>
<td>Yes</td>
<td>Consultant</td>
<td>Sydenham</td>
<td>Prior to becoming a consultant Mr Jones managed an F.E. College and a University. He has skills in Strategic management, financial planning, problem solving, personnel, project management, team working, decision making, IT and Communications.</td>
<td>White British</td>
</tr>
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<td>New</td>
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<td>-----------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Mrs Antonia Makinde</td>
<td>Sandhurst</td>
<td>Yes</td>
<td>Mother</td>
<td>Catford</td>
<td>Mrs Makinde is a full-time mother of two children. She has a keen interest in education and the development of children.</td>
<td></td>
</tr>
<tr>
<td>Ms Samantha Mant</td>
<td>Sedgehill</td>
<td>Yes</td>
<td>College Director</td>
<td>Catford</td>
<td>Ms Mant is the development director for a 6th form college. She has skills in marketing, strategic management, problem solving, personnel, team working, decision making, IT, and communications.</td>
<td></td>
</tr>
<tr>
<td>Mr Michael Moore</td>
<td>Greenvale</td>
<td>Yes</td>
<td>Retired</td>
<td>Catford</td>
<td>Mr Moore was a long serving governor at a special school in Wales. He was vice-chair of the governing body for 6 years.</td>
<td></td>
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<tr>
<td>Ms Hazel Taylor</td>
<td>Sedgehill</td>
<td>Yes</td>
<td>University Lecturer</td>
<td>Lee</td>
<td>Ms Taylor has been a senior adviser for an LEA and was a secondary headteacher. She has skills in strategic management, financial planning, problem solving, personnel, project management, team working, decision making and communications.</td>
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<tr>
<td>Black African</td>
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<tr>
<td>White British</td>
</tr>
<tr>
<td>Name</td>
</tr>
<tr>
<td>-----------------------</td>
</tr>
<tr>
<td>Mr John Cameron</td>
</tr>
<tr>
<td>Mrs Marian Mitchell</td>
</tr>
<tr>
<td>Mr Tesh Rai</td>
</tr>
<tr>
<td>Mrs Deborah Tibbert</td>
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</table>
Précis of Suitability to be considered as a school governor

Through this she gained experience of working with a wide range of people and also working as part of a management team. She is a member of a the management committee of a young persons hostel and runs a parent and toddler group.
1. **Summary**

This report seeks authority to amend the instrument of government for Grinling Gibbons School and to make the revised instrument by order.

2. **Purpose**

To amend the instrument of government for Grinling Gibbons School and make a revised instrument.

3. **Policy Context**

It is for the governing body alone to determine the content of the instrument of government. The LEA must satisfy itself that the draft instrument of government conforms to legislation, must agree its content, and must make the instrument by order.

4. **Recommendations**

It is recommended that:

4.1 the instrument of government for Grinling Gibbons School be amended, in accordance with the wishes of the school’s governing body, in order to reduce the size of the governing body to the smaller constitution as permitted under the Schools Standards and Framework Act 1998 (SSFA); and

4.2 the revised instrument of government in Appendix C be made by order.

5. **Background**

5.1 Section 37 of the SSFA requires every maintained school to have an instrument of government that determines the constitution of the governing body and other matters relating to the school. The SSFA requires that the
local education authority secure that an instrument of government be made for each school in accordance with Schedule 12 of the Act and makes provision for the review and variation of such instruments.

5.2 Under the SSFA the governing body has a choice as to the number of governors on the governing body (See Appendix A table 1). In accordance with the requirements of schedule 12 governing bodies have to submit a draft instrument detailing the name of the school and the number of governors in each category. Appendix C contains the individual instrument, which is to be made by order.

6. Legal Implications

These are set out in the body of the report

7. Financial Implications

There are no financial implications arising from this report.

8. Equalities Implications

There are no equalities implications arising from this report.

BACKGROUND PAPERS

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<td>Governors’ Services</td>
<td>Andy Nichols</td>
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If there are any queries arising from this report, please contact Andy Nichols, Team Leader Governors’ Services, 3rd Floor, Laurence House, telephone 0181-314-7993
Governing Body Composition

Table 1  Community School

Community Primary school with 100 or more pupils (column c or d)
Community Primary school with fewer than 100 pupils (column c, d, e or f)

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<td>1</td>
<td>1</td>
<td>0</td>
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<tr>
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<td>2</td>
<td>2</td>
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<tr>
<td>Head</td>
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<td>1</td>
<td>1</td>
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</tbody>
</table>

Additional co-opted Governors

Primary schools which serve one or more minor authorities are required to co-opt 1 additional governor nominated by one or more of the minor authorities in the area served by the school, (see paragraph 14 (a) of main guidance).

The governing body of any school with a sponsor may choose to have 1 or 2 additional co-opted governors nominated by the sponsor or sponsors of the school.

Any school with a sponsor or sponsors may choose to have 1 or 2 additional co-opted governors nominated by the sponsor or sponsors of the school.

If the school is in an Education Action Zone, the governing body may choose to have an additional co-opted governor nominated by the Forum.
There are two options for the composition of the governing body, which are set out below.

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<th>Category</th>
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<td>Teacher</td>
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</tr>
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<td>Staff</td>
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<tr>
<td>Head</td>
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<td>1</td>
</tr>
<tr>
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</table>
INSTRUMENT OF GOVERNMENT: COMMUNITY SCHOOLS

1. The name of the school is **Grinling Gibbons Primary School**

2. The school is a **community school**.

3. The name of the governing body is **The Governing Body of Grinling Gibbons Primary School**

4. The governing body shall consist of:
   
   (a) 4 parent governors;
   
   (b) 3 LEA governors;
   
   (c) 1 teacher governors;
   
   (d) 1 staff governor;
   
   (e) 3 co-opted governors
   
   (f) the head teacher (except at any time when s/he has given written notice to the clerk to the governing body of the school that s/he chooses not to be a governor).

5. Total number of governors **13** (except at any time when the head teacher has given notice as above that s/he chooses not to be a governor, when the total number of governors will be **12**).

6. Subject to regulation 5(4) of the Education (School Government) (Transition to New Framework) Regulations 1998, this instrument of government comes into effect:

   - On the date of making

7. This instrument was made by order of **the London Borough of Lewisham Local Education Authority on 11 September 2002**.
1. **Summary**

1.1 The Supporting People Programme will be implemented in April 2003, it creates an opportunity for improving the quality of life of vulnerable people by enabling them to live more independent lives in the community, in doing so it will also benefit the community as a whole. This will be achieved by accurately identifying the need for support within the borough and matching appropriate support to meet this need.

1.2 Supporting People will introduce a new system of planning, monitoring and funding for housing related support services. These will be flexible, cost effective and will complement existing care services. Lewisham’s Supporting People Strategy aims to support the Council’s commitment to create balanced communities by providing services which promote independence and choice, we will also focus on groups who present a potential for high risk of harm, or those who may be at risk of harm themselves, so promoting community safety.

1.3 The Lewisham Supporting People Strategy is considered a key driver in combating social exclusion; it will facilitate local initiatives that will help achieve capacity building for vulnerable people.

1.4 The Supporting People Strategy framework has been determined by the ODPM (Office of the Deputy Prime Minister). It contains the Supporting People vision in Lewisham, the planning approach, detail of the supply analysis, needs profiling of each client group, cross-authority issues and plans for service quality and review.

1.5 Part D contains the Annual Statement; this is a projection based on funds being available to increase the number of services by 10%. However, the ODPM does not guarantee such resources will be available. The announcement will be made in 2003.
2. **Purpose**

2.1 A previous report to members in April 2003 gave authority for the implementation of contracting arrangements. Between now and February 2003 the Supporting People Team will be setting up contracts with providers for 350 schemes which provide over 3,500 units of accommodation. The purpose of the current report is to allow the authority to fulfil the next requirement of Supporting People implementation.

2.2 Each Local Authority is required by the ODPM to submit a Supporting People Shadow Strategy by the 30th September 2002. The Shadow Strategy, which underpins the Supporting People Programme, will direct the first year of the administration of the programme, April 2003 to March 2004. In future, the Strategy will be produced once every five years.

2.3 The Strategy identifies gaps or areas for improvement within the support services currently being provided within Lewisham. The Supporting People Team has worked jointly with partners in Health, Housing, Social Care and Health, Probation and the voluntary sector to provide a statement as to how the identified shortcomings will be resolved. This report seeks agreement of the Shadow Strategy circulated separately with this agenda.

2.1 **Recommendations**

The Mayor is recommended to:

3.1 note the requirements placed on the Council;

3.2 agree the Supporting People Shadow Strategy and the priorities for the first year of the programme; and

3.3 delegate any minor changes to the Supporting People Strategy document to the Head of Housing.

4. **The Development of the Supporting People Strategy**

4.1 The Shadow Core Strategy Group has been responsible for identifying the strategic priorities and commissioning opportunities in each sector of Supporting People. It has prepared and proposed the Supporting People Strategy for the Commissioning Body. This has been done in light of the needs mapping, supply analysis and outcome of Inclusive Forum discussions. The group has sought input and advice from providers at appropriate stages and advice from the Housing Corporation to ensure that revenue and capital planning are brought together effectively.
5. **Highlights from the Supply Mapping**

5.1 Mapping the supply of supported schemes has been at the core of the Supporting People Programme; we now have comprehensive data on schemes across the borough. Further work on analysing the information will need to be carried out. However, there are already some clear indications.

- Insufficient provision for young offenders and people who have recently left prison and those under supervision.
- A shortage of schemes for people with substance misuse problems, especially for people with Crack Cocaine addiction.
- A shortage of schemes for people with alcohol problems.
- A shortage of units for people with higher levels, or more complex and challenging mental health needs.
- A greater number of supported accommodation schemes required for teenage parents.
- A shortage of support schemes for younger people who have left care.
- Lack of accommodation for people with physical disabilities and sensory loss (under 65).
- Lack of supported accommodation for Refugees.
- A shortage of Floating Support across all client groups.

5.2 The supply mapping has also highlighted:

- A large number of general lower support schemes for single homeless people.
- Much of the support is provided in schemes which are situated in the north of the borough, whilst support is required across the whole borough.
- Difficulties in accessing move-on accommodation for people who no longer need supported housing.
- Much of the support is provided in shared accommodation (across all client groups) self-contained accommodation is seen as preferable.
- Many schemes offer low support – more medium/high support is required.

6. **Summary of Key Supporting People Needs Identified**

The Supporting People Strategy sets out details of needs mapping exercises or other evidence of needs which have already been identified or undertaken within the commissioning body’s boundary. Each client group covered by the programme is detailed in turn and the strategic priorities identified. This information is on page 8 of the Strategy.
6.1 Several themes have been identified as applying to all client groups:

- Improving the quality of provision
- Developing schemes, which maximise independence
- Problems with move-on accommodation
- The need for cross-authority services

7. Wider Strategic links

7.1 Supporting People plays a central role in the delivery of over 30 key strategies, which aim to combat social exclusion in Lewisham. To ensure that the strategic interdependency is recognised, and that the opportunity for the Supporting People programme to assist in addressing local need in a joined up way, the Supporting People Team has been working closely with partners in probation, health and the voluntary sector.

8. Service Quality and Review

8.1 Improving the quality of services for vulnerable people is at the centre of the Supporting People programme. From April 2003 a systematic review will be carried out of all services funded by Supporting People and it is required that all services will be reviewed in a three-year period. The timetable has taken account of the wider programme of strategic review and Best Value planning. The Strategy outlines the timetable for review.

8.2 Review timetable

<table>
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<th>2004/05</th>
<th>2005/06</th>
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<td>Focus of review</td>
<td>Providers who have not previously been monitored.</td>
<td>Mental Health Learning disability Victims of Crime (including women at risk of Domestic violence)</td>
<td>Older People Physical disabilities HIV &amp; AIDS Travellers</td>
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<tr>
<td></td>
<td>Single Homeless, Homeless Families, Young People Offenders &amp; Young Offenders</td>
<td>Refugees Drug &amp; Alcohol</td>
<td></td>
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</table>

9. Annual Statement

9.1 The original proposal put forward by the ODPM was that Commissioning Bodies should project how they would commission new services as if they had either 5% or 15% new resources available for this purpose. It is now apparent that the figures for each authority ‘pot’ will not be
available in time for this exercise. It has therefore been proposed that
a projection be given on the basis of funds being available to increase
the number of services commissioned by 10%. This template is
contained in Part D of the strategy.

10. Financial Implications

10.1 The financial year 2002/03 is crucial in establishing the size of the local
and national Supporting People pot in 2003/04. The mapping exercise
has now identified all services, which will receive Supporting People
funding (known as legacy funding). Contracts with providers of those
services are currently being put in place by the Supporting People
Team in preparation for April 2003.

10.2 The funding to be provided by the Government will be based on actual
costs in 2001/02 uprated to 2003/04 prices. The level of service to be
provided in 2003/04 will be the same as 2001/2. Therefore the grant
received from the government will match payment to providers. There
will be no additional cost to Council budgets.

10.3 The ODPM have allocated £40 million nationally to carry out the
implementation tasks for Supporting People. Lewisham has been
awarded £257,771 for 2002/03 and at least this amount for 2003/04. No
announcement has yet been made about implementation funding
post 2004. However, it is indicated that the costs of administering the
programme will be funded from the Supporting People Grant.

10.4 The strategy contains a summary description of the costs associated for
10% additional services as required by the ODPM. However, no
guarantee has been given that such resources will be available. It is
anticipated that such an announcement will be made in 2003. This
has been done as a contingency exercise should such resources be
made available. The awarding of any growth contracts, should
funding become available, will be subject to the authorities
procurement policies and practices.

11. Legal Implications

11.1 Section 93 of the Local Government Act 2000 provides powers to the
Secretary of State to make grants for the provision of welfare services.
Such grants are to be made to Local Authorities. Welfare services
provide support, assistance, advice or counselling to individuals for
particular needs. Local authorities, when administering and applying
the grants, must have regard to guidance and directions issued by the
Secretary of State. The Secretary of State must consult with (among
others) local authorities before issuing such guidance.
11.2 The Secretary of State has issued extensive guidance and consultation on matters concerned with the implementation of these provisions. This report asks members to approve the shadow Supporting People Strategy. It is for members to consider whether they wish to accept the strategy put forward.

11.5 The provision of this service falls into Part B of the European procurement service regulations, so that it is not necessary to follow the European requirements as to open advertisement and competition. The only requirement may be for the publication of contract award notices. The procurement of future services will be guided by the Shadow Strategy.

12. **Crime and Disorder Implications**

The Supporting People Programme plays a vital role in its contribution to the Crime and Disorder agenda. The Probation service is a key partner in the delivery of the programme. The Strategy will ensure that adequate and effective supported services are available for offenders, as research indicates addressing such need contributes to reduction of offending behaviour. The Strategy also highlights and seeks to improve services for the victims of crime including women at risk of domestic violence.

13. **Equalities Implications**

13.1 The changes proposed under Supporting People will benefit Black and Minority Ethnic service users and Minority Ethnic led providers by better planning, this will lead to an improvement of services. Access to mainstream services will also be improved. The Shadow Strategy, which identifies areas of hidden or unmet need, will pay particular attention to the needs of a diverse community.

13.2 Consultation is critical to the success of the programme, and a number of consultative sessions, many in conjunction with neighbouring authorities have been held. A BME forum has also been established, it allows BME providers to discuss issues of concern, addresses diversity and equality issues, looks at ways of involving BME users and ensures that the full range of service users are fairly represented.

13.3 A User Involvement Strategy has been produced; it is based on the belief that effective user involvement has numerous benefits for users, providers and the Supporting People Programme. The User Involvement Steering Group has several provider representatives. A key aim of the strategy is to examine equality issues and to ensure that BME service users are represented in the programme.
14. **Environmental Implications**

The Supporting People Programme contributes to the Supported Housing and Homelessness Unit EMAS objectives 2001/02, Fear of Crime and Equity issues. The Supporting People Strategy will focus on groups who present a potential for risk of harm, or those whom may be at risk of harm themselves, including women at risk of domestic violence and people at risk of ‘Hate’ crime.

15. **Conclusion**

The Supporting People Shadow Strategy underpins the Supporting People Programme in Lewisham. This Strategy will review the proposals to address local and cross-authority needs and proposes a set of aims, objectives and priorities that will facilitate the appropriate use of Supporting People funds. Authorities are required to have the Supporting People Strategy approved by the appropriate committee prior to submission to the ODPM in September 2002.

**BACKGROUND PAPERS**


Supporting People - Report to Executive Committee, 3rd April 2002.

If there are any queries on this report, please contact Fiona Kirkman, Regeneration, extension 49498.
Supporting People in Lewisham (DRAFT) SHADOW STRATEGY
Supporting People in Lewisham
Draft Shadow Strategy

Foreword

The Supporting People programme is a national initiative launched by the Office of the Deputy Prime Minister (ODPM) which will ‘go live’ in April 2003.

The Supporting People Programme will improve the quality of life of vulnerable people through planned, high quality housing and support services, which meet local needs.

It promotes housing related support services, which are both cost-effective, robustly funded and planned using a co-ordinated approach. It is being driven by a working partnership of Local Government, the NHS, The National Probation Directorate, service users and support providers.

The programme has been developed to address the needs of vulnerable people, including those with disabilities, mental health problems, older people, young homeless people, victims of crime (including women at risk of domestic violence) and offenders on probation.

Ashley Hook
Head of Housing
Regeneration

Lesley Moore
Head of Adult Services
Social Care & Health

Kevin Barry
Assistant Chief Probation Officer
Probation
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Part A Executive Summary

Section A.1 Introduction

The Supporting People Programme will be implemented in April 2003, it creates an opportunity for improving the quality of life for vulnerable people by enabling them to live more independent lives in the community, in doing so it will also benefit the community as a whole. The programme will achieve this by accurately identifying the need for support within the borough and matching appropriate support to meet this need.

Supporting People will introduce a new system of planning, monitoring and funding for housing related support services, which will be flexible, cost effective and which will complement existing care services.

Lewisham’s Supporting People Strategy aims to support the Council’s commitment to create balanced communities by providing services which promote independence and choice, we will also focus on groups who present a potential for high risk of harm, or those who may be at risk of harm themselves, so promoting community safety. The Lewisham Supporting People Strategy is considered a key driver in combating social exclusion; it will facilitate local initiatives that will help achieve capacity building for vulnerable people.

Supporting People is a working partnership between the local authority, service users, Health, Probation and support providers in Lewisham.

The Shadow Strategy
The Shadow Strategy, which underpins the Supporting People Programme, will direct the first year of the administration of the programme, April 2003 to March 2004. The Strategy identifies gaps or areas for improvement within the support services currently being provided within Lewisham.

The Supporting People Team has worked jointly with partners in Health, Social Services, Probation and the voluntary sector to provide a statement as to how the identified shortcomings will be resolved. In future, Supporting People strategies will be produced once every five years.

Consultation is critical to the success of the programme, In Lewisham we have hosted a number of consultative sessions, many in conjunction with neighbouring authorities. Additionally the existing consulting mechanisms developed by service providers have been used to gain feedback from service users on aspects of the programme. In Lewisham we have produced a User Involvement Strategy to make sure that we plan to deliver appropriate services and that service users have a real say in how they are provided, you will find out more about our approach here.
2. The Supporting People Policy – Summary

The aim of The Lewisham Supporting People Strategy is to improve the quality of life of vulnerable people through planned high quality housing and support services, which meet local needs.

Lewisham is a relatively deprived inner London Borough. The Link between deprivation, poor health and greater levels of need for social care services is well established. Lewisham is ranked 30th in the ODPM’s 2000 index of deprivation. Of the 26 wards in Lewisham, four appear in the worst 10% of wards in England and 16 out of 26 wards are in the worst 20 per cent.

Lewisham is an inner London borough with a large and growing racially and ethnically diverse population. The main ethnic minority communities in the borough are of Caribbean, African, Turkish, Turkish Cypriot, Chinese, Vietnamese, Somali, South Asian (Indian, Pakistani, Bangladeshi and Sri Lankan) and Irish origin. There are over 100 languages spoken in the borough. The estimates provided by the GLA/LRC on ethnic group projections indicate that the population of Lewisham is currently 246,000 and that ethnic minorities represent 32% of the population.

Lewisham has the fourth highest rate of teenage pregnancy in England, which means one of the highest rates in Europe. The conception rates of 15 to 17 year olds are significantly above the national average – 5.3 per thousand in the UK, 80 per thousand in Lewisham.

Black and minority ethnic community issues will be included throughout the strategic process and implementation of Supporting People in Lewisham.

The changes proposed under Supporting People will benefit black and minority ethnic service users and minority ethnic led providers by improved planning, leading to the improvement of services. Access to mainstream services will also be improved. This Strategy, which identifies areas of hidden or unmet need, will pay particular attention to the needs of a diverse community.

The development of a monitoring system bringing shared and common management information will make it possible to compare services within and between local authority areas. Many providers work across several boroughs so developing consistent and effective practices across local authorities will be essential, a six borough group which includes Lewisham, Southwark, Lambeth, Greenwich, Bromley and Bexley meets on a regular basis to ensure that this is the case.

A. 3. Links to other strategies

Supporting People plays a central role in the delivery of over 30 Key strategies, which aim to combat social exclusion in Lewisham. To ensure that the strategic interdependency is recognised and that the opportunity for the Supporting People programme to assist in addressing the local need in a joined-up way, we have been working closely with our partners in Probation, Health and the voluntary sector to achieve this aim.
Supporting People forms one part of a large number of government led initiatives, which revolve around:
- Partnership working
- Prevention
- Modernisation of services
- Improving quality standards

(Insert Health strategic links)

The Supporting People Strategy therefore complements a number of local and national strategies. The Housing Strategy promotes the creation and maintenance of balanced communities where all residents, regardless of their personal circumstances are able to live in safety and security, this is echoed in the Supporting People Strategy. The BME Housing Strategy recognises Supporting People as an opportunity to improve the choice, quality and diversity of services for BME communities in Lewisham. The Community Safety Strategy emphasises the role of the local authorities in ensuring that residents reside in a safe and pleasant environment, the Supporting People Strategy also assists in this aim.

The following strategies, which also have their own consultation process, have helped to formulate the Supporting People Shadow Strategy:
- Best Value Programme
- BME Housing Strategy
- Housing Strategy
- Health Improvement Programme
- Teenage Pregnancy Strategy
- Add in SC&H Strategies

The Government’s Ministerial steer on Supporting People has also influenced our Supporting People Strategy, ensuring that support is extended to those clients whose needs have historically been less well met such as people presenting a potential for high risk of harm or those at risk of harm themselves such as women experiencing domestic violence, vulnerable young people including young parents and those at risk of offending or re-offending.

**A.4 Management Issues**

The Supporting People Team in Lewisham was set up in 2001, it is based in the Supported Housing and Homelessness Division within the Regeneration Directorate, the focus of the team throughout the last twelve moths has been upon the implementation tasks required for April 2003. The Team is made up of a Project Manager and three Project Officers.

The Project Team reports directly to the Supporting People Implementation Board. The Implementation Board is made up of representatives from Health, Probation and the local authority with members from all directorates. The Board provides overall direction and strategic input to the Supporting People Programme; the Programme Board will now evolve into the Commissioning Body for the next phase of Supporting People implementation.
The Shadow Core Strategy Group is responsible for identifying the strategic priorities and commissioning opportunities in each sector of Supporting People. It has prepared and proposed the Supporting People Strategy for the Commissioning Body. This has been done in light of the needs mapping, supply analysis and outcome of Inclusive Forum discussions. The group has sought input and advice from providers at appropriate stages and advice from the Housing Corporation to ensure that revenue and capital planning are brought together effectively.

In preparation for April 1st 2003, the Team will need to change structure, to meet the new requirements; a Business Services Officer will be joining the team in January in preparation for the local authority taking on the new role of making payments to providers.

A.5. Highlights from the Supply Mapping

Mapping the supply of supported schemes has been at the core of the Supporting People Programme; we now have comprehensive data on supported schemes across the borough. More work on analysing the information will need to be carried out. However, there are some clear indications.

- Insufficient provision for young offenders and people who have recently left prison and those under supervision.

- A shortage of schemes for people with substance misuse problems, especially for people with Crack Cocaine addiction.

- A shortage of schemes for people with alcohol problems.

- A shortage number of units for people with higher levels, or more complex and challenging mental health needs.

- A greater number of supported accommodation schemes required for teenage parents.

- A shortage of support schemes for younger people who have left care.

- Lack of accommodation for people with physical disabilities and sensory loss (under 65).

- Lack of supported accommodation for Refugees.

- A shortage of Floating Support across all client groups.

Other indications are:

- A large number of general lower support schemes for single homeless people.

- Much of the support is provided in schemes which are situated in the north of the borough, whilst support is required across the whole borough, with pockets of high support in the Downham area.
Difficulties in accessing move-on accommodation for people who no longer need supported housing.

Much of the support is provided in shared accommodation (across all client groups) self-contained accommodation is seen as preferable.

Many schemes offer low support – more medium/high support is required.

A.6 Summary of Key Supporting People Needs Identified

The following common themes have been identified as applying to all client groups:

- Improving the quality of provision
- Developing schemes, which maximise independence
- Problems with move-on accommodation
- The need for cross-authority services

Older People with support needs

There is a considerable variation in where older people live and how this is predicted to change in the future; this will need to be considered in developing any future service. A greater range and choice of services for older people to run across all tenures is required. The specific needs of older peoples with additional problems such as mental health or alcohol must also be considered along with the needs of a growing older BME population.

People With Mental Health Problems.

Accommodation based mental health services are in high demand in Lewisham, accommodation operates as just one part of a wider service system and shortfalls in this area generate pressure on increased admissions to and delayed discharge from in-patient services.

There is a need for additional schemes for people with more challenging needs and for younger service users who would benefit from independent living. The need for accommodation based support schemes for black and ethnic minority service users have also been highlighted. There is also an over supply of registered facilities in the borough which provide mediocre levels of care both medium to long term, these have insufficient focus on rehabilitative practices, these services will need to be examined.

People with Learning Disabilities

There is a general shortage of provision for people with learning disabilities; this has resulted in a greater reliance on placing people out of the borough. The increase in the Learning Disability population and the recommendations of the White Paper ‘Valuing People’ requires the delivery of a wider range of services which includes home ownership options, schemes which offer the potential for independence in dispersed units with Keyworker support as well as schemes for people with more challenging needs. All services should reflect the needs of service users who have additional mobility problems.

People with a physical or sensory disability

The supply mapping exercise has highlighted the lack of supported accommodation for adults with disabilities. There is a real shortage of accommodation for people
who have been discharged from hospital or rehabilitation and for those who require temporary accommodation. More information is required here.

**Single homeless with support needs**
In relation to other client groups this group is comparatively well provided for in crude numerical terms. However, much of the support is very general and does not always cater to the needs of the diverse client group, especially for those who may have multiple needs. Many providers are already rising to this challenge and re-structuring to take account of this and to focus on tenancy sustainment. The future priority will be to develop services, which target specific needs more effectively.

**Homeless Families**
There is some evidence that new services should focus on prevention for those families who have support needs. Developing floating support services to assist families who have recently been rehoused or at risk of losing their tenancy will be a priority.

**People with Alcohol Problems**
Over the last few years there has been growing concern in the increase in numbers of people suffering from a combination of alcohol and drug problems and co-existing mental illness. This factor has influenced the priorities of the Lewisham Drug Action Team and therefore the Supporting People Strategy, whilst meeting the objective to improve community safety.

Extending support to people with tenancies, providing more ‘wet’ hostels and offering support for people who have a dual diagnosis are amongst the main priorities.

**People with Drug problems**
People with drug issues are not a homogenous group and services clearly need to take account of this, services require better targeting of people with mental health problems, ex-offenders, young people and single homeless people. The Priorities identified by the DAT include improving the quality of housing provision for clients with alcohol and substance misuse issues, developing floating support services, support for BME clients with substance misuse and alcohol issues and providing support services for women and women with children at risk of domestic violence or intimidation relating to drug dealers.

**Offenders including young offenders.**
Lewisham has a severe lack of supported accommodation for offenders; it will require a considerable programme of development to ensure that a workable level of provision is reached. The current shortage will be made worse as a result of the new Homelessness Legislation and initiatives in community sentencing, many individuals have a dual diagnosis and this appears to be a significant factor in Lewisham and many other south east London boroughs.

A range of provision is required for both offenders and young offenders. This includes, floating support services, second and third stage hostels, which cater for, people with a dual diagnosis
Mentally disordered offenders.
It has been identified that there are a significant number of mentally disordered offenders who do not meet the increasingly restricted eligibility criteria for community care assistance or do not receive care form health services but who have a mental disorder and require housing with support. It is these people who present a lower level of need and risk who pose increasing difficulties for probation staff seeking to access suitable housing as part of their treatment or resettlement plan. Developing appropriate housing with support is therefore a priority.

Young people at risk including young people leaving care
There is some evidence of a shortage of suitable supported accommodation for this group, the focus has been on the needs of young people who have mental health problems, disabilities, drug and alcohol problems and the needs of young offenders. On-going support for young people in their own tenancy has also been raised as a priority.

Teenage Parents
Lewisham has one of the highest national teenage pregnancy rates. Twenty of Lewisham’s twenty-six wards are in the 20% of wards in England with the highest numbers of under 18 conceptions. Since the development of the Reintegration project more information about young parents is available. Ethnicity in relation to conceptions, teenage pregnancy and the incidence of STIs shows that young people from ethnic groups are disproportionately reflected in the figures, although numbers in relation to teenage pregnancy need further investigation.

In line with the target set by Teenage Pregnancy Unit and the Housing Strategy no lone parents will be placed in unsupported accommodation by 2003. In order to meet this target further units will need to be developed, this will also consist of Floating support alongside specialist mother and baby units in recognition of the diverse needs that young parents have. Services also need to ensure that the additional support needs of this group are recognised, such as violence in the home, drug or alcohol issues and mental health problems.

Victims of crime including women at risk of domestic violence
In 2000/2001 there were 3,397 incidents classified as domestic violence by the Police, this is high compared to other boroughs.

The accommodation-based service priorities are for schemes for women with teenage sons’ aged 14 and above and support for victims with special needs requiring specialist help around their alcohol, drug or mental health problem. Developing floating support for women in their own tenancy or once they have moved on from the refuge are also required.

Victims of crime
Victims of Race and ‘Hate’ crimes have been traditionally under reported, this is of serious concern. Racial Harassment was reported as a major concern by 46% of black and 56% of Asian respondents. A survey of gay men living in Lewisham conducted in 1992 reported that 45% of respondents had been physically attacked because they were gay.
The focus of the support to people who have experienced this type of crime is considered within a wider context so that victims are not re-housed to leave the perpetrator to harass subsequent tenants. Support therefore needs to be offered to the victim, such as personal security, support groups and translation services. Extending the Linkline service is also being considered.

**People with HIV and AIDS**

HIV positive residents of Lambeth, Southwark and Lewisham constitute the largest HIV – positive cohort of any single district in the UK. The numbers of people living with HIV in Lewisham has more than doubled since 1996. The priorities for people living with HIV. The priorities for development are to continue with the DoH SCA Capital programme for family sized units, and temporary accommodation units, explore the option for cross-borough provision.

**Refugees**

Refugees experience many of the same problems as other groups, such as Isolation, domestic violence, mental health, drug and alcohol problems and disability. There are also specific issues such as poor access to language support, a lack of acknowledgement of physical and emotional scars. Services provided by specialist community groups are therefore regarded as most effective.

**Travellers**

There is one site in Lewisham, which currently houses 13 families, in addition there are over 15 known traveller families living in housing in the borough. There has also been a recent increase in unofficial Traveller sites. The priority for Travellers is around assistance with accessing benefits and linking into mainstream services.

Wait for further information from Nic Freeman.

**A.7 Risks and contingencies**

Throughout the programme the risks have been identified, the risk register is included in the appendix of this document. To insert the ODPM pro-forma as soon as it is released.

**A.8 Summary of Annual Statement**

The key areas of priority have been developed through a process, which has included an assessment of the supply map, an analysis of existing information on need and the contribution of commissioners, operational managers and providers at the Shadow Core Strategy Group. More information is required on specific aspects, particularly in relation to BME provision.

Section C sets out the Key priorities in detail.

The first priority is to develop a greater understanding of the level of need for support services and how this will inform future commissioning. Much more information is required in relation to the development of BME services.
Main areas for development are young people’s services, offender schemes, mental health, Learning disability.

**Review** – In the first year priority will be given to reviewing those providers who have not previously been monitored together with services for single homeless people, young people and offenders. The reviews will link into other service reviews when they are being carried out for example the Best Value Review of the Supported Housing Unit being carried out by SITRA.

Year two – Mental Health and Learning disability.
Year three – Older people, Physical disability, HIV & AIDS.
More information about the review process is contained in Part B.8.

**A.9 Consultation Mechanisms**

Consultation plays a central role in the development of our programme; this is so that we can provide services that meet the needs of the community. The Strategy is an opportunity to seek the views of people who use the current services, those who may require services in the future and agencies that provide those services.

We would like your views on this document; in particular we would like to know:

- *Is the Lewisham Supporting People Vision the right one*
- *Do you agree with our Priorities for 2003/04*
- *Have we left out any services in the Strategy*
- *Are there other area of unmet need in Lewisham*
- *How we can ensure that all interested parties are included in the consultation process.*
- *Is the Review Process robust*
- *How can we involve Service users in the Review process?*

The Shadow Strategy will be amended once the series of consultation events has been finalised at the end of August.

Please respond to Fiona Kirkman, Supporting People Project Manager at Honor Oak Housing Office, 29 Spalding House, Turnham Road, Brockley, London, SE4 2HT. [Fiona.Kirkman@Lewisham.gov.uk](mailto:Fiona.Kirkman@Lewisham.gov.uk)
Part B

B1. The Supporting People Vision in Lewisham

Our Vision
“To improve the quality of life of vulnerable people through planned high quality housing and support services, which meet local needs”.

To achieve this vision we have the following objectives:

- Work together with service users and support agencies, reaching agreement on the overall direction of the five-year Supporting People Strategy and Annual Plans.
- Ensure that hard to reach and marginalised groups are included.
- Ensure that black and minority ethnic issues are integral to our planning, commissioning and consultation process.
- Deliver services, which enhance equality of opportunity, challenge unfairness and improve the diversity of service provision.
- Offer a range of support services, which promote independence, choice and flexibility and which are part of a range of preventative strategies.
- Promote services that are responsive, enhance diversity and are accessible to all.
- Provide support services, which represent “best value” rather than best price.
- Work with neighbouring boroughs to promote best practice and where local needs are identified jointly commission cost effective high quality services.
- To deliver continuous improvements and supported services that seek to meet the people’s needs and preferences now and in the future.
- The Supporting People Strategy will link into other local strategies and fit with the agendas of all partners including Health, Probation, Social Care and Health and Housing.

We will be measuring three output areas.

Partnerships
- Development of new cross-borough initiatives where the need has been identified
- Participation of all Partners at the range of Supporting People fora.
- Clear links with other Preventative Strategies

Service Users
- Remodelling services to reflect local need, as identified in the shadow strategy.
- More choice for service users and independence for those individuals who will benefit form it.

Quality Services
- Monitoring the quality of support services and working with providers to improve services.
Developing meaningful costs of delivering support, benchmarking this support.

Is this the right Vision for Lewisham?

B.2 The Planning Approach

The Supporting People Programme in Lewisham has been developed in Partnership with Probation, Health and the voluntary sector. The planning structures to ensure the delivery of Supporting People were set in place early on; it meets the requirements of the ODPM Supporting People Programme and Lewisham’s Project Management Structures. It is made up of:

Supporting People Programme Board

The Programme Board provides overall direction and strategic input to the Supporting People Programme. The Board will ensure that resources are available to meet the requirements of individual projects within the programme. The board will evolve into the Commissioning Body. The new responsibilities of the Commissioning Body are outlined below in table B1. The Project Board meets every 6 weeks and reports directly to Executive Management Team.

The Terms of Reference for the Programme Board are:

- To define and provide overall direction and strategic input to the Supporting People Programme of work, arising out of the changes in legislation and funding proposals for supported housing.
- To ensure that the resources are available to meet the requirements of individual projects within the programme.
- To review and co-ordinate the project plans and agree changes.
- To ensure that the programme is delivered to time and within budget.
- To receive and review reports, internal and external and other information related to Supporting People.
- To sign off key project documents, including monitoring and review and to ensure that the three key agencies, Housing, Social Services and Probation, reach agreement as required to access funding.
- To ensure commitment from departments and their staff and other project stakeholders to the successful implementation of Supporting People in Lewisham.
- To take overall responsibility for communication and PR.
- To arbitrate and resolve disputes and internal pressures - if unresolved, to co-ordinate separate meetings as relevant.
- To provide corporate support to the Supporting People Project Team.
- To identify opportunities and make recommendations as to the options for involvement of other local organisations and agencies.
- To ensure that the programme of works will deliver the requirements of Best Value.
- To report to EMT on an eight-weekly cycle and to other forums (e.g. the Partnership Board) as appropriate.
To link the programme to the wider political agenda, including Modernising Local Government, Social Inclusion, Rough Sleepers Unit, Crime & Disorder Act, Leaving Care Bill, Health Act 1999, etc.

Membership is made up of:

Social Care & Health
Lesley Moore – Head of Adult Services.
Caroline Mikardo – Head of Resources

Regeneration
Ashley Hook -Acting Head of Housing (Chair)
Russell Hudson -Acting Supported Housing & Homelessness Manager

Probation
Kevin Barry  (Assistant Chief Probation Officer)

Health
Dee Carlin – Lewisham PCT

Resources
Julie Bennet – Head of Budgets and Accounts
Mick Lear - Benefits Manager
Stephanie Fleck - Lawyer

Supporting People Team
Fiona Kirkman- Supporting People Manager

Commissioning Body
The key responsibilities of the Commissioning Body will be:

Strategy
- To agree priorities for commissioning new supported housing and support services in the light of emerging jointly agreed strategic objectives
- To agree the Supporting People Strategy and Annual Plan and submit to local authority members for approval
- To consider any changes to the strategy proposed by elected members and decide how this should be reflected in the Strategy.

Resources
- To identify complementary and or additional resources
- To endorse the Supporting People budget annually and allocate resources, or make recommendations to do so, depending on the source of funding
- To ensure the Administering Authority has the necessary resources, to fulfil the annual plan by monitoring expenditure throughout the year.
- To put in place protocols for informing the ODPM of any substantive changes or reduction or withdrawal of services where the Administering Authority does not have the necessary resources to continue the service
- To predict the budget requirements for services in future years
- To delegate to the supporting People team the responsibility for commissioning Supporting People services in line with both the Strategy and Annual Plan
Protocol
The Commissioning Body will make decisions by general consensus and only vote where absolutely necessary. The Commissioning Body may also invite other to attend meetings as appropriate but they will have no decision-making powers. The Chair will be elected annually by the Commissioning Body from membership of the Group.

Frequency
The Commissioning Body will meet quarterly, aiming to align meetings with bidding cycles for funding and other commissioning cycles. There may be a need for Commissioning Body members to contribute views and make written comments on specific proposals between meetings, facilitate progress on specific projects and resolve blockages and problems.

Membership
Lesley Moore - Head of Adult Services, Social Care and Health.
Ashley Hook - Head of Housing, Regeneration.
Jill Locket - Director of Commissioning, Lewisham PCT.
Kevin Barry - Assistant Chief Probation Officer, NPD.

Programme Group (Shadow Core Strategy)
The shadow Core Strategy group is responsible for identifying the strategic priorities and commissioning opportunities in each sector of supporting people. It will prepare and propose the Supporting People Strategy for the Commissioning Body. This will be done in light of the needs mapping, supply analysis and outcome of the inclusive forum discussions.

Additional advice and input from providers will be sought at appropriate stages. The Shadow Core Strategy group will meet every 6 weeks.

Terms of Reference
❖ To ensure that users and providers are consulted regarding the provision of supported services, including the views of BME groups.
❖ To take overall responsibility for producing a strategic plan for supported services within the borough and which details cross-borough arrangements.
❖ To ensure that the Strategic Plan incorporates local and national strategies.
❖ To liaise and gain agreement for the strategic plan with Health, Probation and Housing Corporation.
❖ To ensure that resources are available to meet the strategic plan.
❖ To approve the review arrangements for schemes and publish in the Strategic Plan.
❖ To ensure that reviews are undertaken and comply with the standards set in the strategic plan.
❖ To ensure service standards complying the national framework and ODPM requirements.
❖ To ensure contractual arrangements are agreed and implemented with providers.
❖ To ensure that all information needed by the ODPM is collected and passed on.
❖ To ensure that supported services comply with Best Value and other government requirements.
To ensure that the validation of scheme is undertaken and complies with DETR requirements.

Membership is made up of

Social Care & Health
Joe Loh - Group Manager Care Services
Michelle Oliver - Sheltered Housing Service Unit Manager
Paul James - Mental Health Service Unit Manager
Liz Evans - Joint Commissioning Manager
Lola Triumph - DAT Co-ordinator
Pauline Moodie - SUM Commissioning Unit
Lynn Burton - PCG Support Officer
Sharon Long - Teenage Pregnancy Project Worker

Regeneration
Russell Hudson – Head of Supported Housing and Homelessness
Louise Spires – Partnership Officer
Karen Dearing – RSL Partnership Manager
Colvin Fraser - Supported Housing Manager
Peter Jones - Advice Services Manager
Morna London - Finance & Development Manager
Akin Adepoju - Equalities Manager
Yasmin Ahmed – Equalities
Barbara Wright – Manager Private Sector Unit

Voluntary Sector Representative
Sue Harbour – Carr-Gomm

Community Safety Unit
Steve Harrison – Community Safety Officer
Anne McDermott – YOT Manager
Sue Harbour (Carr Gomm)

South London & Maudsley Trust
John Cooley
Jonathon Beeder

Housing Corporation
Nicole De Rosario - Area Manager

Probation
Kevin Barry – Assistant Chief Probation Officer
Martin Tully – Housing Development Manager

Supporting People Team
Fiona Kirkman – Supporting People Manager

Project Teams
Project teams have been established to work on specific areas within the Supporting People programme. Some teams will exist for the life of the programme, e.g. the IT and Charging team while others will cease to exist once the work is finished.
Membership of the teams is fluid and the appropriate individuals are involved as and when required.

**Service User Involvement**

The user involvement Strategy is based on the belief that effective user involvement has numerous benefits for users, providers and the Supporting People Programme. Key aims of the strategy are:

- To establish a user involvement steering group.
- Identify existing appropriate user involvement structures and gaps.
- Identify how to ‘tap’ into appropriate existing structures.
- Develop new involvement mechanisms where required.
- Establish a formal structure to involve users.
- Address diversity and equality issues: focus on hard to reach and marginalised groups; involve BME users and ensure that the full range of service users are fairly represented.
- Review and monitor progress of the programme

The User involvement Steering group has proposed the following action plan.

<table>
<thead>
<tr>
<th>Action</th>
<th>Date</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set up focus groups for each client group</td>
<td>September 02</td>
<td>To be identified</td>
</tr>
<tr>
<td>Consult with users on strategy priorities &amp; ongoing programme</td>
<td>27th August 02</td>
<td>Provider reps</td>
</tr>
<tr>
<td>Agree user involvement strategy</td>
<td>29th September 02</td>
<td>All</td>
</tr>
</tbody>
</table>

**Provider Involvement**

Providers have been involved at every stage of the development of the Strategy, they have been involved as representatives of the Strategy Group, and there is an open invitation to providers to attend. The All Inclusive Forum has been a useful channel of communication, together with attendance at Lewisham’ Housing Association Group. Several Small Provider Forums have been held jointly with Lambeth and Southwark, these are always very well attended. The Supporting People Team has also been linking into existing meetings, such as the DAT and the Teenage Pregnancy Strategy Group.

Where gaps in the consultation mechanism exist then one-off meetings have been held, such as for Sheltered Housing Providers and a meeting with Black and Minority Ethnic Providers. Providers were also invited to a conference in March 2002 held at Glaziers Hall in SE1; over 100 Providers attended this event.

**The All-Inclusive Forum**

The Forum meets at least four times a year, it acts as a link to users, providers and the local authority with an interest in supported housing and homelessness.

The Forum has been used to gain feedback on strategies affecting supported housing and homelessness. The Forum is made up of registered social landlords, providers in the public and private sector, managing agents and not for profit organisations. The Strategy document will be taken to the All-inclusive Forum and the small provider meeting before being finalised in September.
Arrangements to formalise the structure from Implementation Board to Commissioning Body.
The Supporting People Programme reports to Mayor and Cabinet. The Implementation Board has been operating as a shadow Commissioning Body, the process of formalising the change will be done by reporting through Mayors Board & Cabinet.

Monitoring of the Supporting People Programme in Lewisham
The objectives and outputs will be monitored via the Project Plan through Lewisham’s Project Management structure, The Supporting People Programme Board reports to Executive Management Team, Project Review Group, Corporate Project Board, Mayors Board and Cabinet.

In addition there will be continued monitoring through, user groups, The Supported Housing Forum and user feedback via provider mechanisms will also be a valuable measure of our progress.

B3. Supply Analysis
Mapping the supply of supported accommodation has been at the core of the development of the Strategy. It has given us a comprehensive source of information about the provision of housing related support in the borough. We now have detailed information, which includes:

- Location of the service e.g. Ward detail
- The name of the service provider and the landlord if not the same
- The type of service, e.g. accommodation based or floating
- Who the service is for e.g. young people, people with physical disabilities.
- The type of support offered, e.g. medium or low
- How the service is funded

The first stage of the mapping process was to identify the providers in the borough who offered housing related support, we obtained this initial information from a range of sources, this included hostel directories, supported housing guides, information from the Housing Corporation, National Housing Federation and Lewisham’s Housing Benefit section. This information was built upon by meeting with commissioning managers, attending service groups and holding meetings with providers. The SP1/2 form, which was sent out in the summer of 2001, captured initial information and the SP3 form, which was sent to providers in March 2002, further, developed our knowledge of the sector.

Throughout this exercise we have been keen to ensure that all support services have been identified, this includes ‘Pipeline services’, which will come into management after April 2003. The team has therefore taken every opportunity to work with all our partners to capture information on new developments.

The tables in Annex X outline the size and extent of the Supporting People Sector in Lewisham.

Some key aspects of the supply mapping are:
Have we included all the services in the borough?

B. 4 Comparison To ODPM supply profile

The ODPM have provided Lewisham with a supply profile of support schemes, this includes typical provision rates which have been calculated for each authority. This is to enable a comparison with the actual supply of services. The tables can be found in Appendix 1.

The comparison with the ODPM supply profile is made by client group in Section B.5.

5 Needs Profiling

This section examines the need for housing related support in Lewisham; we have included recent surveys, research and information from a range of sources such as the Homeless Persons Unit, Commissioning Managers, Probation Officers and Health agencies. This information will be expanded upon over the next twelve months so that we can plan and deliver services in line with local need.

Lewisham is the third largest borough in terms of both its population and it’s area. It has a large and growing racially and ethnically diverse population. Estimates provided by the GLA/LRC on ethnic group projections indicate that the current population is 246,000 and that ethnic minorities represent 32% of the population. Broken down as follows.

<table>
<thead>
<tr>
<th>Ethnic Group</th>
<th>Population</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>168,100</td>
<td>68.2%</td>
</tr>
<tr>
<td>Black Caribbean</td>
<td>29,900</td>
<td>12.1%</td>
</tr>
<tr>
<td>Black African</td>
<td>17,800</td>
<td>7.2%</td>
</tr>
<tr>
<td>Black Other</td>
<td>10,100</td>
<td>4.1%</td>
</tr>
<tr>
<td>Indian</td>
<td>3,000</td>
<td>1.2%</td>
</tr>
<tr>
<td>Pakistani</td>
<td>1,500</td>
<td>0.6%</td>
</tr>
<tr>
<td>Bangladeshi</td>
<td>1,100</td>
<td>0.4%</td>
</tr>
<tr>
<td>Chinese</td>
<td>2,900</td>
<td>1.2%</td>
</tr>
<tr>
<td>Other Asian</td>
<td>3,900</td>
<td>1.6%</td>
</tr>
<tr>
<td>Other</td>
<td>8,100</td>
<td>3.3%</td>
</tr>
<tr>
<td>total</td>
<td>246,400</td>
<td></td>
</tr>
</tbody>
</table>

(Source: GLA/LRC Ethnic Group Projections 1999 adjusted to match ONS estimates of total population in 2001)

Although Turkish residents were not identified seperately in the 1991 Census, they are thought to be in excess of 2% of the population, and may be between 5% and 10%.

Approximately 16% of Lewisham’s population are aged 60 years or over. This figure is about average for Greater London, with boroughs having percentages in the range 13% - 25%.

The index of multiple deprivation published by the DETR in 2000 also reports that 16% of the population in Lewisham live in the top 10% most deprived wards in
England. The DSS New earnings Survey indicates that the average earnings for Lewisham, at £21,570 per annum is well below the London average of £26,701.

The council’s housing stock is currently 31,378. It is amongst the oldest in London, with over a third built before 1944. Many of the homes built after 1964 are high-rise, high-density homes that are unpopular with residents, and difficult and expensive to maintain. There are around 8,139 RSL properties in Lewisham, of which nearly half were built before 1919 and a further 43% built since 1943.

Only 53% of housing stock in Lewisham is owner occupied – well below the national average of 68%. Lewisham is experiencing above average levels of house price inflation. Since 1995 the average house price has increased form £64,000 to £155,000.

Lewisham’s population is distributed unevenly with a greater proportion of people in the younger age groups. Males outnumber females up to 19 years with males outnumbering males thereafter. In terms of past and projected change Lewisham’s population increased by 3.4 % between 1991 and 2002 and will probably increase by another 2.4% by 2011.

Percentage declines in the white, black Caribbean and Indian populations are projected between now and 2011. Conversely Black African and black’ other’ populations are set to increase by several thousands. There will also be an increase in the Pakistani and Bangladeshi populations although these will be relatively small given the small size of the communities currently resident in Lewisham.

**Older People with Support Needs (including older people with mental health problems or dementia and frail elderly)**

In 1998 the resident Lewisham population of people aged 65+ was 30,050 and this represented approximately 12.4% of the population. The 65+ population is predicted to gradually decrease. In 2011 it is estimated there will be approximately 24,803 people 65+ living in the borough. This figure represents an approximate 18% decrease in the 65+ population.

The numbers of Black and Minority Ethnic Older people 65+ in 1998 was estimated to be approximately 3,070. This number is expected to increase to 4,900 by 2011. The largest increase is in the African Caribbean population increasing from 2112 aged 65+ in 1998 to a projected 3,398 aged 65+ in 2011. By 2011 20% of Lewisham’s population will be from black and minority ethnic groups that is one in four of the over 65 population.

Predictions of a decrease in the older population have led to concerns that there may follow a reduction in resources due to the assumption that there will be less demand for health and social services. This cannot be assumed as many serious causes of ill health such as stroke occur at younger ages in Lewisham than in England as a whole. People from black and minority ethnic groups are also more likely to experience strokes at a younger age. For example in the general population the average age for the first stroke is 72 years but for people from black and minority groups the average is 60 years.
The wards with the highest concentration of older people are not the most deprived wards in the borough, and not the same as the wards where large numbers of older black and minority populations tend to live. The black and ethnic minority populations tend to live in the most deprived wards. This has implications for the location of future services as the predicted demographic changes, particularly among black and minority groups occur over the next ten years.

The percentage of older people living alone is also likely to have an impact on the structure of services locally. Lewisham’s pattern is similar to the national picture, more women living alone than men and an increasing number of older people living alone with increasing age. The ability to live independently is often affected by the presence of a carer and there are 23,540 carers living in Lewisham. Many of these carers are older people themselves. Over a third of informal care for people over the age of 65 is provided by older people. It is estimated that there are over 3,560 carers aged over 65 in Lewisham.

Older people who experience mental ill health exact a large social and economic toll on patients, their families and carers and statutory and voluntary agencies. Dementia and depression are particularly common in older people.

The prevalence and incidence of dementia increases with age. Moderate to severe dementia is ten times more common in the very old, over the age 85+ compared to people aged 65-74. In 1998 there were a total of 2392 people living with Dementia, this is expected to drop in 2011 to 1981.

Under detection of mental illness in older people is widespread due to the nature of the symptoms and the fact that many older people live alone. Depression in older people aged 65 and over is especially under diagnosed. Depression is the commonest psychiatric illness among older people. It is often associated with a significant increase in dependence and need for supportive care independently of disability.

The Overarching strategy for older people in Lewisham is to promote independence and increase the number of older people living in the community with the assistance of support services where appropriate.

‘Sheltered Housing’, A Working Document 2001, produced by Lewisham’s Older Women’s Network, makes a number of recommendations for change within Lewisham’s Sheltered Housing Schemes. A key recommendation is that sheltered housing schemes would benefit from frequent or longer visits from their Sheltered Housing Officer. Improving awareness of the needs of tenants from ethnic minority groups and tenants with disabilities.

The Care Homes 2000 Project to close all the Council’s care homes and move people into independent sector provision was a success. The funding was re-directed into paying increased fees to accredited independent sector homes, the development of two 40 place very sheltered schemes and the re-provision of four day centres.

Good Progress in Lewisham has been made in progressing the National Service Framework, including the development of a Corporate ‘Policy for an ageing population’. The Best Value Review of homecare was undertaken to target the work...
of the internal provider and work is now underway to implement the recommendations. In addition there has been some successful work with the Hospital on capacity planning and tackling delayed discharge.

Investment in preventative services, such as the Falls Clinic at Lewisham Hospital, a handyperson scheme and services for deaf-blind people using promoting independence grant grant funding have now been set up.

The main findings indicate that:
- The population is projected to decrease by 14% by 2011.
- The proportion of older people from Black and minority populations is predicted to increase.
- Older people live alone in Lewisham than in the rest of England and Wales, this has implications for the delivery of services.
- Higher rates than average of hypertension, stroke and diabetes occur in black and minority ethnic communities and are expected to increase the need for health and social care services as the population ages. (Need services accessible for these populations).

**Comparison with the ODPM Supply Range**

The table below illustrates the actual supply of supported accommodation in Lewisham, identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM Accommodation</th>
<th>ODPM Floating</th>
<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frail elderly</td>
<td>Included below</td>
<td>Included below</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Older people with support</td>
<td>Between 1,860 and 3,418</td>
<td>9-159</td>
<td>1085</td>
<td>105</td>
</tr>
<tr>
<td>needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dementia</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>All</td>
<td>Between 1,860 and 3,418</td>
<td>9-159</td>
<td>1085</td>
<td>105</td>
</tr>
</tbody>
</table>

**Note**
- 4.3% are in registered schemes
- 68% are SP funded

The comparison shows that Lewisham has a lower number of schemes for older people than the ODPM benchmark. However, the number of floating support services falls within the range although this is not currently meeting the level of need across a range of tenures. Although the number is lower there are no plans to
increase the overall number of units as the population of over 65s is expected to decrease by 2011. The priorities for older people are outlined below.

The strategic Priorities for Older people are:

- Re-locating support services, the variation in where older people live and how this is predicted to change will need to be considered in developing future services.

- Older People with mental health problems need access to integrated mental health services, which include early and effect diagnosis, treatment and support for themselves and their carers.

- Additional support services for older people presenting for sheltered housing with alcohol problems and or likely to have other problems such as self-neglect.

- Increasing the level of mental health support in a range of tenures

- Offering a range of services to older people in Sheltered housing

- Extending support to older people in the community in all forms of tenure.

People With Mental Health Problems

In common with other inner-London boroughs Lewisham has a set of demographic characteristics which are well recognised as contributing to high levels of psychiatric morbidity. These include:

- High levels of unemployment and social deprivation
- Areas of poor housing stock
- High levels of homelessness
- High numbers of lone parents
- High proportion of people from black and ethnic minority communities
- Increasing numbers of refugees and asylum seekers

In combination these factors result in Lewisham as a whole scoring a Mental Illness Needs index rating of around 13% above national average (North Lewisham being 21% above national average). This translates in practice to pressures across the whole spectrum of secondary mental health services, including in-patient, community teams and accommodation sectors. It is important to emphasise that the accommodation operates as just one part of a wider service system and shortfalls in this area generate pressures elsewhere (particularly on increased admissions to and delayed discharges from in-patient services).

In Lewisham the main framework for mental health accommodation is the Joint Mental Health Accommodation Strategy, last revised October 2000. This has been produced following lengthy consultation between South London and Maudsley NHS Trust, Lewisham Social Care and Health, The Supported Housing Unit and voluntary sector providers. The Strategy, which is currently under review, draws together available information on the supply of services, identifies gaps in provision and suggests priorities for new developments.
One key theme identified is the need to enhance the capacity of existing independent sector providers to work successfully with users with higher support needs.

Nationally the main policy driver impacting on mental health services is the National Services Framework for Mental Health, published in 1999. The Framework stipulates seven key standards to be met with regard to service provision and access to mental health promotion. There is surprising little detail in relation to accommodation provision, with the exception of partnership schemes with RSLs and 24 hour staffed accommodation schemes.

The NHS Plan of 2000 also failed to include references to supported accommodation other than for recommendations for providing step-down from medium secure services.

Predicting the need for housing related support services from population numbers and demographic weighting remains an inexact science. Several models have been developed over the past decade, which generate alternative visions based on weighted population groups. These relate to 24-hour nursed care, 24-hour high support services and medium/high support units. The non-nursed staffed data is summarised below; some caution is required when considering this and needs to be used in conjunction with evidence form clinicians, service users and other local agencies.

<table>
<thead>
<tr>
<th>Actual</th>
<th>Expected</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>109</td>
<td>192</td>
<td>-83</td>
</tr>
</tbody>
</table>

PriSM Model (1996) 24-hour non-nurse staffed places/Lewisham borough

<table>
<thead>
<tr>
<th>Actual</th>
<th>Expected</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>90</td>
<td>194</td>
<td>-104</td>
</tr>
</tbody>
</table>

Lambeth, Southwark & Lewisham Health Authority Balance of Care Review (1999) Medium/high support places/ Lewisham borough

**Comparison with the ODPM Supply Range**

The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Accommodation</td>
<td>Floating</td>
</tr>
<tr>
<td>Mental Health</td>
<td>48-291</td>
<td>38-220</td>
</tr>
<tr>
<td>Mentally disordered offenders</td>
<td>Included in offenders profile</td>
<td></td>
</tr>
<tr>
<td>Older people with mental health problems/de</td>
<td>Included in older people with support needs</td>
<td>0</td>
</tr>
<tr>
<td>mentia</td>
<td>Total</td>
<td>48 – 291</td>
</tr>
<tr>
<td>--------</td>
<td>-------</td>
<td>----------</td>
</tr>
</tbody>
</table>

**Note:**
- 4.5% are in schemes fully registered as a residential care home.
- 60% of services are SP funded.

The comparison shows that there are more services for people with mental health problems than the ODPM benchmark indicates. The ODPM profile is on the low side and when looking at neighbouring boroughs with similar levels of people with mental health problems the profile is similar to the actual number of services in Lewisham. Lewisham experiences a high demand for support services and high levels of need this has been outlined above.

**The Strategic Priorities for people with mental health problems are:**

- Focusing on improving the quality of the provision in the borough
- Developing services to meet changing aspirations or needs, including those with higher support needs. Ensuring the physical environment promotes independence.
- Building capacity within existing services to meet the identified gaps in provision.
- Developing dispersed models of accommodation with outreach support to meet the needs of younger service users.
- Support Schemes for women with mental health problems who have dependent children. Possibly a cross borough scheme.
- A need for accommodation based support schemes for black and ethnic minority service users, who represent a substantial proportion of the population using secondary mental health services.
- A significant need for higher support services catering for those with more challenging behaviours.
- New services are required for people over the age of 65, many physically frail who require 24-hour support services.
- The over supply of registered facilities providing mediocre levels of care medium to long term, with insufficient focus on rehabilitative practice models will need to be addressed.

**People with Learning Disabilities**

The learning disability population is likely to continue to increase over the coming years as a result of both the increased life expectancy of people with learning disabilities and the improved medical technology which is resulting in an increase in survival of babies with severe disabilities. Whilst improved screening techniques are leading to a slight reduction in the percentage of births of children with conditions
such as Downs Syndrome, this is offset by other risk factors such as the increasing age of mothers at birth.

The Government’s White Paper ‘Valuing People: A New strategy for Learning Disability for the 21st Century sets out the proposals for improving the life chances of all children, young people, adults and older people with learning disabilities and their families. Providing choice in where people with learning disabilities live is a key part of the strategy, this includes options for small-scale ordinary housing, supported living, and village and international communities as well as residential care. The strategic priorities for people with learning disabilities have been informed by this objective.

It is estimated that one in every fifty people has some kind of learning disability in Lewisham. In 15% of cases the learning disability is severe. Using these figures there are approximately 720 people with severe learning disabilities in Lewisham.

With the exception of a period in the late 60s and early 70s, when the rate rose significantly, the incidence of learning disability has remained stable. Using the demographic data available it is projected that:

- An overall increase in the number of adults with learning disabilities of about 2% per annum.
- A 5% per annum increase in numbers requiring residential care.
- 12 people per year will be transferring from children’s to adults services of which 4/5 will have challenging behaviour and 6/7 will have moderate or severe multiple disabilities.
- There will be an increasing need for services for people from black and ethnic minority populations reflecting the diversity of the population of Lewisham.
- The consequences of the changes in demographics are that there is a growth in the numbers of people needing Community Care support and those with complex health and social care needs. (source Strategy for adults with a Learning Disability – Pub: LSLHA/Lewisham SC&H/Lewisham Partnership- 1997)

The numbers of young people leaving school and moving into adulthood is also reflected in the study undertaken by Education and Leisure Department in May 2000. (School Organisation Plan for L.B Lewisham: Pub: Education and Culture Department – May 2000). The study shows that there is a rise in the birth rate in Lewisham from 1977 to a high of just over 4000 in 1991 when it slowly reduces. This means that the numbers of young people turning 18 will rise year on year until 2010. Using this as a guide it is possible to project a higher growth in the number of adults with learning disabilities until 2010 when a small fall may begin. It should be noted that these figures are reliant on the correctly predicted number of females in the borough of childbearing age.

Currently there are about 600 adults with learning disabilities receiving some type of social care service. The data on current usage is only a snapshot of what is happening at any one time as users enter and leave the service. This is broken down as follows:

<table>
<thead>
<tr>
<th>Type of care</th>
<th>Number of users</th>
</tr>
</thead>
</table>

C:\documents and settings\webadmin\desktop\myr_cab_091102_ag.doc
Domiciliary Community Support
Users living in family home receiving support to access community activities. 11

Domiciliary Family Home
Users receiving support in their own homes, which they share with family members/unpaid carers. 14

Outreach non 24 hour independent living;
Users who live in their own home without family/unpaid carers who receive support in their own homes for less than 24 hours a day. 39

24 hour supported living
Users who live in their own homes (with their own tenancies) who receive 24 hours a day support: 111

Registered Nursing homes
Registered Residential Homes: in borough 97
Registered Residential Homes: out of borough 129
Total 403

Comparison with the ODPM Supply Range

The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with learning disabilities</td>
<td>39-207 2-13</td>
<td>382 114</td>
</tr>
<tr>
<td>Total</td>
<td>39-207 2-13</td>
<td>382 114</td>
</tr>
</tbody>
</table>

Note:
- 19.4% are fully registered as a residential care home.
- 26.7% are currently SP funded.

The actual supply of specialist units of accommodation and floating support is higher than the benchmark from the ODPM. Currently a small number are SP funded and a higher than average number are registered. The demand for supported schemes for people with learning disabilities is outlined above.

**Current strategic priorities for this group are:**

- Shortage of supported housing for people with challenging needs
- Supported housing which has been adapted for people with mobility needs
Schemes, which offer the potential for independence using the Keying model (dispersed units with keyworker support).

A range of support options, which includes Shared Ownership and home ownership, models.

**People with a Physical or Sensory Disability**

At the 1991 Census, over 12% of Lewisham residents described themselves as having a Limiting Longstanding Illness, this is likely to be an under estimation. The 1999 Labour Force Survey in 1999 found that 12% of those aged 20-29 had a long term disability or health problem and this increased to 31% in those aged 50-59.

The receipt of DLA is viewed as good indicator of the rate of disability in those aged 65 and under and also indicates the current and future demand for Community Care services. At the end of May 1999, 3,780 (4.9% of those aged 16-59) of Lewisham residents were in receipt of DLA.

The Receipt of Attendance Allowance is also a good gauge of levels of disability among older people. At the end of May 1999, 7,380 (9.6% of those aged 60+) were in receipt of Attendance allowance. Both these figures are higher than in London as a whole.

**People with Sensory Disabilities**

The Social Care and Health Sensory Team case list (February 2002) revealed the following information

| People who are deaf without speech under 65 | 175 | Over 65 | 27 |
| People who are deaf with speech under 65 | 237 | Over 65 | 82 |
| Hearing impaired people under 65 | 239 | Over 65 | 1,068 |
| **Total** | **651** | **1177** | **1828** |

The need to develop services for particular groups of the deaf community has been highlighted. The needs of profoundly deaf people older people are not currently being met as sheltered services seldom employ staff who can sign. Older people who are profoundly deaf or hearing-impaired can therefore experience higher levels of isolation in the community. There is also a shortage of support services for profoundly deaf people who may also have a mental health problem or a learning disability. This contributes to people being placed out of borough.

Younger people who may also be profoundly deaf also face a limited choice in terms of supported accommodation. Although many young people now prefer to live independently in the community there is a need for those young people who may require additional support with mental health problems, alcohol and other issues.
Currently there are 659 people registered as blind, another 528 are registered as partially blind. In addition, there are a significant number of people who experience some form of visual impairment but are not registered. A recent report by the ‘Improving Lives coalition’ reported that out of those people eligible for registration two-thirds were not.

Many people who experience visual impairment live independently in their own home or with family. However, it is important to note that fewer blind or partially sighted people are employed (approximately 20%), there is therefore a greater need for social housing. The need for floating support services especially for older people and for those who are moving into new accommodation has been recognised.

Comparison with the ODPM Supply Range
The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

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<th>ODPM Floating</th>
<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with disabilities</td>
<td>14-206</td>
<td>1-25</td>
<td>18</td>
<td>0</td>
</tr>
</tbody>
</table>

Note:
- 100% are not registered
- 50% will receive SP funding.

The supply of supported accommodation for people with disabilities is only just within the range of the ODPM profile. There are no floating support services for people with a physical or sensory disability.

**Strategic Priorities for people with physical and sensory disabilities are:**

- Developing accommodation for people who have been discharged from hospital or rehabilitation and for those who require temporary accommodation.
- To work within the wider regeneration initiatives, look towards providing floating support in general needs housing.
- Developing services, which cater for older people who may be profoundly deaf.
- Developing floating support services, which recognise the needs of people with sensory disabilities.

**Single Homeless with Support Needs**

Homelessness is caused by a number of factors, some of which relate to the wider state of the economy and the housing market and other which are personal to the individual or the family.

The most common reason for priority homelessness applicants losing their “last settled home” is because parents, friends or relatives had asked them to leave, this accounted for 55% of all cases in 2001/02 as a whole. Conflict with family or friends is frequently a trigger and a direct cause of homelessness, particularly for young
people. Causes of family conflict include general rows with parents, disruptive behaviour and teenage pregnancy.

A further 19% had become homeless as a result of losing accommodation in the private and social housing sectors. Landlords deciding not to renew assured shorthold tenancies are the biggest cause of loss of accommodation.

Relationship breakdown is including domestic violence is another significant cause of homelessness and accounts for 11% of new homeless applications. These three main causes of homelessness in Lewisham accounted for 86% of all applications in 2001/2002.

Disadvantaged groups are over represented amongst users of the homelessness service in Lewisham. Members of BME groups make up 61% of all applications to the Homeless Persons Unit. For many homeless applicants English is not a first language. Women are also particularly over represented and many of the client group are sole carers of children or have been the victim of domestic violence. Over 86% of homeless households receives some kind of welfare benefit and poverty is a key factor within many households.

In 2000/2001 Lewisham’s HPU received a total of 2,376 approaches and accepted a full rehousing duty to 807 households. Projections based on year to date figures suggest that for 2001/2002, approaches will be in the region of 2,360 and approximately 904 acceptances. Second quarter DTLR figures (April to June 2001) showed an inner London average of 3.0 per thousand households, with figures ranging from 1.6 to 4.6. At 2.4 acceptances per 1,000 households, Lewisham is amongst the better performing authorities.

During the past three years, there has been an upward trend in the number of households accepted as unintentionally homeless and in priority need. Last year in Lewisham this figure rose by 18%. The numbers living in temporary accommodation has also increased.

The new Homelessness Act, introduces measures to widen the groups of vulnerable homeless people for whom local authorities should secure housing, this will further increase the levels of statutory homelessness and use of temporary accommodation. Therefore, at least in the short term, the level of homelessness is expected to increase.

Lewisham has three direct access hostels and it has been reported that there has been an increase in the numbers of referrals to hostels and an increase in the numbers of those who have mental health and substance misuse problems.

The Supported Housing and Homelessness Unit manages 22 ‘in house’ supported housing schemes for people with a range of needs including learning disabilities, mental health, alcohol and drug dependency. This service is about to undergo a review based on ‘Best Value’ principles to ensure that the services are still appropriate for the needs of the clients. In addition, there are a number of partnerships with RSL’s where floating support is provided e.g. to young people and those at risk of offending. Patchwork currently provide a floating support service for 16/17 year olds and young people leaving care and working with Greenwich and
Lewisham, Nightstop who provide emergency accommodation for single homeless people by making placements in volunteers homes

In 2001/01 86 16/17 year olds made homeless applications, of these 51 were found to be vulnerable and in priority need. Duties to young people will increase under the new Housing Act.

Young people account for 3% of all homelessness applications, but many young people have multiple problems linked to their homelessness. Facilitating a young person to return to a safe family environment is more likely to promote stability and prevent long term homelessness. When young people are rehoused, specialist resettlement and tenancy support is often required to help in their development of independent living skills.

Comparison with the ODPM Supply Range
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<tr>
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<th>ODPM</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Client Group</strong></td>
<td>Accommodation</td>
<td>Floating</td>
</tr>
<tr>
<td>Single homeless with support needs</td>
<td>3-305</td>
<td>6-125</td>
</tr>
</tbody>
</table>

Note:
- 97.4 are not registered
- 50% are entirely SP funded, 28.3% are mixed funded and 3.3% have no SP funding.

The supply of supported accommodation is higher than the ODPM profile. The reasons for this are outlined above; the supply of floating support services falls just within the range.

*Many of the priorities for this group are already contained within priorities for other client groups, additional strategic priorities identified are:*

- A need for more ‘wet’ hostels, women only hostels and mixed sex hostels for people with alcohol problems.

- An increase in provision for people with drug problems, especially post rehabilitation.

- Developing floating support for young people in temporary accommodation to meet the new Housing Act requirement to house young people of 16 and 17 years.

- Support Services for women who are at risk of domestic violence, who have traditionally been excluded from schemes because they have older male children,
and services for women with mental health problems. A potential cross-borough scheme.

- Additional support services for teenage parents.

Homeless Families with Support Needs

During the previous twelve months over 60% of homelessness applications in Lewisham were from households with children. Lone parents are over represented in this group. Clearly this group experiences a multitude of issues, particularly around interrupting the children’s education and accessing primary health services.

Evidence seems to suggest that additional services are required for homeless families or those experiencing difficulties in their tenancies as part of a wider agenda of prevention and building sustainable communities.

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<tr>
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<th>ODPM Floating</th>
<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homeless families with support needs</td>
<td>27-33</td>
<td>0-14</td>
<td>8</td>
<td>0</td>
</tr>
</tbody>
</table>

Note: 100% SP funded

The actual supply of accommodation based and floating services are below the ODMP benchmark. The need for a floating support service for homeless families has been recognised.

Strategic Priorities for homeless families with support needs

- Developing a floating support service, with focus on prevention to assist families who have recently been rehoused or are at risk of losing their tenancy

People with Drug and alcohol problems

Lewisham has evident drug and alcohol issues. This is most easily evidenced by anecdotal information and observation at street level. Specific levels of overall use are more difficult to identify. There are estimated to be between 2000 to 4000 drug misuses within Lewisham, of whom 30 to 40% are opiate users. Around 1100 drug misuses are in contact with services, although there is evidence of significant underreporting. The total figure for alcohol dependency is perhaps twice as high, with maybe up to 8000 people affected, around a third of whom may also have a history of drug misuse. A variety of drugs and means of administration are used, with
opiates and cocaine or crack being most prevalent. There is also evidence for large amounts of Khat use, including increasingly amongst women.

Drug users are predominantly male and white, especially opiate users. There is however strong evidence of involvement with drug misuse across different ethnic groups. An agency working in the very north of Lewisham has recorded that whilst over 40% of its clients are white, just under a quarter are black and just under 20% are Vietnamese. The Somali community has been highlighted as being particularly at risk of homelessness combined with drug or alcohol misuse. Both direct access hostels within Lewisham report significant numbers of Somalis with drug or alcohol problems. A further issue for BME clients in general is that a report on drug services in Lewisham, Lambeth and Southwark found that services were often poorly located for Black and Minority Ethnic (BME) clients and that services were considered to be poor at keeping BME clients.

Around 75% of the clients using Lewisham’s main drug and alcohol services are male. The age range of drug users in broad, but with most users concentrated amongst the 20s and 30s, with the average age being 31. The age of alcohol users is likely on average to be somewhat higher.

Some areas of Lewisham have a high incidence of street drinking. Voluntary based organisations have done some work with street drinkers, and have identified that most street drinkers are housed with few support networks outside of their fellow drinkers. An enquiry into street drinking in Catford showed that from all of the drinkers were residents of Lewisham, 80% were on benefits, 44% in their own tenancies, 40% were in temporary accommodation and 16% are street homeless.

Overall a number of issues have been identified relating to housing:

- The majority of clients with an alcohol or drug misuse issue appear to be housed, with maybe up to half of the total that are housed having their own tenancies
- Where people are housed, their accommodation is often at risk, mainly because of the individuals inability to manage the tenancy. The issue of harassment from acquaintances, including drug dealers has also been recorded with instances of people being forced from their homes.
- A significant minority will have no stable housing at all, with a small proportion sleeping rough and the rest on friends floors and sofas.
- The issue of homelessness is exacerbated by a lack of suitable accommodation willing to take current drinker and substance misusers and to be able to contain and support them within an intensively staffed context. Most of the bedspaces within Lewisham’s direct access hostels have been ringfenced for Rough Sleeper Unit clients with the consequence that Lewisham clients have been unable to access suitable housing.
- Clients who have been able to access independent accommodation need further support, especially if they have previously been homeless. The Drugs and Supported Housing report suggests that appropriate floating support would be beneficial here.
- Two deprived areas in the south of the borough, Downham and Bellingham, have significant drug issues. Lewisham drug and alcohol services are primarily in the north of the borough and few clients from these areas access these services.
Comparison with the ODPM Supply Range
The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Accommodation</td>
<td>Floating</td>
</tr>
<tr>
<td>People with alcohol problems</td>
<td>30-50</td>
<td>8-30</td>
</tr>
<tr>
<td>People with Drug problems</td>
<td>7-19</td>
<td>1-5</td>
</tr>
</tbody>
</table>

Note:
83.3 % of alcohol services are entirely SP funded
33.3% of drug services are registered as a residential care home, 75% of services are entirely SP funded.

The supply range shows that accommodation based services are within the ODPM range and floating support services above for people with alcohol problems. This is not true in reality and it is considered that more floating support services are required, especially for those who may have a dual diagnosis.

The comparison also suggests of an above range supported units for people with drug problems, it is not felt that this is the case, 31 of those units are also in a residential rehabilitation service which has a large number of non Lewisham residents. The plans to develop services are outlined below.

**Strategic priorities for People with Drug and Alcohol problems**

- Developing the range of support schemes for black and ethnic minority groups with drug and alcohol problems. Particular need for more services for Somalian service users.

- Focusing on improving the quality of the provision, Supported housing projects will be compliant with Quality in alcohol and drugs services (QUADS).

- Developing floating support services for people with drug and alcohol problems.

- Developing support services for women and women with children who are at risk of domestic violence and or the threat or violence relating to drug dealers.

- Second stage accommodation for men, women and women with children post rehabilitation/detoxification.

**Offenders and those at risk of Offending**

The probation service is a major statutory agency charged with the responsibility of supervising offenders in the community. It discharges this duty in close co-operation...
with its partners, the police service, the health service and the local authority under a range of provisions but particularly the Crime and Disorder Act 1998. It also works closely with the prison service and other non-statutory agencies such as drug agencies. Offenders can also receive help and support from specialist voluntary agencies such as NACRO, The Princes Trust, New Bridge, AA, NA and CSV.

The Probation Service is a law enforcement agency delivering community punishments by supervising offenders within the terms set by the court or Parole Board. It works with offenders to reduce their reoffending and to protect the public. An offender’s failure to comply with supervision leads to breach action through the courts and can lead to a prison sentence. Where the offender is on post-custody licence, the outcome of a probation report to the Parole Board may be recall to prison.

**The aims of the Probation Service are:**
- Protecting the public
- Reducing re-offending
- The proper punishment of offenders in the community
- Ensuring offenders awareness of the effects of crime on the victims of crime and the public.
- Rehabilitation of offenders.

It operates within the Government’s Correctional Policy Framework, contributing primarily to:
- **Home Office Aim 3**: ‘To ensure the effective delivery of justice, avoiding unnecessary delay, through efficient investigation, detection, prosecution and court procedures. To minimise the threat to and intimidation of witnesses and to engage with and support victims.’
- **Home Office Aim 4**: ‘To deliver effective custodial and community sentences to reduce reoffending and protect the public, through the prison and probation services in partnership with the Youth Justice Board’.

Each year The Probation service in Lewisham commences the supervision of some 1,700 offenders. The caseload on any given day is in excess of 2,000 people. Approximately 90% are male and 10% are female. Just over a quarter of offenders serving community sentences are aged 16-20 and just less than three-quarters are aged 21 and over. About 30% of those starting orders are from minority groups. About 25% are black (over represented) and 4% other.

Approximately 70% of offenders supervised will be on community sentences and 30% imprisoned with a period of statutory licence supervision in the community as an integral part of the sentence.

All Probation Service work with offenders combines assessment and management of risk and dangerousness with the provision of expert supervision programmes designed to reduce re-offending. Enforcement of the order/licence conditions is a priority.

Homelessness and housing problems remain a significant problem for offenders with whom the service comes into contact. Research indicates around 30% of offenders
on community supervision and 50% of released prisoners face serious housing problems during their contact with the service.

Within Lewisham The probation service is undertaking a comprehensive review of the housing needs of offenders on its caseload. (To add in when completed).

**Evidence based practice**
The National Probation Service is implementing a new range of accredited programmes designed to reduce offending behaviour by those under supervision

The Centre for Criminology Studies at Oxford researching the Think First Programme reported that ‘*while offenders with alcohol or employment problems were likely to attend and complete the programme, those with accommodation problems were highly likely to drop out*’ (Home Office Probation Unit September 2000). If then the ‘*What Work*’ strategy of the LPA is to be effective in Lewisham, offenders with accommodation needs become a key priority in achieving our key goals of reducing offending behaviour. In the year 2002/3, it is planned that approximately 240 cases will be assigned to programmes and of these approx. 70 will not have stable accommodation. As the ‘*What Works*’ strategy expands, this number will increase.

**Resettlement – Under 12 Months Custody**
Currently the probation service has no statutory involvement in the supervision of prisoners serving less than twelve months. Nevertheless this group, which in Lewisham numbers approximately 360, is characterised by its potential for high criminogenic need including accommodation and their causal involvement in crime in the borough.

This group has particular difficulty in maintaining stable tenancies and frequently find it difficult to access appropriate housing while in the community or on release from prison.

**Resettlement 12+ Months in Custody**
Every prisoner who is sentenced to over twelve month’s imprisonment is supervised on release by the probation service. In Lewisham approximately 240 licensees are released each year. Approximately 40% are released to accommodation, which their supervision officer regards as unsuitable or unstable. All these offenders will have spent at least 24 weeks in custody, which means that if they have tenancies these, are at risk.

Housing Benefit payments are only available for the first thirteen weeks of a custodial sentence and so those who have served longer terms of imprisonment almost invariably lose tenancies where they have been the sole tenant. Sometimes the nature of the offence leading to imprisonment can also lead to the loss of the tenancy and reluctance on the part of the landlord or others to accommodate that individual again.

Supervised release under a parole or other licence is a way of providing conditional release to maximise the chances of rehabilitation and resettlement back into the community. A range of programmes and casework by probation officers require stability of accommodation for this process. The longer the period they have been in custody so the greater their need for adjustment to life in the community. Likewise the longer the period of incarceration the greater the chance that their previous living arrangements will no longer be available to them.
Approved Probation Hostel
The London Probation Service manages a 24-bed unit for men in Lewisham Borough, which is a residential facility, staffed 24 hours a day with a high degree of surveillance and control including curfew and CCTV. However it is not a prison but a hostel whose aim is reintegration back into independent living in the community.

While some beds are used for short (and long) term defendants on bail to the courts, the majority of residents are subject to licences following long sentences in custody. The probation hostel is supported in its rehabilitative work through an operational partnership with the health services’ Bracton Clinic. Senior psychologists, psychiatric nurses and drugs/alcohol workers attend the unit regularly and work closely with hostel staff in assessing and managing risk and working to reduce offending behaviour.

The hostel also has a very close working relationship with the police public protection team who visit weekly to assess individuals and their risk.

Sex offenders usually remain for long periods of statutory residence at the hostel while they are treated to reduce their risk to the public. On completion of residence they need to be resettled into appropriate next stage accommodation.

The hostel is a London regional resource and after often takes offenders from other boroughs to reduce the chance of contact with their erstwhile victims. Men can live for up to 12 months at the hostel on their release from custody. These men are often institutionalised after their years in custody and need both time, reskilling and resettlement as well as risk reducing treatment if their move back into the community is to be effected without risk to the community. The hostel moves about 40 offenders into other accommodation in the borough every year. It is estimated that each year this hostel would require 20 units of supported second stage semi independent accommodation and 10 units of permanent accommodation

Sustaining tenancies
Offenders often have difficulty in sustaining and maintaining tenancies and in securing successful accommodation in the private sector. This is partially due to problems in securing employment and poor social skills such as budgeting, responding to officialdom, literacy in reading documents etc.

When ex offenders do manage to secure tenancies, it is important that the appropriate help, advice and support is given to enable them to sustain their accommodation and not to lose it and so return to the revolving door of unstable accommodation. Currently the Probation Service funds a limited housing advice service (part-time worker) which could be restructured under the SP initiative to target reduction of tenancy loss among offenders.

Substance misuse issues
Apart from the sometimes-catastrophic social and health implications of drug and alcohol misuse, there is an evident link between substance misuse and offending. A very significant number of offenders (50%) within Lewisham have problematic substance misuse issues.
Drug dependency, (particularly on Class A drugs such as opiates, ‘crack’ cocaine, etc.) often leads to acquisitive criminal activity aimed at funding drug misuse. Some of this acquisitive offending, such as street robberies, pose a significant risk of physical harm to the public. In addition, the drug supply chain can involve an escalating level of violence aimed at the territorial protection of profits.

Alcohol misuse is frequently associated with public order offences and this can be particularly acute amongst certain age groups or in specific locations, e.g. town centres.

Often those with substance misuse problems have housing histories that can feature a lack of permanent accommodation, unstable tenancy maintenance, substantial arrears etc. Those still actively misusing substances are normally excluded from the waiting lists of many housing providers. There is a shortage of appropriate accommodation for individuals who have undertaken Detoxification and Rehabilitation programmes. If they return to the same housing and amongst the same peer group where they were involved in drug or alcohol misuse this almost inevitably leads to early relapse into substance misuse.

The Drugs Action Team (DAT) is the lead organisation, which takes responsibility for the strategic oversight and planning for services to substance misuses. This is a statutory partnership between all the major agencies in the Borough supported by Central Government funding. While not all users are offenders, nor all offenders users the DAT has a particular focus on offenders because of the amount of substance related crime.

A significant number of offenders on the caseload within Lewisham have mental health problems. The LPA does not seek to offer psychiatric treatment to mentally disordered offenders but we see our role as supporting the work of mental health professionals and undertaking interventions aimed at tackling their offending behaviour in accordance with the Agency’s priorities outlined earlier. The Probation Service works in partnership with local psychiatric services and voluntary groups in order to meet the needs of mentally disordered offenders.

A proportion of the mentally disordered offenders we work with have a dual diagnosis, i.e. they have a mental illness and substance misuse problems. This can be a difficult group to work as it can sometimes be difficult to determine if their substance misuse problems are exacerbating their mental illness or vice versa and their lifestyles may be particularly chaotic.

**Priorities for 2002/3**

For historic reason Lewisham has been very poorly provided with specific supported bed spaces for offenders and ex-prisoners when compared to the other boroughs of Inner London. In 2001 Lewisham had only 11 bed spaces out of the 437 that were supported by the Home Office PAS grant. This imbalance has been highlighted by the discussions stimulated through the Supporting People initiative and a few organisations are now considering adjusting their provision to meet this, so far, unmet need.

The Probation Service is currently undertaking a review and assessment of offender accommodation need and this information (available in September 2002) should
assist in planning for this group. In the interim the following developments should be prioritised:

- Reduce the demand for accommodation through prevention of unnecessary loss of tenancies particularly serving prisoners. Provision of Housing Support workers for those offenders who are identified as most at risk of losing their tenancies.
- Housing advice Service. The Probation Service currently has a contract to purchase housing advice worker. If this work could be increased and enhanced this could assist in appropriate placements and assessments of need for housing support (above).

- Assessment work. The National Probation service is developing a formal accredited assessment tool. If probation service officers could be accredited in their use of this assessment this could integrate their work into the formal process.

- New development. For 2002 the Housing Corporation have approved funding for the development of a scheme for ex-offenders and those at risk of offending, in partnership with Centrepoint, The Probation Service and London and Quadrant Housing Trust.

Mentally Disordered offenders
Homelessness can cause great stress and can exacerbate some forms of mental disorder and trigger illness in vulnerable people. There is considerable evidence that there is a much higher prevalence of mental disorder among homeless people compared with the general population. A survey by the Royal College of General Practitioners (1994) gave a figure of 25 to 50 times higher. Many people have diagnoses of personality disorders alongside specific mental illnesses and/or substance misuse.

The Newby Inquiry (October 1993) - revealed weaknesses in the system for housing and support of the mentally disordered person with multiple needs. That report states that the combination of problems experienced by such people often results in exclusion from service provision, with many health agencies excluding those with serious substance abuse problems, and many projects set up to tackle substance abuse exclude those with mental illness. Any record of violence adds to the exclusion from care. The overall result is that some of the most vulnerable individuals at the highest risk receive the least service from formal care agencies, relying instead on night shelters and other projects for the homeless.

There are MDO offenders who do not meet the criteria for community care assistance or who do not receive care from health services but who, nevertheless, have a mental disorder and require housing with support. It is these people who present a lower level of need and risk who pose increasing difficulties for probation staff seeking to access suitable housing as part of their treatment or resettlement plan.

Additionally there is a small, but significant group of mentally disordered offenders who will be assessed as potentially dangerous and a risk to the public. Such offenders are likely to require semi-secure community, based, residential provision following discharge from hospital or prison.
Comparison with the ODPM Supply Range
The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM Accommodation</th>
<th>ODPM Floating</th>
<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offenders or people at risk of offending</td>
<td>28-58</td>
<td>0-3</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>Mentally disordered offenders</td>
<td>Included in above</td>
<td>Included in above</td>
<td>22</td>
<td>16</td>
</tr>
</tbody>
</table>

Note:
100% of services are not registered, 83% of services are SP funded.

The comparison of the actual supply profile with the ODPM benchmark reveals that services are below the range for both types of service. This is an accurate representation as outlined above.

The strategic priorities for offenders are:

- An increase in second stage accommodation with intermediate support for offenders who complete their period of residence at the probation hostel (20 spaces).
- Third stage accommodation with minimal support either as a permanent tenancy floating support) or as a prelude to a permanent tenancy (10 spaces).
- Floating support services to work with probation officers to assist offenders in stabilising their accommodation and retaining tenancies (40).
- Direct access supported accommodation units for single men aged 25+ who will be released within six months of notification of license. Most will have less problematic alcohol/drug/mental health crimonogenic needs or issues (50 places).
- Direct access supported accommodation for men aged 19 plus who are under supervision directly from the courts (70 places).
- Schemes for mentally disordered offenders, including semi-secure community based residential provision.

Young People at Risk including young people leaving care

Young people who have been looked after by local authorities are one of the most disadvantaged groups in society. They often have disrupted family lives, experience many changes of placements whilst looked after and have a poor quality of life after leaving public care. A number of studies have found that care leavers suffer disproportionately higher rates of:

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• Low educational achievement (75% of care leavers have no educational qualifications)
• Unemployment (50% of young people leaving care are unemployed)
• Homelessness (20% experience some form of homelessness within 2 years of leaving care)
• Higher rate of teenage pregnancy (approximately half of female care leavers are parents within two years of leaving care).

The Government’s quality protects initiative aims to improve the well being of children in need and children looked after by local authorities. One of its objectives is to "ensure that young people leaving care, as they enter adulthood, are not isolated and participate socially and economically as citizens".

This statement describes how Lewisham intends to achieve this objective and deliver better outcomes for care leavers. It outlines Lewisham’s Policy on leaving care, identifies current service users and practice gaps and states the service development priorities for the next three years.

The children population is not estimated to increase significantly over the next four years. However, it is expected there will be a:

• Decrease in the under 10 population
• Increase in the 10-18
• 7% increase in the 16-18 population

Over the last three years there are approximately 53 young people leaving care each year, although there was no discernible pattern 1996-99.

The Leaving Care Team currently works with 376 young people aged 16-21 who are or have been looked after by the local authority. About 100 young people attend the twice weekly drop-in service each month with many others receiving additional support from the team through counselling sessions, the advocacy project and the employment and money advice services. There is a close working relationship with Housing and 32 young care leavers were re-housed in 1997/98. In addition there are XXX satellite-training flats to enable young people to practice independent living before moving onto permanent accommodation.

The Leaving Care Team offers an open door to all care leavers. However, there are a number of young people who have additional problems such as alcohol, mental health problems or those who are harder to engage in the service.

Children and young people from Black Caribbean and Black Other communities, and particularly young men, are over represented in the care system. This is also a national issue.

Adding together Black African, Black Caribbean and Black Other, this totals 40% of the children looked after population, compared with 59% white children. Of the 505 children looked after, 98 are aged 16 and 17 years, and will be preparing to leave care. 36 of the 98 are white (37%) and 42 (43%) are either Black African, Black
Caribbean or Black other, this shows a reduction on the percentage of white children in this age group compared with their percentage in the whole care population.

Young people in care and care leavers are vulnerable to mental health difficulties. Studies suggest that around a third of looked after children and young people have significant mental health difficulties. A study of care leavers (Saunders & Broad 1997) found that 35% of young people had deliberately self harmed since the age of 15.

Issues around access to suitable services for young care leavers with mental health problems.

The needs of care leavers with disabilities, isolation, and suitable accommodation is a concern for the team.

Lewisham provides all care leavers with a service, which prepares and supports them to make the transition from being ‘looked after’ to living independently in the community. The main responsibility for the task of providing a preparation and after care service to care leavers, rests with the Leaving Care and After Care Team (LCACT) who work in partnership with other agencies such as Health and Housing to ensure that young people are prepared for independence.

There has been an increase in pregnancies amongst care leavers, some of whom are also using drugs and alcohol. These young parents need considerable advice and guidance once they have left care.

- Better range of supported accommodation locally. More training flats are needed to meet demand as well as flexible supported accommodation to enable young people to maintain tenancies. limited aftercare support once move-in to own accommodation, support to those over 18 limited & esp for 19-21 year olds.

**Comparison with the ODPM Supply Range**

The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

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<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young people at risk or leaving care</td>
<td>104-164</td>
<td>5-30</td>
<td>150</td>
<td>18</td>
</tr>
</tbody>
</table>

**Note:**

85.7% of services for young people at risk are entirely SP funded, services for young people leaving care are 33.3% SP funded.

The comparison shows services to be within the ODPM benchmark. However, services need to be developed to meet the needs of young people who have more challenging behaviour.
The priorities identified for this group are:

- On-going support for young people leaving care in their own tenancy.

- A range of support services for young people, which meet the needs of young people with mental health problems, with disabilities, drug and alcohol problems, and for young offenders.

Victims of Crime including women at risk of domestic violence

Statistics from Refuge the 24 hour Domestic Violence Helpline show that in the quarter January to March 2002, 230 Lewisham women called the Domestic Violence Helpline. Of these, 11 Lewisham women were sheltered, although only one was sheltered in a Lewisham refuge. Women fleeing domestic violence are also over represented in applications to the Homeless Persons Unit.

The Lewisham Community Safety Partnership Audit 2001 reported that The Police had classified 3,397 incidents as domestic violence in 200/2001. This is a 24% increase on the figure for the previous year of 2,738 incidents. This is quite high compared to other Boroughs.

Over a five month period housing officers received 57 allegations of domestic violence (equivalent to 140 per annum) from only 30% of overall housing stock in Lewisham. There has also been an increase in violent crime, which includes domestic violence of 5.5%.

Refuge also report that over six months from October 2001 to March 2002 they received 494 calls from Lewisham residents. Of the total number 258 callers have children. Of the 494 calls 69 had special needs. Including drug problems, alcohol issues, and mental health problems.

Race and Hate Crime

Victims of Race and ‘Hate’ crimes have been traditionally under reported, this is of serious concern. Racial Harassment was reported as a major anxiety by 46% of black and 56% of Asian respondents. In 1992 a survey of gay men living in Lewisham was carried out and it reported that 45% of those who responded had been physically attacked because they were gay.

The 1998 audit informed of 208 cases of racial harassment reported to the Housing Department. It was estimated that this involved 483 incidents. This compares with a figure of nearly 700 incidents for 2000/01.

The approach to race and hate crime in Lewisham sits within a wider context so that victims of racial harassment or other hate crimes are not rehoused to leave the perpetrator to harass subsequent tenants. For this approach to work support must be given to victims such as personal security, support must be given to victims such as personal security, support groups, interpreting and translation services, advice and information etc. These initiatives will go towards reducing the effects of isolation and assist in victims sustaining their tenancies.
The Crime and Disorder Act 1998 provided the statutory basis for a partnership approach to reducing crime that Lewisham had already pioneered with the launch of the Lewisham Community Safety partnership in 1995. The Partnership brings together the Council’s Community Safety Team, Youth Offending Team and CCTV into one co-ordinated service.

The partnership has the following three aims:

- Reduce crime
- Enhance support for victims of crime
- Reduce the fear of crime

Supporting victims of crime is a major objective as part of Lewisham’s Crime and Disorder Plan. The needs and interests of victims and witnesses of crime are taken fully into consideration in policy or research planning processess relating to community safety.

**Comparison with the ODPM Supply Range**

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<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women at risk of domestic Violence</td>
<td>30-155</td>
<td>0-2</td>
<td>40</td>
<td>0</td>
</tr>
</tbody>
</table>

The supply of accommodation for women at risk of domestic violence is within the ODPM range; currently there are no floating support service although these are being developed.

**The strategic priorities for women at risk of domestic violence are:**

- Black and minority ethnic women often need a higher level of support, developing floating support services to meet this aim.
- Accommodation based support for women with teenage sons’ aged 14 and above.
- Support for victims with special needs requiring specialist help: for example often refuges are unable to taken women who have an alcohol problem.
- Extending the move-on and resettlement support for women post refuge.
- Floating support workers from specific minority communities, such as Kosovan, Albanian, Somalian, Vietnamese etc.
Priorities for the victims of crime:

- More floating support services to enable victims to retain tenancies and reduce isolation and exclusion.
- Increasing the security measures to enable victims to retain their tenancies such as Linkline alarms and personal security alarms and additional security devices. Currently 80 alarms being used for this purpose.

Young Offenders

The Crime and Disorder Act of 1988 set out a framework for justice in England and Wales. It states that all areas must establish multi-agency Youth Offending Teams. These Teams are responsible for developing an overview of youth crime in their specified areas and making strategic interventions in line with the crime reduction strategy to reduce offending and re-offending. This includes the commissioning or provision of social crime prevention interventions.

The team assesses the needs of children and young people between the ages of 10-18 alleged to or convicted of offending. The team co-ordinates or provides a full range of services required to prevent or reduce offending in future. It has representatives from health, housing, education, probation, police and the courts. The team also works to support and supervise parents.

The main issues of concern which have been highlighted are:
- The chaotic nature of offending behaviour and the effects of this on parents and family. This can culminate in parents evicting the young person from the family home.
- Young people who have been on Detention and Training Orders (DTO) coming out of prison and finding the parents are no longer willing to have them in the family home.
- Social Services being unwilling to take on the cases of young people aged 16, 17 and 18 years of age.
- Young people between the ages of 12-14 being expelled from the family home and placed in inappropriate accommodation where their complex needs are not being met.
- Leaving Care
- Young people being held on remand because they do not have an address

There is a recognised need for Direct Access accommodation for young people. Historically Direct Access Hostels for rough sleepers have been aimed at an older client group than that accessing the YOT. Both outreach workers and advise agencies are reluctant to place a young person in such hostels due to potentially exposing them to a detrimental environment. Ennersdale House and Pagnall Street are available options for direct access however, these are deemed unsuitable due to the vulnerability of the YOT client group. Young people in Lewisham have many difficulties accessing facilities when they are sleeping rough. This is primarily because they have not been sleeping rough for long enough (6 months is the guidance criteria of an official Rough Sleeper) and secondly, the Contact and Assessment Teams (CATS) covering south east London do not come to Lewisham.
The main points are:
- Young People refused bail because they do not have an address.
- Young people on DTOs being denied an early release date because they do not have accommodation.
- Young People evicted from the family home having no alternative accommodation.

Young people refused bail because they do not have an address
Problems arise when a young person aged 16-18 years old is homeless and comes in front of the court. If bail is an issue they will rarely be able to access housing. The usual step would be to refer them to a bail hostel so that they could remain in the community awaiting the conclusion of their case. However, most Probation hostels house schedule 1 offenders and offenders registered on the Sex Offenders List. This requires those offenders not to live with children. Therefore, young offenders are excluded from accessing these facilities. Bail applications are made for young people to live with friends or relatives, often in crowded or inappropriate situations. To avoid the bail issue, on occasion the young person is encouraged to plead guilty and fined accordingly when a more appropriate intervention would be an Action Plan Order that seeks to tackle the homelessness and offending issues.

Young people leaving custody
These account for the most problematic cases with regard to housing issues for the YOT. Once a young person has been in custody (whether sentenced or on remand) they find it very hard to re-integrate into the family home. Efforts have been made to interview and refer young people in custody directly to ex-offender units, but the lack of availability means that on release the young person often has nowhere to go. Some housing providers are not resourced to visit prisons to carry out interviews, and specialist ex-offender units tend to be set up for adult offenders.

Young People evicted from the family home having no alternative accommodation
Account for a large number of the young people in need of accommodation. Typically it is not until the youth court has sentenced the young person and they are on a Supervision Order that family tensions begin to break apart (often after years of strain). In these cases the usual work done is to assess and advise, with applications made to voluntary sector housing providers so that some planned resettlement is made.

Shared Housing
Efforts should be made more generally to increase the number of voluntary sector shared housing in Lewisham open to young people with low-medium support needs. This should be coupled with ensuring that direct access provision is maintained for those young people who need emergency housing so that they wait for foyer accommodation in a structured and supervised facility. Currently Stopover’s Farnboro’ House is the only such facility.

The lack of move-on accommodation into permanent accommodation causes a backlog and waiting lists are long, discouraging young people to work with authorities and change their lives.
A further problem is the example of the local NACRO housing facility. This caters primarily for Greenwich based clients because Greenwich provides many more nominations. In the past Lewisham clients have had lengthy waits for move-on accommodation and blocked beds in shared housing. NACRO’s policy to counter this excludes YOT clients with Lewisham connections.

Ring-fenced nominated accommodation rights tied to the projects to move-on rehabilitated residents would result in opening up the projects to Lewisham YOT clients.

Leaving Care issues
The Children (Leaving Care) Act provides a duty of services to those young people who have been remanded into local authority care. The arrangements to base a social worker looking after the casework for these clients with the YOT should help vulnerable young people avoid homelessness. The relationship built between the YOT and young people should ease the flow of young offenders into suitable accommodation. This is relevant because it assists where young people have been put into care because of their offending, but would not have had this level of intervention on welfare grounds. However, in the past there has sometimes been lengthy negotiation to establish whether a young person should qualify for this service. There is a need to open up access for those young people who on reaching the age of 16 find themselves at risk of homelessness, but outside the general provisions of the social care and health services. A mechanism to allow these young people to be assisted by the Leaving Care team with access to the housing panel maybe a way for the local authority to assist this group.

Flat with Tenancy Agreement, with or without Floating Support
Currently the YOT has several young people who are in danger of becoming homeless who would be quite capable of sustaining a tenancy. Young people who fit these criteria are generally advised to present themselves at the Homeless Persons Unit (HPU). However, problems identified by workers accessing the homeless persons unit include:

- Young people fitting the criteria
- Inconsistencies regarding how a young person is dealt with
- Attitude toward young offenders
- Access to appropriate accommodation

Protocol on accessing the HPU and developing tenancy/floating support services for young offenders would improve this situation.

There is a severe lack of specialist provision for young people who have criminal backgrounds. There has been a movement in the past to provide ‘special needs’ type housing for ex-offenders, but these projects tend to be set up for adult offenders and the funding is locked up with the Probation service, who do not deal with under 18 year olds, and in fact do not work with young people on DTOs.

With regard to the group of young people between the ages of 12-14 years of age, little mention is made of accommodation issues other than that of overcrowding and tensions created by the young persons offending behaviour or other outside influences.
In an analysis of 27 Pre Sentencing Reports (PSRs) carried out at the beginning of 2002 it was found that 13 indicated some form of accommodation crisis. However, there were no proposals to for intervention work on this issue. It would seem there is a there is the feeling that the YOT has little power to intervene with accommodation or that other agencies outside the jurisdiction and orders of the Youth Court are better placed to do this intervention.

**Strategic Priorities for young offenders are:**

- The need for a Foyer in Lewisham.
- Developing support for young people who require direct access to emergency accommodation with supervision.
- Ensuring that rough sleeper support services take account of the needs of young offenders.
- Developing services for young offenders who may have a mental health problem, alcohol or drug problem.
- Extending the offender floating support service to young offenders.

**People With HIV/AIDS**

Lambeth, Southwark and Lewisham constitutes the largest HIV positive cohort of any single district in the United Kingdom, numbering some 2,801 residents in total in 2000, and representing one in eight of all residents diagnosed with HIV infection and seeking HIV related treatment and care. Around one in six (493/2801) of this number lived within the boundaries of Lewisham, this number having more than doubled from the 206 HIV positive residents residing locally in 1996. The rise in the number of Lewisham residents diagnosed HIV positive and living locally is mirrored by the rise in the overall prevalence of HIV infection within the borough which rose 134.9% over the same five year period, from 85.3 per 100,000 to 200.4 per 100,000.

The impact of HIV infection across all groups locally (irrespective of age, sex, ethnicity or sexuality) is reflected in information available from epidemiological surveillance systems. However, HIV infection continues to impact substantially and disproportionately on those from minority groups, particularly gay men and black and other ethnic minority communities. In 2000 almost half of all diagnosed HIV infections in Lewisham were white, with a further one-third in black Africans. However, there is a marked disparity in the route of infection between these groups. Almost three-quarters of all diagnosed HIV infections in whites in 2000 were in gay men, whilst amongst black people of African origin almost three-quarters of cases in the same year were attributed to heterosexual sex.

Population estimates for the number of gay men living in Lewisham are not routinely available, making it difficult to estimate the rate of HIV infection amongst this group. Population estimates of local residents by ethnic group reveal that in 2000 the rate of HIV infection amongst Black-Africans was 985.8 per 100,000, exceeding the rate in...
whites (137.8 per 100,000) by a ratio of 7:2:1 and that in the same year, one in every 101 Black Lewisham residents of African origin was known to be HIV positive.

The shifting pattern of HIV infection in recent years has now refocused attention on the impact of new treatment regimes, the population subgroups most affected, the relationship between HIV and sexually transmitted infections and increases in newly diagnosed HIV infections.

The introduction of highly active anti-retroviral therapy in recent years has resulted in HIV positive service users living longer and whilst this development is welcomed, it has nevertheless placed additional pressure on local services. At the same time, substantial numbers of new diagnoses of HIV infection continue to be identified in local residents, with over 80 identified in Lewisham residents in 2000. (Source Survey of Prevalent Diagnosed HIV Infection in London 2000- SOPHID London 2000).

A considerable burden of sexually transmitted infection also exists locally, with 2 065 cases of gonorrhoea and 2 564 cases of chlamydia infection diagnosed in one of three local genito-urinary medicine clinics in 2000. The link between these infections (often used as a marker of unsafe sexual behaviour) and HIV infection is well understood; the presence of pre-existing sexually transmitted infection is known to place the individual at an increased risk of HIV infection during unsafe sexual encounters.

Despite the evident burden of HIV infection amongst residents of Lewisham and the comprehensiveness of epidemiological information systems, the true level of HIV infection amongst residents of the borough is unclear.

Enumeration of newly identified infections is dependent on individuals both perceiving themselves to be at risk of HIV infection and being willing to test for the presence of the virus.

There are a number of clear concerns to those commissioning and providing services to Lewisham residents. Firstly, the rising number of diagnosed HIV Positive residents of Lewisham who will continue to require and seek access to local treatment and care services. Secondly, a steady number of new diagnoses of HIV infection occurring amongst local residents (which are likely to increase following the forthcoming introduction of nationwide targets aimed at increased testing set out in the National Sexual Health Strategy) and which together with Lewisham’s substantial HIV positive population points towards a demand for services in the future at even higher levels than those seen now.

In recent years, the number of newly diagnosed HIV infections in white Lewisham residents has been closely mirrored by the number occurring in Black people of African origin resident in the borough. This is a fundamental change from the picture seen across the country in the early 1980s when most newly identified HIV infections were in gay men. The high numbers of new diagnosis of sexually transmitted infection locally, particularly gonorrhoea and chlamydia, and their role as co-factors in the transmission of HIV infection indicates the potential for an even greater epidemic of HIV in Lewisham and particularly amongst Black residents of Caribbean origin between the ages of 15 and 24.
Lewisham Social Care and Health has produced a two-year strategy 2002-2004 for adults and children affected by HIV. The aim of the strategy is to provide a framework for HIV commissioning over the next two years. Other documents, which impact on the strategy, include:

- The National Strategy for Sexual Health and HIV 2001
- The London HIV Strategy
- LBL Social Care and Health Commissioning Strategy 2002-2005
- LBL Social Care and Health Service Plan
- Health Improvement and Modernisation Plan (HIMP) 2002-2005

**Comparison with the ODPM Supply Range**

The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Accommodation</td>
<td>Floating</td>
</tr>
<tr>
<td>People with HIV/AIDS</td>
<td>51-459</td>
<td>6-13</td>
</tr>
</tbody>
</table>

**Note:**

100% of services are SP funded.

The comparison shows that services for people with HIV and AIDS are below the ODPM benchmark. Although it is recognised that more supported accommodation needs to be developed is not expected that it would be at the level suggested by the benchmark (51-459).

**The priorities identified are:**

- Additional units of supported accommodation for people with HIV/AIDS, more family sized units.
- Temporary accommodation units for people with HIV & AIDS.

**Refugees**

The majority of refugees and asylum seekers living in the UK are resident in London. Lewisham has an estimated population of between 9,300 and 10,800 refugees (UNHCR 1998).

In the last twelve months, the Lewisham Asylum seekers team had a weekly average of over 1050 active cases. As at February 2002 there were 939 active cases originating from 72 countries, Kosovo is the most frequent country of origin (27%) followed by Sri Lanka (10%), the Congo (4%) and Zaire (3%). 63% of asylum seekers are male.

The Asylum Seekers Team currently supports 304 single adults, 445 families and 82 unaccompanied asylum seeking children. This does not include dependants (i.e.
partner, children) but does include approximately 40 non-asylum seeking destitute families with children in need and approximately 23 destitute non asylum seeking single adults with mental health or other serious illness, which renders them vulnerable under the Mental Health Act 1983; National Health Service & Community Care Act 19990 and the National Assistance Act 1948.

69% of those supported by the Asylum seekers Team are aged 18-39 and 60% are men.

A key priority is to provide subsistence and reasonably priced quality accommodation to eligible destitute asylum seekers, including unaccompanied asylum seeking children aged 16-17 years. There is also a need to identify good quality first stage and move-on accommodation, especially for UASCs.

The Government’s policy is to continue with the dispersal of the majority of asylum seekers outside of London & Kent and at the same time to pilot accommodation centres. The duty towards UASCs will stay with the LA under the relevant sections of the Children’s Act 1989. With the emphasis now on citizenship and integration local authorities are going to have to develop longer-term strategies. This will include looking at housing, education, employment health and other needs.

Comparison with the ODPM Supply Range
The table below illustrates the actual supply of supported accommodation in Lewisham; this has been identified through the mapping exercise. This is compared with the ODPM benchmark figures.

<table>
<thead>
<tr>
<th>Client Group</th>
<th>ODPM Accommodation</th>
<th>ODPM Floating</th>
<th>Actual Accommodation</th>
<th>Actual Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refugees</td>
<td>2-38</td>
<td>0</td>
<td>17</td>
<td>0</td>
</tr>
</tbody>
</table>

The comparison shows that services are within the ODPM range. The need for floating support has been highlighted.

**Strategic priorities for asylum seekers are:**

- Floating support for those waiting for a decision on their application, especially unaccompanied minors (16-17 yr. olds) support required around accessing education and other services.
- Floating support to families and people who have additional support needs, such as domestic violence, mental health, drug and alcohol problems and disability.

**Teenage Parents**

Lewisham has one of the highest national teenage pregnancy rates. Twenty of Lewisham’s 26 wards are in the 20% of wards in England with the highest number of under 18 conceptions. Since the development of the Reintegration Project more information about young parents is available. Young people from ethnic groups are disproportionately reflected in the figures for conceptions, teenage pregnancy and STIs.
In line with the target set by the Teenage Pregnancy Unit and the Housing strategy no lone parents will be placed in unsupported accommodation by 2003, in order to meet this target further units will need to be developed, this will also consist of floating support alongside specialist mother and baby units in recognition of the range of needs young parents have. Services also need to ensure that the additional support needs of this group are recognised, such as violence in the home, drug or alcohol issues and mental health problems.

The Supported Housing Unit is currently reviewing their housing provision for teenage parents, but the need to increase the number of supported units available has been highlighted. In view of the need a revenue bid to fund extra floating support from an existing Mother and Baby Unit run by Centrepoint for 20 teenagers in the borough. In addition Lewisham has supported a capital bid for a new 8 bed Mother and Baby Unit by Ekaya HA and Metropolitan Housing Trust. The council is providing match funding from section 106 off site financial contributions.

**The priority for teenage parents is:**

- No young person to be placed in accommodation without support, to develop a range of support services to meet this objective. Can we be clearer about numbers, type of scheme etc?).

**Rough Sleepers**

The last rough sleeper count carried out in November 2001 indicated a relatively low incidence of rough sleeping in the borough. Work will continue with other agencies including the Rough Sleepers Unit, Community Assessment Team (CAT) and the Thamesreach Bondway Street Rescue Service in trying to ensure those identified needs are met. It is thought that a Lewisham based CAT worker would be beneficial and discussions are being held between Social Care and Health and the PCT to achieve this.

The strategic priorities for rough sleepers have been integrated into other areas due to the number of rough sleepers who experience multiple needs.

**Travellers**

Travellers are those people who originate from an Irish traveller or Romany tradition, who are in the process of travelling; residing on fixed sites or have recently been rehoused.

Lewisham provides one site for Travellers, this currently houses 13 families. In addition there are over 15 known traveller families living in housing in the borough. Some concerns have been raised about the standard of this accommodation and the number of available pitches. Recently there has been an increase in unofficial Traveller sites in the borough. However, it is difficult to give an accurate number of those living in such sites. Lewisham is currently looking at a number of measures to improve the services to Travellers on site.
The housing requirements of travellers who have additional support needs must be explored more thoroughly. However, from the information currently available it is clear that floating support services for travellers on site is a priority, this would include assistance with accessing benefits and linking into mainstream services.

**Strategic priorities for travellers**

- Developing floating support services for travellers on site.

**B6. Wider Strategic Links.**
The Supporting People Strategy complements a number of local and national strategies; this has been covered in the needs profiling section.

**B7. Cross authority statement**
Lewisham has worked closely with neighbouring authorities in developing cross-authority arrangements. It is a member of:

- The South East London Supporting People Group, which mirrors the new Strategic Health Authority, this is made up of, Southwark, Lambeth, Bexley, Bromley and Greenwich.
- The ALG Pan-London Supporting People Group.
- The Lewisham, Southwark and Lambeth Small Provider Forum.
- Lambeth, Southwark and Lewisham Supporting People BME Forum
- Six Borough Performance and Quality group.

**Level of Cross Authority services in operation in Lewisham**
To be completed from the Base Line survey, which will only be available once information has been received from the ODPM.

**Cross authority Statement**
The South East London boroughs of Lambeth, Southwark, Lewisham, Greenwich, Bromley and Greenwich recognise that many supported housing services work with people from more that one borough and many vulnerable people are transient and either have no one single borough of residence, or for various reasons may not be able to access services where they live. The boroughs will work closely with each other and with the ALG on pan London issues to:

- Recognise that all boroughs have a responsibility for hosting, supporting and developing services, that do not respond only to single borough need.
- Identify, plan and where possible jointly commission south east or pan London services, sharing expertise, experience and resources with regards to housing support services for vulnerable people who are transient.
- Ensure that the needs of vulnerable people who may have an ill-defined local connection are met.
- Attempt to avoid duplication in terms of monitoring and consultation requirements for providers and to share best practice.
- To ensure that services that could or should be focussing on local needs, are supported to do so.
Providers in our consultation exercises have not identified Cross-authority issues as a cause for concern.

**Views of providers on cross-authority issues?**

**B8. Service Quality and review.**

Improving the quality of services for vulnerable people is at the heart of the Supporting People Programme; the Supporting People Team will undertake reviews and the scheme will be assessed against key performance criteria, including the objectives set out in this document. The review will balance the need for continuity and stability with the need for quality and good value and extend the choice for service users. The review will be carried out in consistent and transparent manner and will involve input form service users.

The review will provide the opportunity for the Supporting People Team to assess the provider’s commitment to equality issues, in access to services and employment and anti-discrimination practice.

Reviews will be carried out by client group, where this is possible. In some circumstances, however, reviews will be brought forward where there are some concerns relating to the agency or service. The interim contracts issued to providers will give the detail of when the service review will be carried out. If services are considered to be in breach of their interim contract then the review date will be brought forward. SHMG services, the reviews will be carried out in accordance with the ODPM guidance.

**Review Timetable**

**Year one**
Review of providers who have not previously been monitored.
Single homelessness
Homeless families
Young people (including teenage parents)
Offenders and Young Offenders
The decision to review these services in the first year has been made as a result of the Best Value Review currently being carried out in this sector, The Best Value review will inform our own service review. The New Homelessness Act is likely to increase the demand for this type of provision and this will be assessed in the first year.

**Year Two**
Mental health
Learning Disability
Victims of crime (including women at risk of domestic violence)
Refugees
Drug & Alcohol (check Lola for Quad review timetable and fit into this)

**Year Three**
Older People
Physical disability
HIV & AIDS
Travellers

Registered schemes in receipt of SHMG will be also be reviewed, this is currently under discussion. The timetable for reviewing cross-authority schemes will be confirmed once the results of the cross-authority survey have been published.

<table>
<thead>
<tr>
<th>Type of review</th>
<th>Date of review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supported housing</td>
<td>September 2002</td>
</tr>
<tr>
<td>Asylum seekers</td>
<td>2002/03</td>
</tr>
<tr>
<td>Mental health provision</td>
<td>2002/03</td>
</tr>
<tr>
<td>Disabilities</td>
<td>2002/03</td>
</tr>
<tr>
<td>Housing strategy &amp; Urban renewal</td>
<td>2003/04</td>
</tr>
<tr>
<td>Voluntary Sector</td>
<td>2003/04</td>
</tr>
<tr>
<td>Community Safety</td>
<td>2003/04</td>
</tr>
<tr>
<td>Adult &amp; Elderly services</td>
<td>2005/05</td>
</tr>
<tr>
<td>Accessible services</td>
<td>2004/05</td>
</tr>
</tbody>
</table>

Part C


1.1 The options and strategy - Action over the next twelve months, created by opportunities to remodel or expand services.

The review process will assist in developing our knowledge of the sector and capacity to remodel schemes and redirect resources. It is therefore difficult at this stage to provide details of services, which will be remodelled; this will also take account of cross-authority issues and consultation.

Although we will need to carry out reviews before outlining remodelling services there are several areas of priority for the first year.

<table>
<thead>
<tr>
<th>Client group</th>
<th>Prioritised service developments/reconfiguration/decommission</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single homeless</td>
<td>After review of service. To assess the potential to more effectively target the services.</td>
<td>Possible redirection of the current funding.</td>
</tr>
<tr>
<td>Offenders &amp; Young offenders</td>
<td>Developing floating support services. Improving access to move-on &amp; use of foyer. Second stage accommodation</td>
<td>Revenue only</td>
</tr>
<tr>
<td>People with mental health problems</td>
<td>Improving the quality of provision, examining the level of registered accommodation and seeing how this fits with the SP strategy Refurbishment of Sydenham Road. Developing floating support.</td>
<td>Growth funding for Sydenham Road Match revenue funding from Health.</td>
</tr>
<tr>
<td>Victims of hate crime</td>
<td>Extending floating support service Funding the community alarm scheme</td>
<td></td>
</tr>
</tbody>
</table>

(Capital priorities including the ADP priorities for 2002/03 are included in the table in section D – Appendix2)

**Priorities for the first year of the programme**
- More information about BME groups, areas for needs mapping
- Carry out reviews
- Continue consultation
- Maximise resources, better use of existing resources.
- Partnership working
- Improving quality

**Innovations and models of good practice**
The Supporting People Programme is linked to a number of corporate strategic objectives. The Supporting People Strategy will build upon the innovation already taking place in Regeneration, Community Safety and Social Care and Health. The key themes are:

- Continue to remodel schemes to improve the quality of provision, self contained units are preferred.
- Joint funded services, e.g. the floating support proposal for people with mental health problems.
- Promoting services which facilitating independence.
- Building upon the partnership with the Probation, In 2002/03 The Supporting People Team and The Probation Service have been working together to develop new services for offenders.
- Developing the corporate strategic approach, e.g. teenage pregnancy, regeneration and Surestart.

**Contingencies, Risks and issues**
The Supporting People Programme in Lewisham forms part of the general project management structure. The Commissioning Body reports to the Corporate Project Board and to Project Review Group. The risks and contingencies have been considered at each stage of the project and a risk register forms part of the Project Initiation Document. Some of the risks, contingencies and issues considered over this period have been.
THB. By holding regular meetings with providers and the Housing Benefit Section we have given agencies the opportunity to raise concern over THB issues and confirmed the transparency of the process in Lewisham. Regular meetings between the Supporting People Lead Officer and the THB Lead have ensured that all providers who are in receipt of THB are identified and that a consistent approach is maintained.

Mapping all providers, to make sure that we have included all providers’ data has continually been cross-checked e.g. SHMG and THB information.

The risk of providers choosing not to engage with the SP process or worse closing down when faced with the new funding and monitoring regime was raised early on. By working closely with providers and developing an understanding of the sector as a whole the SP Team has been able to respond to concerns and allay fears.

In developing relationships with support providers many have been able to discuss their own risks, where possible the SP team has assisted with planning for contingency, for example in placing funding on a more secure footing.

In the lead up to April 2003 it may be likely that some more serious concerns are raised for example a provider’s financial viability or Health and Safety issues. In this situation it will be dealt with through the risk register and reported to the Commissioning Body.

The Supporting People Team is now emerged in setting up contracts with providers, as part of this process it is necessary to gather additional information and to plan for risk. A The risk register will take account of this process once the contract phase is complete and prior to April 2003.

Part D  
Annual Statement  

This section provides a high level overview of and funding implications of the Shadow Strategy. It outlines the Supporting People funding required to develop each priority.

The original proposal put forward by the ODPM was that Commissioning Bodies should project how they would commission new services as if they had either 5% or 15% new resources available for this purpose. It is now apparent that the figure for each authority ‘pot’ will not be available in time for this exercise. It has therefore been proposed that a projection be given on the basis of funds being available to increase the number of services commissioned by 10%.

Priorities for 2003/04  
As the size of the post has not been fully assessed at the time of writing the strategy, the 10% has been based on an assumption of the overall pot size and likely costs of developing these services. An attempt has been made to ensure that financial costs are as accurate as possible. However, it is anticipated that some of the costs may change over the next year due to a number of external factors.

The table of development priorities for 2003/04 and summary can be found in Appendix 2.
**Additional Service Developments**

The ODPM template has been used to record each new service or the additional 10% services. This is not listed in priority order. The reason for the priority has been given in detail in the needs profiling section (5). The ADP priorities for 2002/03 are also included within this list on the assumption that not all ADP bids will be successful.

**Summary financial table for year 2003/04**

Note: These are not the final figures: waiting some costings. The final figure is more that the 10% of pot size. This is because the ADP priorities have been included, This may be formed into two tables before submission to the ODPM.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total New Capital Required</td>
<td>£31,982,250.00</td>
</tr>
<tr>
<td>Existing SP Revenue Funding saved from remodelling or service changes</td>
<td>Information not available until scheme review has taken place.</td>
</tr>
<tr>
<td>New SP funding required</td>
<td>£2,860,949.00</td>
</tr>
<tr>
<td>Total non SP funding required</td>
<td>£3,285,949.00</td>
</tr>
</tbody>
</table>
### Additional Service 1

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation (Sydenham Road)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Client Group</strong></td>
<td>Severe and enduring Mental Health</td>
</tr>
<tr>
<td><strong>Capacity</strong></td>
<td>8-10</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>24Hour staff support on site. Younger people (under 40) Independent self contained flats, some communal space, staff office</td>
</tr>
<tr>
<td><strong>Reason for priority</strong></td>
<td>See needs profiling section</td>
</tr>
<tr>
<td><strong>Capital requirement (£) and sources</strong></td>
<td>£2000 000</td>
</tr>
<tr>
<td><strong>Capital bid made and approved (Y/N)</strong></td>
<td>ADP Priority</td>
</tr>
<tr>
<td><strong>Total revenue requirement</strong></td>
<td>Some revenue funding available form Health £376,250</td>
</tr>
<tr>
<td><strong>Required SP funding</strong></td>
<td>£188,125</td>
</tr>
</tbody>
</table>

### Additional Service 2

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Service Type</strong></td>
<td>Assertive outreach</td>
</tr>
<tr>
<td><strong>Client Group</strong></td>
<td>Mental Health</td>
</tr>
<tr>
<td><strong>Capacity</strong></td>
<td>80-100  - 7 staff</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>Low to medium support, with difficult to engage individuals. One borough wide team based in one of the mental health centres – possibly south or SW of the borough. SLAM would provide specialist m/h input</td>
</tr>
<tr>
<td><strong>Reason for priority</strong></td>
<td>See needs profiling section</td>
</tr>
<tr>
<td><strong>Capital requirement (£) and sources</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N/A</td>
</tr>
<tr>
<td>------------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>Revenue funding available from the mental health assertive outreach funds. (£ 218,750)</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£109,375</td>
</tr>
</tbody>
</table>

**Additional Service 3**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Move-on accommodation for Westwood Hill</td>
</tr>
<tr>
<td>Client Group</td>
<td>Mental Health</td>
</tr>
<tr>
<td>Capacity</td>
<td>6</td>
</tr>
<tr>
<td>Description</td>
<td>One bedroom self-contained medium support, no staff on site. Refurb or new build.</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See strategy document</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>1,200,000 (sources not yet identified)</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£115,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£57,500</td>
</tr>
</tbody>
</table>

**Additional Service 4**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Dispersed flats with support</td>
</tr>
<tr>
<td>Client Group</td>
<td>Mental health</td>
</tr>
<tr>
<td>Capacity</td>
<td>9 - S/c 1beds + 1X2 bed</td>
</tr>
<tr>
<td>Description</td>
<td>Linked to Honor Lea or 215 Sydenham Rd. Medium support, Daily visits. Facility for higher support if required. Needs to be located in Honor oak, Forest Hill or Brockley. Will need to be responsive to the needs of young black men. 5 FTE = half a manger</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See Strategy document</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£2m – no source identified</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>Match funding from health £140,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£70,000</td>
</tr>
</tbody>
</table>

**Additional Service 5**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Dispersed flats with support</td>
</tr>
<tr>
<td>Client Group</td>
<td>People with Learning Disabilities</td>
</tr>
<tr>
<td>Capacity</td>
<td>3 s/c units + 1 wheelchair unit.</td>
</tr>
<tr>
<td>Description</td>
<td>Dispersed flats located in same area (ring), 13 hours support a week per person</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See the strategy document</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£462,250</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>ADP Priority</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>Support - £ 25 per hour. 13 hours a week per person. £67,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£67,600</td>
</tr>
</tbody>
</table>

**Additional Service 6**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Dispersed units with support</td>
</tr>
<tr>
<td>Client Group</td>
<td>Single Homeless</td>
</tr>
<tr>
<td>Capacity</td>
<td>20 s/c units</td>
</tr>
<tr>
<td>Description</td>
<td>For move-on from Rokeby, Pagnall and similar schemes. Low floating support (1.5 staff)</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See the strategy document</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£4,000,000</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>----</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£50,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£50,000</td>
</tr>
</tbody>
</table>

### Additional Service 7

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client Group</td>
<td>Single Homeless who require higher support.</td>
</tr>
<tr>
<td>Capacity</td>
<td>25-30 units</td>
</tr>
<tr>
<td>Description</td>
<td>Hostel for single homeless who have additional support needs, would need to have a ‘wet’ floor. Support 24hours, 7 days a week,</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See strategy document</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£6M</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>ADP priority</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£650,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£650,000</td>
</tr>
</tbody>
</table>

### Additional Service 8

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Shared Ownership scheme</td>
</tr>
<tr>
<td>Client Group</td>
<td>People With Learning Disability</td>
</tr>
<tr>
<td>Capacity</td>
<td>2 x 1 beds</td>
</tr>
<tr>
<td>Description</td>
<td>Medium support</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See Strategy document</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£110,000 per flat – need more information</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td></td>
</tr>
<tr>
<td>Service</td>
<td>Accommodation based or floating</td>
</tr>
<tr>
<td>---------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>9</td>
<td>Accommodation</td>
</tr>
<tr>
<td>10</td>
<td>Accommodation</td>
</tr>
</tbody>
</table>
### Additional Service 11

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td></td>
</tr>
<tr>
<td>Client Group</td>
<td>Teenage Parents</td>
</tr>
<tr>
<td>Capacity</td>
<td>60 per year</td>
</tr>
<tr>
<td>Description</td>
<td>Support for young parents, up to two years support</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See Strategy</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>No</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N/A</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£200,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td></td>
</tr>
</tbody>
</table>

### Additional Service 12

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Semi-independent flats</td>
</tr>
<tr>
<td>Client Group</td>
<td>Young Offenders</td>
</tr>
<tr>
<td>Capacity</td>
<td>2x 10 Unit flats</td>
</tr>
<tr>
<td>Description</td>
<td>1 north/ 1 south of the borough 2.5 staff</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See strategy document</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£4M</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>ADP priority</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£80,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£80,000</td>
</tr>
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</table>

### Additional Service 13

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Small clustered scheme</td>
</tr>
<tr>
<td>Client Group</td>
<td>People with drug problems</td>
</tr>
<tr>
<td>----------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Capacity</td>
<td>15 s/c bedsits</td>
</tr>
<tr>
<td>Description</td>
<td>Check out the ARP funding</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See Strategy</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£3 million</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£65,000 (to explore DAT funding)</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£65,000</td>
</tr>
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</table>

**Additional Service 14**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Substance misuse hostel</td>
</tr>
<tr>
<td>Client Group</td>
<td>People with drug problems</td>
</tr>
<tr>
<td>Capacity</td>
<td>10-12</td>
</tr>
<tr>
<td>Description</td>
<td>See equinox scheme (ARP funding ?)</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See strategy</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>£2.5 Million</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£470,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£470,000</td>
</tr>
</tbody>
</table>

**Additional Service 15**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Floating support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Support to people in tenancies</td>
</tr>
<tr>
<td>Client Group</td>
<td>Drug &amp; alcohol</td>
</tr>
<tr>
<td>Capacity</td>
<td>60</td>
</tr>
<tr>
<td>Description</td>
<td>Floating support to people in LA &amp;</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>RSL tenancies</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>N/A</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N/A</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>DAT money?</td>
</tr>
<tr>
<td>6 Staff + 1 Manager</td>
<td></td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£210,000</td>
</tr>
</tbody>
</table>

### Additional Service 16

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Support for women who have experienced DV</td>
</tr>
<tr>
<td>Client Group</td>
<td>Women at risk of domestic violence</td>
</tr>
<tr>
<td>Capacity</td>
<td>40</td>
</tr>
<tr>
<td>Description</td>
<td>Support to women in tenancies and resettlement post Refuge. 1:8 £93 per person per week.</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See Strategy</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>No</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N/A</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£170,000</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£170,000</td>
</tr>
</tbody>
</table>

### Additional Service 17

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td></td>
</tr>
<tr>
<td>Client Group</td>
<td>Older People</td>
</tr>
<tr>
<td>Capacity</td>
<td>20</td>
</tr>
<tr>
<td>Description</td>
<td>Support for older people presenting for sheltered housing with alcohol problems and or likely to have other problems such as self-neglect.</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>Re-furb existing sheltered?</td>
</tr>
<tr>
<td>---------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>Awaiting information (from possible remodelling)</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>9-5 – 2 staff + em callout</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>??</td>
</tr>
</tbody>
</table>

### Additional Service 18

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Floating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Support to people in their own tenancy</td>
</tr>
<tr>
<td>Client Group</td>
<td>Older people, focus on BME or culturally specific provision.</td>
</tr>
<tr>
<td>Capacity</td>
<td>40</td>
</tr>
</tbody>
</table>

### Additional Service 19

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Community alarm Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Community alarm</td>
</tr>
<tr>
<td>Client Group</td>
<td>Older people, physical disabilities</td>
</tr>
<tr>
<td>Capacity</td>
<td>100. Currently there are 2.5 per week new service users.</td>
</tr>
</tbody>
</table>

Description

£115 Unit cost and maintenance
Installation charge £14.50
Monitoring charge £3.70 mobile response
(£129,500) (£18,200 – monitoring)
<table>
<thead>
<tr>
<th>Reason for priority</th>
<th>See Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital requirement (£) and sources</td>
<td>N/A</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N/A</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£147,700</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£147,700</td>
</tr>
</tbody>
</table>

**Additional Service 20**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Community alarm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td></td>
</tr>
<tr>
<td>Client Group</td>
<td>Victims of ‘hate’ crime</td>
</tr>
<tr>
<td>Capacity</td>
<td>100 per year (Average out at 70 ?)</td>
</tr>
<tr>
<td>Description</td>
<td>£115 Unit cost £14.50 Installation charge £50 door button £8 evaluation &amp; review (one off) £1.60 monitoring.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reason for priority</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital requirement (£) and sources</td>
<td>N</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>N/A</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>£12,565 Installation £5,824 Monitoring £560 review = £18,949</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>£18,949</td>
</tr>
</tbody>
</table>

**Additional Service 21**

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Temporary accommodation</td>
</tr>
<tr>
<td>Client Group</td>
<td>Physical disabilities</td>
</tr>
<tr>
<td>Capacity</td>
<td>8 wheelchair/mobility units s/c new build in groups.</td>
</tr>
<tr>
<td>Description</td>
<td>Visiting support adapted units for people who may have come out of</td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See strategy</td>
</tr>
<tr>
<td>---------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>Awaiting information</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>Awaiting information</td>
</tr>
<tr>
<td>Required SP funding</td>
<td>Awaiting information</td>
</tr>
</tbody>
</table>

### Additional Service 22

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td>Self contained units</td>
</tr>
<tr>
<td>Client Group</td>
<td>People with HIV &amp; AIDS</td>
</tr>
</tbody>
</table>
| Capacity | 4 units of TA  
Self contained three x 1 bed. |
| Description | Self contained units plus support |
| Reason for priority | See Strategy |
| Capital requirement (£) and sources | SCA bid for next April. |
| Capital bid made and approved (Y/N) | No |
| Total revenue requirement | To be confirmed |
| Required SP funding | |

### Additional Service 23

<table>
<thead>
<tr>
<th>Accommodation based or floating</th>
<th>Accom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Type</td>
<td></td>
</tr>
<tr>
<td>Client Group</td>
<td>Refugees/unaccompanied asylum seeking children</td>
</tr>
<tr>
<td>Capacity</td>
<td>10</td>
</tr>
<tr>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>Reason for priority</td>
<td>See strategy</td>
</tr>
<tr>
<td>Capital requirement (£) and sources</td>
<td>Awaiting further information</td>
</tr>
<tr>
<td>Capital bid made and approved (Y/N)</td>
<td>No</td>
</tr>
<tr>
<td>Total revenue requirement</td>
<td>Awaiting info.</td>
</tr>
<tr>
<td>Required SP funding</td>
<td></td>
</tr>
</tbody>
</table>

### Additional Service 24

| Accommodation based or floating | |
| Service Type | |
| Client Group | offenders and people at risk of offending |
| Capacity | |
| Description | Waiting for more information on Offenders scheme |
| Reason for priority | |
| Capital requirement (£) and sources | |
| Capital bid made and approved (Y/N) | |
| Total revenue requirement | |
| Required SP funding | |

### Additional Service 25

| Accommodation based or floating | |
| Service Type | |
| Client Group | |
| Capacity | |
| Description | |
| Reason for priority | |
| Capital requirement (£) and sources | |
| Capital bid made and approved (Y/N) | |
| Total revenue requirement | |
| Required SP funding | |
1. Summary

The report sets out revised charges for heating and/or hot water in Council dwellings and asks for delegated authority to deal with this on future occasions.

2. Purpose

To approve the revised weekly charges for heating and/or hot water in Council dwellings with communal facilities.

3. Recommendations

3.1 To approve the revised weekly charges for heating and/or hot water shown on the attached schedule from the 4th November 2002

3.2 To approve the delegation of future years revisions to central heating charges to the Director of Regeneration in accordance with para 9.2

4. Narrative

4.1 Each year, a review of the charges made to both tenants and leaseholders in Council dwellings with a communal system of heating and/or hot water is undertaken.

4.2 The method of calculating these charges was agreed by the Housing Committee in 1994. This method is briefly summarised below;

- Charges should recover the anticipated cost to the Council of providing the fuel to communal systems plus an administrative charge (of 5%).
• Energy use is based on a rolling average annual consumption per site over the previous three financial years.

• The fuel price base is estimated for the forthcoming twelve months (i.e. the current supply contract prices).

• Transitional arrangements to move from the pre 1994 ‘pooled’ system to the present ‘unpooled’ system of calculation are applied to prevent very high increases (50p maximum) or decreases in charges.

• The application of the revised charges did not require annual Committee approval.

4.3 The revised charges normally apply for the period October to September with increase Notices being sent to tenants at the end of August. However, the revision of these charges is a Key Decision under the Council’s new constitution that has not been delegated under the Mayoral Scheme of Delegation. To allow the proper processes to be completed and the decision published the effective date of the new charges (if approved) has been moved to the 4th November.

4.4 The attached schedule shows the current and proposed new charges.

4.5 The option not to amend charges now could be taken but this would mean that the margin between the economic and actual charge would be even wider.

5. **Financial Implications**

5.1 The charges for heating and/or hot water are calculated to recover the Council’s costs of fuel to dwellings. It does not include the repair and maintenance of boiler plant or heated communal areas, which are met from rental income.

5.2 The estimated cost of fuel (including the administrative charge) in the upcoming year to the sites on the attached schedule is calculated at £644,000. The income from the proposed new charges is calculated at £658,000 and, given the nature of the calculation, this small difference is considered acceptable.

5.3 Charges for some dwellings occupied by tenants with special needs have been omitted from the attached schedule, as their charges will not be revised this year due to queries on fuel consumption etc. This will be examined and incorporated in the schedule for next year.
5.4 The Office of the Deputy Prime Minister (ODPM) has recently published advice that seeks views on the management of service charges made to tenants in the light of Rent Restructuring. Officers are examining the implications of the new guidance as this may require the Council to unpool some costs on other services as well and the proposals may have a detrimental impact on housing benefit subsidy.

6. Legal Implications

6.1 This report asks for a decision which will result in the levying of charges on individual tenants on the basis of the levels set out in this report. It is for the Mayor and Cabinet to consider whether the proposals set out in this report should be accepted.

6.2 There is no requirement for the consultation of secure tenants on this matter, because the question of the charges for services or facilities provided by the authority is not (according to the definition in s.105 Housing Act 1985) a matter of housing management. (SF)

7. Crime and Disorder Implications

There are no crime and disorder implications.

8. Equalities Implications

There are no direct equality implications. However, the provision of heating and hot water from a central source with payment included as part of the weekly rent is of benefit to those with low incomes.

9. Environmental Implications

There are no environmental implications with revising the charge for heating and/or lighting. However, the fuel purchased by the Council does have environmental consequences which are dealt with as part of the supply contract arrangements.

10. Conclusion

10.1 The charges for heating and/or hot water from communal systems are reviewed annually to ensure the Council recovers its' fuel costs from those who receive the service. The revised charges are shown on the attached schedule and are recommended for approval, with an effective date of the 4th November 2002.

10.2 For future years revisions in charges, decisions could be delegated to the Director of Regeneration, subject to no change in the existing methodology set out above in para 3.2
# Background Papers

<table>
<thead>
<tr>
<th>Document</th>
<th>Held by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Committee approval on charges for heating and/or hot water - 1994</td>
<td>Glynne Gardner</td>
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If further information on this report is required, please contact Glynne Gardner (extension 47941)
### Schedule of proposed new charges for heating and/or hot water from 4th November 2002

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1. **Summary**

   The production of the Statement of Accounts and their approval by Members is a statutory requirement, with approval required by 30 September 2002 and publication by 31 December 2002.

2. **Purpose**

   To seek approval to the draft 2001/2002 Statement of Accounts. The statutory requirement for the accounts to be approved by a Committee of the Council, by the 30 September each year, is contained within the Accounts and Audit Regulations 1996.

3. **Recommendation**

   To approve the draft 2001/02 Statement of Accounts, as attached, to note the statutory requirement for approval by members by 30 September 2002 and for the Accounts to be published by 31 December 2002.

4. **Approval of Statement of Accounts**

   4.1 The Accounts and Audit Regulations 1996 govern the accounting requirements for all local authorities. They also form the statutory basis for the Accounting Code of Practice which details best practice in accounting. The Regulations are also designed to encourage local authorities to produce timely and good quality accounts.

   4.2 The Regulations state that, for each financial year, the Accounts should be signed by the Chief Financial Officer and approved by a Committee of the Council by 30 September. In this respect the Executive Director for Resources and Deputy Chief Executive has signed a statement on 2 August 2002 that the Accounts present fairly the financial position of the Council as at 31 March 2002 and its income
and expenditure for the 2001/02 financial year. This is shown on page 13 of the Accounts.

4.3 The Accounts were passed to the District Auditor for external audit on 5 August 2002. Any amendments that arise from the audit of the Accounts are required to be reported back to the members who approved them. The Audit is progressing well and the Auditor’s opinion is expected by the end of September.

4.4 Sections 15 and 16 of the Audit Commission Act 1998 give electors the right to question the auditor or object to the Accounts. For 2001/02, this date has been set for 4 October 2002. Immediately prior to this the Accounts will be available for public inspection for 15 working days. Therefore the Accounts will be open for public inspection between the 16 September 2002 and the 4 October 2002 and an advertisement was placed in the local press on 30 August to this effect. It is also a requirement that any changes to the Accounts that arise from the audit, are advertised in the local press with the notice of conclusion of the audit.

4.5 Following the conclusion of the audit, it will be necessary to report back to the Executive for approval to the publication of the final audited Statement of Accounts. This is expected in late October / early November 2002.

5. OVERVIEW OF THE ACCOUNTS

5.1 Revenue

5.1.1 The Consolidated Revenue Account (pages 22-23) has been produced in accordance with CIPFA’s Best Value Accounting Code of Practice and now includes a service expenditure analysis which shows more detail for each main service. Prior year figures have been re-stated to aid comparison, apart from those relating to the Housing Revenue Account. As in previous years, an annexe showing detailed income and expenditure by directorate is included on pages 84-93.

5.1.2 Executive Committee and latterly the Mayor and Cabinet received regular monitoring reports throughout 2001/02 comparing the likely end-of-year outturn against approved budgets. The final outturn was reported to Mayor and Cabinet on 17 July 2002 and various financing decisions were agreed. The Consolidated Revenue Account on pages 22 and 23 shows a summary of the overall position once all these decisions have been implemented. The net expenditure chargeable to the General Fund was £303.664m (after appropriations & use of reserves), which was financed by income from Grants and Local Taxpayers of £301.864m, resulting in a net deficit of £1.800m.

5.1.3 This deficit has been charged to the general fund balance of £7.600m leaving a year-end balance of £5.800m as at 31 March, to be
replenished on 1 April to the level of 2.5% of annual net revenue expenditure, as discussed with District Audit. In order to smooth between years, £2m will be contributed to the general fund balance from revenue working balances in 2002/03, as agreed by Mayor and Cabinet as part of the outturn report submitted on 17 July 2002 (Recommendation 4.4).

5.2 Capital

A summary of capital spending of £75,826m and how it was financed is shown on page 7. £47,633m was spent on the Housing Investment Programme and £28,193m on other services. Lewisham’s fixed assets are valued at £1,686,398m as shown in the Consolidated Balance Sheet on page 40 and in the subsequent notes.

5.3 Trading Accounts

A summary of the authority’s trading operations is shown on pages 24-25. In accordance with the Best Value code of practice, any significant surpluses or deficits have to be re-allocated to service expenditure. In this respect, £1,501m of the surplus achieved by Building repairs and maintenance has been credited to the Housing Revenue Account and the deficit of £1,515m on refuse collection has been charged to Environmental Services and is included in the total for street cleansing, waste disposal and collection shown on page 23.

5.4 Housing Revenue Account

5.4.1 The HRA on page 32 shows the cost of financing, managing and maintaining the Council’s housing stock. The account has been re-formatted following the introduction of a new accounting framework by the DETR called resource accounting, which became effective from 1 April 2001. The main changes are the introduction of charges for the cost of capital and depreciation and a new element of subsidy, the major repairs allowance. The charges for cost of capital and depreciation are reversed out below the net cost of services, so as not to have an effect on rent levels.

5.4.2 There was a deficit of £0.115m for the year which was charged to HRA reserves and balances, which now stands at £12.387m (note 18 on page 38 shows a breakdown of this amount).

5.5 Collection Fund

The Collection Fund on page 68 shows the income due by way of Council Tax and National Non-Domestic Rates and how this income has been distributed to Preceptors and Lewisham’s General Fund. The deficit on the fund for 2001/02 was £0.665m, largely due to increased contributions to bad and doubtful debt provisions.
5.6 Pension Fund

The Pension Fund Accounts on pages 72 - 78 show both the income and expenditure for the year and the value of the fund’s assets. The fund’s net assets declined by £15.061m to £512.304m, broadly reflecting the fall in the major investment markets. Following the last actuarial review, the employer’s contribution has increased from 12% to 12.75%, with effect from April 2002.

6. Financial Implications

These have been addressed in the body of the report.

7. Legal Implications

These have been addressed in the body of the report.

8. Equality Implications

None specifically resulting from this report.

9. Crime & Disorder Implications

None specifically resulting from this report.

10. Environmental Implications

None specifically resulting from this report.

11. Conclusion

The approval of the Accounts will comply with the statutory requirement to obtain members approval before 30 September.

<table>
<thead>
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<th>BACKGROUND PAPERS</th>
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<tr>
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For further information please contact Steve Pearson, Financial Management Division, Resources
1. **Summary**

1.1 There are currently three sources of residential care for children and young people in Lewisham: in house provision at Bromley Road, through a contract with Barnardo’s and through spot purchasing in the private and voluntary sector. This report reviews these commissioning arrangements and sets out future options, including the proposed closure of Bromley Road.

1.2 The review of the role and function of Bromley Road was a component of Best Value Review. Although the home has provided good quality care to children it has been beset by a number of longstanding difficulties. The review, together with the reports of the registration and Inspection Unit indicate that for a number of reasons the necessary safeguarding of residents cannot be guaranteed. Further, improvements in commissioning arrangements and care planning for children indicate that a single in house children’s home such as Bromley Road is not the most efficient and effective way of providing residential services for children. This report therefore recommends the closure of Bromley Road children’s home.

2. **Purpose**

To seek agreement to the closure of Bromley Road Children’s Home.

3. **Recommendation**

That Bromley Road children’s home be closed.
4. **Reasons for recommendation**

4.1 Of the 550 children currently looked after by Lewisham, 80 live in children’s homes. Of these, there are currently 4 children living at Kusadiki, the children’s home Lewisham have commissioned Barnardos to run on our behalf and the remainder are in children’s homes in the private and voluntary (P+V) sector.

4.2 The remainder of our looked after children live in a number of other settings, including in house fostering, P+V fostering, with family or friends, in their own accommodation or in semi-independent accommodation, with a small number being placed in Secure Units, boarding schools and other settings.

4.3 The best outcomes for children are achieved by ensuring that children and young people in our care are carefully matched to the placement that best meets their needs. The Placements Team was created in October 2001 as part of the Newstart restructuring of children’s services to facilitate this process and to ensure the best possible use of available resources. All placements for children (both in house and externally purchased) apart from adoptive placements and family based respite for disabled children are now arranged through this service.

4.4 As a result of the work of the Placements Team we have improved our knowledge and practice in commissioning services for children. This, together with the independent report of Bromley Road and other findings of the Best Value Review, means that we are now in a position to formalise our strategy for commissioning placements. This will include a move away from spot purchase, better analysis and projection of need, development of joint funding formula and formation of further consortia. The market will be better managed.

4.5 As part of Lewisham’s Best Value Review of looked after children’s services, an independent person was commissioned to review both the functioning of Bromley Road and its effectiveness and efficiency. The review was comprehensive, taking place from September 2001 to February 2002. The draft report was completed in March 2002. The review concluded that there had been considerable and long standing difficulties at the unit and that these were exacerbated by Lewisham having only one rather than several, in house children’s homes. The detail of these findings are set out below.

5. **Best Value Review Findings**

5.1 Bromley Road Children’s Home was opened in 1998, as a seven bedded children’s home to provide short term residential care for young people in order to help them to return to their families as soon and as safely as possible.

5.2 Because of its dual function to both actively rehabilitate children as well as provide high quality residential care the unit was staffed at a level higher than that of most comparable children’s homes. Considerable planning went into the setting up of the home, a children’s home project team being set up in October 1996, with a senior management lead. In recognition of the unit’s
dual function it was described as a Residential Support Centre and the statement of purpose of the home made clear that admissions to the home were to be made on a planned basis.

5.3 Following requests from district based social work staff for emergency residential provision outside office hours, one of the beds was formally designated for emergency use in June 2000. The statement of purpose of the home remained that the other beds should be for planned admissions. However, in August 2000, following concerns about the way the young people in the unit were behaving, analysis by senior managers showed that the majority of the six residents had in fact been admitted on an emergency basis. This caused significant difficulties for both staff and residents.

5.4 The unit has consistently had difficulty recruiting staff and the unit has never been fully permanently staffed. In particular there have been difficulties establishing a stable management team, with frequent changes of assistant manager.

5.5 Staff sickness has also been a significant problem. During 2001, all three managers had considerable periods of sick leave, as did a number of the other staff. From the outset the management and the operation of the home suffered through lack of consistency caused by absences and temporary cover arrangements. Relationships within the staff team were further strained by the lack of a stable consistent management team.

5.6 In July 2001 the Registration and Inspection Unit recommended that no further placements be made at Bromley Road. The unit was not operating effectively or fully meeting inspection standards. Many of the standards that were not met seriously limited the ability of the unit to ensure that all children were appropriately safeguarded. There was evidence that recommendations of previous inspections by Lewisham’s Registration and Inspection Unit had not been implemented.

5.7 The young people (residents and ex residents) who were interviewed as part of the independent review did, however, indicate that their experiences of living at Bromley Road were broadly positive.

5.8 The evidence of the review is that substantial change would be required in order to re-open the unit. This would include recruitment of permanent staff to the full establishment, comprehensive staff training, thorough revision of the unit’s policy and procedures, and revision of and strict adherence to the admissions procedure. Additionally, the unit would need to comply with the newly introduced National Minimum Standards for the residential care of children and young people.

5.9 Without these major improvements Lewisham could not guarantee the safeguarding and high quality of care that Lewisham children looked after by the Council need. The history of Bromley Road and the long-standing difficulties suggest that at this time the unit is unlikely to be able to meet this challenge.
6. **Options**

6.1 There are three possible options for action. These should be viewed, however, in the context of the changing pattern of the provision of care in Lewisham. As a result of management action within the Children's and Young Peoples Division, the overall number of looked after children is actually reducing. This is an extremely unusual pattern, and although it is very difficult to predict future movements in the care population with certainty, it is hoped and anticipated that there will be a further reduction. The age profile of the children in our care is also changing.

6.2 There are also a number of developments planned and ongoing that mean the need for such services is likely to reduce.

These include:

- Improvement of recruitment and retention of Lewisham foster carers
- The proposed provision of residential services jointly with Greenwich Council. It is expected that this work will be tendered in the Autumn
- Development of a commissioning strategy and improved management of the P+V market through strengthening of the Placements Team
- Strengthening of care planning for children within the department through a range of measures including far better management oversight of cases through the care planning panel chaired by senior managers
- Increased use of and timeliness in adoption contributing to the reduction in numbers of looked after children and a reduction in the length of time younger children are looked after.

6.3 In addition to the recommended option, closure of the unit, Bromley Road could be reopened supported by the actions outlined above or the range of in house residential provision could be expanded. The work currently underway, however, means that the future level of demand for local residential services is uncertain and therefore it is not the right time to consider increasing residential provision in Lewisham.

   a) **Option 1 – closure of Bromley Road**

      This is the recommended option for the reasons outlined above.

   b) **Option 2 – reopening the unit**

6.4 There is little evidence to suggest that a reopened unit even supported by the actions outlined above would meet the high standards required. It would also allow little flexibility in service provision.

   c) **Option 3 – expansion of in house residential provision**
6.5 There are potential professional and financial benefits to running several children’s homes rather than a sole unit. The units support each other and it is easier to maintain high occupancy, thereby reducing unit cost. If this approach were to be taken, Lewisham would need two single sex, six bedded units with higher staffing ratios in order to take emergencies and young people with more challenging behaviour, and one 7 bedded mixed unit to take planned admissions.

6.6 The potential unit costs of these new children’s homes could be competitive compared to purchasing these placements in the P+V sector. Very substantial investment would be required, however, and there is again risk that the necessary high standards would not be achieved.

7, **Financial Implications**

7.1 Since opening, the unit costs of Bromley Road have been high. The main reason for this has been that there have been a number of periods of low occupancy due to the difficulties in the unit set out above.

7.2 A children’s home that takes mostly planned admissions should be able to maintain 85% occupancy. At 85% occupancy, the indicative unit cost of placing a child at Bromley Road would be £1865 per week (this excludes the cost of the family support and outreach work the unit undertakes). The current average indicative unit cost of placing a child in P+V residential care (excluding Secure Accommodation and semi-independent accommodation for care leavers) is £1999 per week, of which the cost to Social Care and Health, excluding education, is £1870.

7.3 By operating 3 children’s homes as above the unit costs for the two six bedded emergency units at the expected 70% occupancy rate would be likely to be £2,520 per week and the unit cost for the 7 bedded unit at 90% occupancy would be £1,390 per week. These costings assume stable service provision. This could be more cost effective than continuing to spot purchase such services from independent providers.

7.4 This approach would, however, require considerable additional resources. Two six bedded units would cost £ 550,000 per annum each, plus the cost of premises. The seven-bedded unit would cost £454,000 per annum and could be run from the current Bromley Road premises. The independent reviewer also recommended that an additional manager would need to be appointed to oversee these 3 units, which would cost approximately £42K per annum. The current budget for Bromley Road is £490,000. An investment of over £1.42 M, plus the cost of two premises, would be required.

7.5 Lewisham will continue to need local high quality residential services for children. If Bromley Road is closed, the children who would have been resident there will need to be placed either with Lewisham foster carers or in the private and voluntary sector fostering or in residential care.
7.6 Lewisham currently places almost half of its looked after children in private and voluntary foster and residential placements. Last year the cost of these placements rose much more quickly than expected due primarily to increasing average unit cost and increasing average length of stay. It is expected that improved care planning for children and implementation of a commissioning strategy will reduce the likelihood of this in future.

7.7 If the Mayor agrees to the closure of the home, then this would be taken as a budget reduction and contribute to the action being taken by the Directorate to contain spend within its cash limit. There are currently eight staff in post, at the moment in placement in other parts of the service. Should these staff not be redeployed, redundancy costs may be incurred.

7.8 If the building were to be sold, the Executive Director for Resources would apply the capital receipt to support the Council’s revenue budget position.

8. Legal Implications

8.1 The Local Authority has the power to provide residential care home places either through direct provision, or indirectly from the private and voluntary sector, pursuant to the Children Act 1989.

8.2 With the passage of the Care Standards Act 2000, Local Authority run homes became subject to registration and inspection by the National Care Standards Commission, with minimum national standards imposed by regulation. Failure to comply with these could result in prosecution or cancellation of registration. In addition, the existence of poor standards in any such home may render the Local Authority liable for claims for negligence arising from any incidents in the home.

8.3 In addition, with respect to the running of the home, and the provision of residential services, the Local Authority must always have regard to the need to provide best value services and any recommendations made as a result of a best value review.

8.4 The closure of the home would have human resources implications, which would be managed following the corporate Human Resources procedures. Policy in relation to redeployment and redundancy of staff would be followed and the Trades Unions and staff would be fully consulted.

8.5 Under S3 Local Government Act 1999, a best value authority must make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness. S5 of that Act requires authorities to conduct reviews of its functions in accordance with orders issued under that section, and should the Secretary of State form the view that a best value authority is failing to comply with the requirements of the Act, he may intervene in a variety of ways, including directing that a specified function be performed by his nominee for a specified period.
9. **Crime and Disorder Implications**

None.

10. **Equalities Implications**

Looked after children are a disadvantaged group with generally poorer outcomes than for other Lewisham children. Lewisham must provide them with the highest standard of care possible and given the longstanding difficulties in Bromley Road children’s home, it is likely to be in the best interests of Lewisham looked after children that the unit be closed.

11. **Environmental Implications**

None

12. **Conclusion**

12.1 Since it opened Bromley Road has failed to fully meet inspection standards. The reasons for this include, lack of stability in the staff group, failure to draw up and fully implement a full set of policies and procedures, and lack of clarity around and non adherence to the statement of purpose and admissions policy. Evidence of this comes from both the independent person’s report as part of the Best Value Review and from inspections carried out by Lewisham’s Registration and Inspection Unit. Adequate safeguards have not been in place to ensure that children were always received appropriate care.

12.2 High standards and best value for money are not promoted by running a sole in house children’s home. The Best Value Review concludes better service and better value for money can be achieved by closing the unit and implementing a commissioning strategy.

**Background Papers**

None

For further information on this report please contact Karin Courtman, Group Manager Looked After Children on 2028 314 8385.
1. Summary

Draft eligibility criteria were submitted to the Mayor’s Cabinet on 19th June 2002. Following this, a consultation exercise of key stakeholders has taken place and the proposed eligibility criteria have been amended. The key changes concern the inclusion of carers, challenging behaviour, and comprehension of risk.

2. Purpose

2.1 To note the consultation exercise undertaken by Social Care & Health Directorate from 15th July to 30th August 2002.

2.2 To seek approval from members to implement the revised eligibility criteria for adult community care services from 1st October 2002 in line with Fair Access to Care Services guidance.

3. Recommendations

3.1 Note the results and issues arising from the consultation exercise undertaken by Social Care & Health Officers.

3.2 Agree the revised eligibility criteria for adult community care services.

3.3 Agree the proposal to implement the revised eligibility criteria for adult community care services from 1st October 2002.

4. Background and Policy Context

4.1 On the 19th June 2002 Mayor and Cabinet considered a report which sought permission to undertake consultation on the revised adults eligibility criteria to bring it in line with the government’s new Fair Access to Care Services guidance.

4.2 The new guidance requires councils to review their eligibility criteria for all adult community care services. It proposes a framework based on individual’s...
needs and their associated risks to independence which includes four new eligibility bands: critical, substantial, moderate and low, and requires all councils to adopt these bands in determining their criteria.

4.3 The report highlighted that the main impact of the review on eligibility criteria was to focus service provision on those with higher levels of need, unless it could be demonstrated that those with lower levels of need would fall into higher categories of need without service provision. The review of eligibility criteria provided an opportunity to re-frame the criteria so that services are prioritised and targeted at those with the highest levels of need and those at the greatest risk.

4.4 Mayor and Cabinet agreed for work to continue on revising the eligibility criteria to bring it in line with Fair Access to Care Services guidance and undertake a consultation with service users, carers, staff and partner agencies.

5. Consultation

5.1 The purpose of the consultation exercise was to brief and consult with stakeholders on the newly drafted eligibility criteria to bring them in line with Fair Access to Care Services guidance. The consultation period ran from 15th July 2002 to 30th August 2002.

5.2 Consultation has been carried out and conducted to meet Council standards. It has targeted all stakeholders including service users, carers, internal and external providers of services and voluntary sector organisations representing various user groups. The method, results and details of the Fair Access to Care Services consultation are attached to this report. (see Appendix 1)

5.3 The key messages and conclusions from the consultation are summarised below.

5.4 Prevention/Risk

Concerns were expressed that application of the new eligibility criteria had risks attached for service users and their carers in terms of breakdown and increasing levels of need. It was felt that often services not only provided practical support but also were a way of ensuring that the service users were less likely to be overlooked and therefore move more quickly to high risk situations eg hospital admission, residential care.

5.5 Carers

Concerns about the possible increased burden on carers is mentioned frequently. If services are withdrawn and sufficient alternative types of service not identified carers felt that they would bear more responsibility in the caring role and in some cases have less respite. They also stated that this would result in a possible increase in stress and illness on the carer.
5.6 **Multi-Agency**

Health (Mental Health for Older Adults and Mental Health for Adults) both expressed concerns about the need to assess using the same criteria as mental health services are multi-agency therefore a coordinated approach is paramount.

5.7 **Impact on providers / social care market**

Private Domiciliary care agencies were concerned the introduction of a new eligibility criteria would have an adverse effect on the smaller company. Reduction of users could mean unemployment of staff and possible closure of agencies.

5.8 **Voluntary sector support**

There were doubts about whether the voluntary sector could provide the support for former service users after services were withdrawn. There was some doubt whether organisations had the capacity or indeed whether they existed to cover the different client groups and their possible needs.

5.9 **Consultation/Participation/Redress**

A number of queries were made in relation to what service users and carers could do if a service was withdrawn. This included what the appeals process was and what redress the individual could have if it were shown that the service user had deteriorated due to withdrawal of the service.

5.10 **Challenging Behaviour**

Learning Disabilities services highlighted the need to ensure that challenging behaviour was included within the criteria examples (self-injurious behaviour, regular or intense assaults on carer, service user, staff or members of the public). The service has made suggested amendments to the criteria examples.

5.11 **Comprehension of Risk**

Learning Disability services also made suggested amendments under the “Moderate” heading. This is recognition that there may be high risk factors present but risk assessment indicates the service user has the ability to comprehend risk and make choices/consent.

5.12 The following submissions received through the consultation process have been included in the final draft of the revised eligibility criteria.

<table>
<thead>
<tr>
<th>Eligibility Band</th>
<th>Agreed Amendments from Consultation Exercise</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRITICAL</td>
<td>Your situation and circumstances are putting an unacceptable strain on your carer/s, significant social</td>
</tr>
</tbody>
</table>
support systems and relationships which are in imminent danger of breaking down

You are at risk of accidental harm or not having your essential needs met sufficiently because your carer is in a crisis due to illness or other critical difficulties.

To meet criteria ‘vital social support systems and relationships cannot or will not be sustained’.

You need support because the role of your carer will not be sustained without this.

You are at risk of accidental harm or not having your essential needs met sufficiently because your carer is in a crisis due to illness or other critical difficulties.

To apply criteria ‘vital involvement in work, education or learning cannot be sustained’ equally for carers.

You need support because your carer’s vital involvement in work, education or learning will not be sustained otherwise.

Self-injurious behaviour that is not managed and is likely to cause significant harm to user.

Regular or intense assaults on carer, service user, staff or members of the public are sufficient to cause an immediate breakdown in current placement/living situation.
| **SUBSTANTIAL** | You need support because your carer’s vital involvement in work, education or learning will not be sustained otherwise  

The role of your carer, as your major support system, will not be sustained without a range of support services.  

Your carer is not able to maintain their principal daytime activity e.g. working, learning or social without some assistance.  

To meet criteria ‘the majority of social support systems and relationships cannot or will not be sustained’.  

The role of your carer, as your major support system, will not be sustained without a range of support services.  

Your mobility outside the home is severely restricted and you cannot access the community.  

To meet criteria ‘involvement in many aspects of work, education or learning cannot or will not be sustained’.  

You are finding it very difficult to access or maintain your principal daytime activity, e.g: working or learning without some assistance.*  

Regular or intense assaults on carer, service users, staff or members of public, which are managed within the service/placement.  

Self –injurious behaviour related to specific circumstances that are controllable (e.g. lack of stimulation in service environment) |
| **MODERATE** | High risk factors present but risk assessment indicates ability to comprehend risk and make choices/consent. |
| **LOW** |  |

**At the time of writing, Health consultation responses are due to be received.**  
The eligibility criteria will be finalised following receipt of responses from Health These will be tabled on 11th September at the Mayor’s Cabinet..
5.14 On 10th September 2002, Select Committee will consider feedback on the consultation process for the revised eligibility criteria. The committee has invited a number of stakeholders who have been consulted with and will listen to their views.

5.15 Copies of this report, the attached consultation report and draft eligibility criteria will be circulated to all internal and external providers of services for adults and voluntary sector organisations representing them. Copies will also be available on Lewisham’s website and in the Lewisham library.

6. Revised Eligibility Criteria

6.1 The revised eligibility criteria have been developed after consultation with our stakeholders, using the Fair Access to Care Services guidance.

6.2 Eligibility criteria describe who will receive Social Services, based on a careful assessment of an individual's needs. When a person receives a community care assessment, Social Care and Health Officers use the eligibility criteria to determine whether social care services should be provided to enable individuals to maintain their independence. Eligibility criteria assist Social Services Officers in reaching difficult decisions in a fair, consistent and open manner according to a standard formula for each type of need.

6.3 Fair Access to Care Services stipulates that councils should use the exact wording of the eligibility bands as provided in the guidance to describe the needs it will meet. This will ensure that adults eligibility criteria are standardised across all councils in England.

6.4 Following Fair Access to Care Services guidance, Lewisham’s revised eligibility criteria is divided into four bands (critical, substantial, moderate and low) which describe the seriousness of risk to independence and outline needs that may indicate these levels of risk. This provides a framework to describe those circumstances in which individuals would be eligible for help. This banding is consistent with the Care Programme Approach for Mental Health service users (Critical and Substantial bands are equivalent to Enhanced CPA, Moderate is equivalent to Standard CPA).

6.5 People assessed as falling within critical and substantial bands will become eligible for services. If eligible, individuals will be referred on to more specialist teams such as Intermediate Care, Mental Health, People with Learning Disabilities or Substance misuse for specialist assessment.

6.6 Those whose needs are assessed as moderate or low will not normally be eligible for directly provided community care services, unless it is considered that those in moderate need may be more likely to move into either critical or substantial need without service provision. Those individuals falling below the threshold for SC&H services will be provided with information about other agencies who provide advice and support services.

6.7 There will be no changes to services for existing users without a full reassessment of their needs by a Social Care and Health Officer using the revised eligibility criteria, prior to any change of decision about their eligibility.
for services. It is proposed that all new users will be assessed using the revised criteria from 1st October 2002 onwards.

7. Implementation Process

7.1 If the recommendations in this report are agreed by Mayor and Cabinet, the revised eligibility criteria will be implemented from the 1st October 2002. The following timetable outlines the implementation process:

<table>
<thead>
<tr>
<th>Action</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Train Staff</td>
<td>17th Sept 2002</td>
<td>30 Oct 2002</td>
</tr>
<tr>
<td>3. Briefings for other agencies and our Health Partners</td>
<td>17th Sept 2002</td>
<td>30 Oct 2002</td>
</tr>
<tr>
<td>4. Implement revised eligibility criteria</td>
<td>1st Oct 2002</td>
<td>7th April 2003</td>
</tr>
<tr>
<td>5. All existing service users care plans must to be reviewed to apply new criteria</td>
<td>1st Oct 2002</td>
<td>7th April 2004</td>
</tr>
<tr>
<td>6. All potential new service users assessed with revised eligibility criteria</td>
<td>1st Oct 2002</td>
<td>On-going</td>
</tr>
<tr>
<td>7. Revised eligibility criteria implemented into adults policy and procedures care management manual</td>
<td>1st Oct 2002</td>
<td>7th April 2003</td>
</tr>
<tr>
<td>9. Evaluation</td>
<td>To be decided</td>
<td>To be decided</td>
</tr>
</tbody>
</table>

7.2 Social Care and Health Officers and Managers will train all front line Social Workers and Occupational Therapists and will deliver briefing sessions for partner practitioners from other agencies.

7.3 The revised eligibility criteria will be applied to potential new users and to current users following a review and re-assessment of needs and service entitlement from the 1st October 2002.

7.4 The revised eligibility criteria will be incorporated into the Adults Care Management Policy and Procedures manual. All procedures, policy, forms, letters etc. will be updated in accordance with Fair Access to Care Services guidance. A pamphlet will also be published with the revised eligibility criteria as well as Lewisham’s preventative strategies. It is requirement on local authorities to publish with their eligibility criteria their approach to prevention.

8. Implications

8.1 Review rates currently achieved are relatively low (around 2,831 or 47% per year) due to staff shortages which tend to result in a focus on assessing and arranging services for high need referrals and reviewing those clients. The requirement to undertake re-assessments of all existing service users using the revised eligibility criteria by April 2004, will provide extra focus to the existing requirement to review all care packages.
8.2 The revision of the eligibility criteria provides an opportunity to review and monitor the application of service eligibility across services. As a result of the review and re-assessment process, service users levels of service may increase, remain the same, decrease, or cease.

8.3 In order to minimise any negative impact on the revised eligibility criteria, there will be a co-ordinated approach to the development of preventative strategies and services. These include the Strategy for an Ageing Population, Supporting People and the use of prevention grants. Preventative strategies will be published with the revised eligibility criteria pamphlet.

9. Options

The council is required to review and implement its eligibility criteria in line with the government's Fair Access to Care Services guidance by 7th April 2003. This requirement is statutory and mandatory for all authorities. Lewisham is aiming to implement the revised eligibility criteria by 1st October 2002.

10. Financial Implications

10.1 The costs of undertaking the consultation are £691. This has been found from within existing budgets.

10.2 The exact financial impact of any changes to the eligibility criteria for adult services cannot be predicted with accuracy until all current service users have been assessed against the new criteria and been assigned the correct banding for their level of need. Some financial modelling has been undertaken based on a very small sample of cases where the agreed care package was assessed against the new bandings in terms of ascertaining the effect on services, costs and risks of applying the new criteria. This has demonstrated that there is potential to make savings although there will also be increased costs in some cases.

10.3 There should be a 2-stage impact on the Directorate budget. Firstly, there will be a change in the costs of the individual care packages; this is expected to produce an overall reduction in costs. Second, there will be savings from the reduction in service provision as less services are required; again, it is difficult to quantify the impact before all clients have been assessed under the new criteria.

10.4 For 2003-4, the Directorate is to contribute £2m to the Council's overall savings target of £10m. It was envisaged that this would be met through reviewing the eligibility criteria but it is unlikely that this figure will be achieved in the next financial year. The Directorate will have to find compensatory savings elsewhere within its cash limit.
11. **Legal Implications**

11.1 Councils have a duty under s47 NHS and Community Care Act 1990 to assess those whom it appears to them, may be in need of Community Care services, and to whom they may provide such services. Having carried out an assessment there is a further duty to make a decision as to whether or not their clients needs call for the provision by them of any such services.

11.2 Thus Councils have a duty to assess people who appear to be in need of possible community care services, even if there is only a power (and not a duty) to subsequently provide services. The provision of service decision is made, having regard to the results of the assessment, and will use lawful eligibility criteria, which may mean that services are not provided to meet needs which have been identified by assessment.

11.3 Councils are required to undertake a review of their adults' eligibility criteria to bring them in line with the governments *Fair Access to Care* guidance. *Fair Access to Care* guidance provides councils with a framework to achieve fair access to care services through reviewing and revising their eligibility criteria for adult social care.

11.4 Councils are required to consult with stakeholders prior to the implementation of the scheme, and to have regard to the outcome of the consultation when forming decisions. The consultation process should enable stakeholders to have sufficient time and information to respond in an informed and meaningful way.

11.5 Existing service users must continue to receive services at their current level which cannot be revised or altered without a re-assessment of their needs.

12. **Crime and Disorder Implications**

None.

13. **Equalities Implications**

13.1 The *Fair Access to Care Services* guidance aims to provide a fairer and more equitable approach to service delivery across all client groups. This review of adults eligibility criteria enables us to ensure that resources are used efficiently by prioritising and targeting services at those with the highest levels of need and those at the greatest risk.

13.2 The greatest impact will therefore be on low priority, low need and low risk users who may have services reduced. This is likely to disproportionately affect older people and women as they consume more social care services.

14. **Environmental Implications**

None.
15. Conclusion

The government requires us to update our approach to adult’s eligibility criteria to bring it in line with *Fair Access to Care Services* guidance. In order to meet the proposed timescales it is imperative Mayor and Cabinet agree the draft changes made to the eligibility criteria and implementation process to ensure the revised eligibility criteria are implemented by the 1st October 2002.

**Background Papers**

Department of Health, *Fair Access to Care Services: Guidance on Eligibility for Adult Social Care*, April 2002 (check date)


Consultation Report

1 Background

1.1 On the 19th June 2002, Officers from Social Care & Health updated Mayor's Cabinet on changes in legislation for determining eligibility for adult social care services, seeking approval for proposals to remodel Lewisham's regime accordingly, and approval to undertake consultation on these proposed changes.

1.2 The council has a duty to consult on any significant changes in the eligibility criteria and this change will have a substantial impact.

1.3 Consultation has been carried out and conducted to meet Council standards and has targeted all stakeholders (service users, carers, staff, internal and external providers of services, our health partners and voluntary sector organisations representing the various user groups).

1.4 The purpose of this report is to feedback to officers and members the results and issues arising from the consultation exercise.

2 Method

2.1 Consultation period agreed to be from the 15th July 2002 until 30th August 2002

2.2 All service users of non-residential services were sent a letter via their service provider explaining that following Government legislation the council were obliged to make changes in the eligibility criteria and that a consultation exercise was about to take place.

2.3 The letters also invited service users and carers to contact the department to request a copy of the draft criteria therefore enabling them to feedback any comments and also attend a public meeting on the 14th August.

2.4 Letters (with committee report and draft eligibility criteria attached) were also sent out to key stakeholders (providers of non-residential services, the voluntary sector and our health partners) inviting them to comment on the draft. These stakeholders were also informed that officers representing Lewisham Social Care and Health were available to visit organisations to present the draft eligibility criteria and record any comments and feedback. They were also invited to the public meeting (see above).

2.5 Meetings held with some stakeholders who requested a visit (see appendix). Meetings were formalised to the extent that there was a presentation on the draft proposals followed by questions and comments from participants.
Meetings were conducted by the Project manager with the support of various officers in the department.

2.6. Minutes were taken on feedback at all meetings. Phone, letter and e-mail also received responses to the proposals. All written feedback was acknowledged and direct feedback provided when necessary.

2.7. In addition the draft eligibility criteria were accessible on the council website and were also e-mailed to all service units within Social Care and Health.

2.8. An advert informing the public of the changes to the eligibility criteria, details on how to get a copy of eligibility criteria and information regarding the public meeting was placed in the Lewisham Mercury.

3. **Issues arising from the Consultation Exercise**

3.1. Letters to users were cascaded down through service providers. Feedback from some users indicated that they received their letters late in the consultation process.

3.2. There was a request for letters and other communication to be produced in larger print when carrying out similar exercises in the future.

3.3. Some felt that the consultation had been badly organised and the general public would have found it hard to understand. It was highlighted that there was a big delay from when the Department of Health guidance being published in April to the consultation taking place in July and August (traditional holiday period). It was also mentioned that the consultation period was very short (6 weeks) and it was not clear what influence those consulted comments would have in the final eligibility criteria document.

3.4. One person felt that the cost of consultation was a waste of money.

4. **Feedback on Issues related to the draft revised eligibility criteria**

4.1 There was a mixed reaction to the proposed changes in the eligibility criteria policy, concern was expressed about those service users who would no longer be eligible for services, what would happen to them, and some feeling that the whole exercise was to cut costs. Issues raised within the consultation exercise are listed below. Where similar views have been held by a number of stakeholders the origins of these views have not been identified. Where stakeholder’s views have been more specific they have been identified.

4.2. One user stated that the present criteria worked well, therefore she wanted to know why it was being changed with the introduction of the new criteria. *She was advised that this was D.O.H Guidance. However, some people expressed the view that it was to do with saving money by cutting the budget*
4.3 One person said that the Council must tell the government the views of the people of Lewisham regarding this issue. Some people asked for the names of people at the D.O.H to write and express their opposition to the new eligibility criteria. Government ministers names were provided.

4.4 There were concerns that reassessments would demand a high level of resources and extra staff and it was felt unrealistic that reassessments could be completed by April 2003. This was agreed and has been reported in committee report section 9.1

4.5 Concern was expressed that the threshold for services for moderate risk and low risk both refer to people who have difficulty shopping and with home maintenance and who do not have assistance available. It was felt that what appears to be overlooked is that in the absence of such services people could move more quickly to high risk situations and emergency admission to residential care becomes the only option to ensure recovery. Information will be provided on teleshopping and Internet shopping facilities.

4.6 It was highlighted that not being able to observe religion was regarded as a substantial risk yet shopping was regarded as a regular domestic routine. Shopping was felt to be considerably more substantial than not being able to observe religion an area where churches etc could be taking some responsibility. Information will be provided on teleshopping and Internet shopping facilities.

4.7 The impact on elderly people who currently receive Domiciliary services, following the re-assessment process, may lead to an increase in service levels or those classified as having moderate or low needs may not be eligible for directly provided community services, in which case could again lead to high risk situations. See committee report section 9.3 – People assessed as Moderate under the new eligibility criteria will be eligible for services if it is thought their needs would become Substantial if services were not provided.

4.8. It was highlighted that the policy of recommending private care services to those not in the critical and substantial risk groups would be unacceptable to many older people. It was stated that many would find these options financially impossible. Noted for future consideration.

4.9 There is no reference made to an appeal system for those users who are denied future services. Will those service users who have been denied future service receive a copy of the assessment on which their services are decided or refused? Participants were advised that following an assessment, the individual had the right to appeal if they were not satisfied with the decision re their eligibility for a service or not.
4.10 There was some concern over whether the voluntary sector would have the capacity to help those former users who no longer met the new eligibility criteria.  
**Noted for future consideration.**

4.11. There appears to be no mention that health professionals will be consulted and advised if services are to be removed from existing service users.  
**This would be covered under adult procedures.**

4.12. It was asked if the council propose to compensate elderly people whose welfare and health can be shown to have been adversely affected by the removal of services.  
**A service user’s appeals procedure exists.**

4.13 Carers expressed concern about the changes made to the Department of Health wording by Lewisham Social Care and Health. Most importantly for carers the phrase ‘vital social support systems or relationships cannot or will not be sustained’ was changed to ‘many social support systems and relationships are, or could be, at great risk’. Carers are often the most vital social support system for the client and the Department of Health clearly states that this role must be sustained. It was felt that the document should state “carers” rather than using other terms.

4.14 Concern was expressed by carers that re-assessments could lead to a reduction in services and result in more stress and pressure for the carer. There were worries that clients with carers would be more likely to have services stopped and the carer be 'left to get on with it'.

4.15 The Carers Shadow Group recommended the following amendments to the criteria examples:

**Suggestions for inclusion- Critical risk to independence**

- To meet criteria 'vital social support systems and relationships cannot or will not be sustained':  
  **This has been incorporated into the revised criteria**

- You need support because the role of your carer will not be sustained without this  
  **This has been incorporated into the revised criteria**

- You are at risk of accidental harm or not having your essential needs met sufficiently because your carer is in a crisis due to illness or other critical difficulties  
  **This has been incorporated into the revised criteria**

- To apply criteria 'vital involvement in work, education or learning cannot or will not be sustained' equally for carers:  
  **This has been incorporated into the revised criteria**

- You need support because your carer's vital involvement in work, education or learning will not be sustained otherwise  
  **This has been incorporated into the revised criteria**

**Suggestions for inclusion - Substantial risk to independence**

- **This has been incorporated into the revised criteria**

- **This has been incorporated into the revised criteria**

- **This has been incorporated into the revised criteria**

- **This has been incorporated into the revised criteria**

- **This has been incorporated into the revised criteria**

- **This has been incorporated into the revised criteria**
To meet criteria ‘the majority of social support systems and relationships cannot or will not be sustained’:

*This has been incorporated into the revised criteria*

- The role of your carer, as your major support system, will not be sustained without a range of support services
  *This has been incorporated into the revised criteria*
- Your mobility outside the home is severely restricted and you cannot access the community
  This has been incorporated into the revised criteria
To meet criteria ‘involvement in many aspects of work, education or learning cannot or will not be sustained’:

*This has been incorporated into the revised criteria*

- You are finding it very difficult to access or maintain your principal daytime activity eg: working or learning without some assistance
  *This has been incorporated into the revised criteria*

4.16 As a direct criticism of the proposed new criteria, one carer noted that there was “nothing about challenging behaviour in the criteria”.

*This has been incorporated into the revised criteria*

4.17 One user said that in the Draft Consultation Criteria under the Substantial Risk band there is a reference to users who “are vulnerable to exploitation” (point no.3). The user made the point that all disabled people are vulnerable to exploitation and that therefore this criteria ought to be included in all four bands.

*Noted for future consideration.*

4.18 Some participants attending the public meeting wanted to see the revised version of the Eligibility Criteria before it was discussed by the Mayors cabinet. They were advised that this document would become a public document one-week prior to going to the Cabinet. **It would be made available in the libraries, Internet and can also be accessed through the Governance Office in the Town Hall.**

4.19 There were concerns expressed that as a result of the new eligibility criteria and cuts in service more work would be pushed onto the carers.

*This has been incorporated into the revised criteria*

4.20 There was a view that there is a lack of consideration for the age of the carers i.e. carers are often elderly parents and are unable to provide such services as bathing for the carer without help and assistance.

*This has been incorporated into the revised criteria*

4.21 There was concern that re-assessment would take too long.

See committee report section 9.1

4.22 A carer noted that the criteria was biased towards physical disabilities and did not give much consideration to PWLD. They suggested that there should be separate criteria for people with learning disabilities (PWLD).

*The Government guidance requires the same criteria for all client groups.*
4.23 People with Learning Disabilities services had comments to make about the categories and suggested that the following additional categories be included:

4.24 **Critical**
- Self-injurious behaviour that is not managed and is likely to cause significant harm to user.
  
  *This has been incorporated into the revised criteria*
- Regular or intense assaults on carer, service user, staff or members of the public are sufficient to cause an immediate breakdown in current placement/living situation.
  
  *This has been incorporated into the revised criteria*

4.25 **Substantial**
- Regular or intense assaults on carer, service users, staff or members of public, which are managed within the service/placement.
  
  *This has been incorporated into the revised criteria*
- Self-injurious behaviour related to specific circumstances that are controllable (e.g. lack of stimulation in service environment)
  
  *This has been incorporated into the revised criteria*

4.26 **Moderate**
- High risk factors present but risk assessment indicates ability to comprehend risk and make choices/consent.
  
  *This has been incorporated into the revised criteria*

4.27 They also highlighted the need to ensure that some service users are receiving services from a number of agencies and in some cases some users services are joint funded, therefore it is important that these agencies are informed and involved in the reassessment process.

  *This point has been noted*

4.28 Comments from the Mental Health for Older Adults Services (MHOA) included their concern that their service works in an integrated way with the specialist social work teams to provide comprehensive packages of care to clients with complex mental health problems. It was felt that generally disputes around eligibility criteria between health and social services should not apply, however it would be felt useful to know whether there is a process for dealing with such disputes if they should arise.

  *Procedures are to be written.*

4.29 Another concern raised by the MHOA is that the service is hoping to move towards an integrated model of service linked to the use of the Care Programme Approach (CPA) as uniform criteria. The service have concerns if the NHS part of the service is prepared to provide support but Social Care and health do not feel that a client would be eligible for services. It was felt that it is important that arrangements are robust so there is no room for dispute.

  *See section 7.4 of committee report.*

4.30 MHOA also expressed concern of the possibility of cases where the multidisciplinary team prescribe some social care as part of the overall package but this is subsequently not granted because of the need to apply a
lower eligibility criteria or because means testing will apply. It was stated that in such a situation where an appeal will be outstanding the multidisciplinary team will remain carrying the client in the meantime and this may put additional pressure on resources should this process be a protracted one. See section 7.4 of committee report.

4.31 The MHOA also highlighted issues related to specialist assessment (Page 2, Paragraph 3). They raised concerns about this because (a) it may add delays it takes to get people services and (b) it will increase the demand on the Case Management Service to gate keep Social Care and Health funds and thus reduce the time they have to do meaningful clinical work. This point has been noted

4.32 The MHOA also made comments related to anticipated reasons for funding moderate needs (Page 2, paragraph 1). The MHOA believe the majority of the clients who don’t already fall within critical/substantial care could be argued for in this way since there is a very definite likelihood that without social care provision many of the clients will deteriorate. People assessed as Moderate under the new eligibility criteria will be eligible for services if it is thought their needs would become Substantial if services were not provided.

4.33 Adults with Mental Health services (AMH) also had comments to make about the Care Programme Approach (see 4.29.). They highlighted the need to equate mental health CPA with Lewisham’s eligibility criteria. They state that if the current proposals result in a tightening of eligibility criteria within adult services then, amongst other things, there could be some scaling down of existing care packages for people with mental health problems. They feel that the nature of mental illness makes it a far more complex task to judge eligibility compared with those with obvious physical disabilities. They would be very concerned if there was an expectation that the already modest spend in this area for people with mental health problems was expected to reduce. See section 7.4 of committee report.

4.34 A private domiciliary care service was concerned that the volume of work would be reduced as a result of the revised eligibility criteria. They stated that this would mean unemployment for care staff and an extra burden for families and carers. They felt that the future for care agencies was grim, as the profit margin is very tight. This point has been noted

5. Other Issues raised within the consultation process

5.1. Concern was also expressed that there was fewer staff at various day care centres. This meant that users were forced to stay at home. This also meant that the carer did not get any respite.

5.2. One service user complained that she has been waiting 14 months for an assessment. Details were taken and the social work team was informed.
5.3. Service provision for younger and older adults have been mixed. This should be separated. There has not been wide consultation on this matter.

5.4. Some people expressed their opposition to agency staff because they felt that they were more expensive, did less work and not very familiar to the client. One person expressed the view that the Council did not wish to manage any more services and that this is why the Council employed agency staff.

5.5. Payments (Direct Payments) to clients are not prompt and regular. This needs to be solved. A mediator should be available to solve the payments problems.

5.6. Home care staff do not sometimes turn up or leave messages explaining why they are unable to visit.

5.7. SCH offices close at 5pm. There is only the emergency telephone number at the Town Hall. After 5pm it is very difficult to access help.

5.8. Pensioner’s Forum holds the principle that people receiving services should be re-assessed every 6 months. It was felt that this would be a long-term economic exercise that could benefit the provider as well as the user.

5.9. The Forum also felt that the waiting time for acute assessment of up to 24 hours was fairly reasonable but the unspecified waiting time for those deemed to be less urgent was something that really should be urgently addressed. Long delays could mean an unnecessary deterioration in somebody’s health.

5.10. The Forum feels that many issues of concern could be overcome with the employment of more staff. They felt that the London boroughs could put pressure on the Government to increase the grant to Social Services departments and this is where the Lewisham Pensioners Forum and other London based forums could give strong support to their councils.

5.11. The Federation of Refugees from Vietnam commented on how difficult it was accessing services due to language and literacy barriers. It was stated that many Vietnamese people in Lewisham would not be aware that social services could only be accessed through an assessment.

5.12. A carer noted that there is not enough help and assistance given to PWLD re understanding financial matters and benefits which they find particularly confusing.

5.13. The Younger Persons’ Disability Service commented on the fact that each of the 4 bands in the draft document uses the word “support”. They felt that this seems rather broad as it may apply to physical assistance, prompting, financial assistance, transport etc. It was felt it did not give a good indication of the type of support available and who will provide it.

5.14. The MHOA are also concerned about the implication of the financial assessment soon to be introduced. The Specialist Mental Health Team frequently finds it difficult persuading people with mental health problems
to accept care even when this is deemed necessary for their mental health, physical health and/or their safety. If the problem of then negotiating issues around means testing and use of clients own finances is added, this problem will become much more difficult. The MHOA are concerned that the total impact of the criterion of financial controls may well lead to people becoming much more seriously mentally ill and therefore costing more to health services in the long term. It was suggested that this might manifest itself in possible increase to in-patient admissions, the need for more intensive and/or the need for more intensive, frequent and longer lasting community mental health involvement.

5.15 Staff consulted had concerns about the reassessment process. They stated that they were having difficulties in ensuring that their annual reviews of clients were being carried out. The reassessment of all clients in addition would be very difficult and highlighted the need for additional staff.

5.16 They also voiced concern about the need to support younger adults into training and employment where appropriate. They asked if the revised eligibility criteria would affect this area of work.

5.17 Social work staff also highlighted the fact that they also worked with asylum seekers and refugees under the National Assistance Act. They asked if the eligibility criteria would affect this work.

6. Conclusions

Undoubtedly the consultation on the revision of the Eligibility Criteria caused a high degree of anxiety and concern amongst service users, carers and other stakeholders. This was mainly due to concerns about users losing their services. It was generally felt that many service users who only received a minimum service were at risk of losing it after a reassessment was carried out. It was often felt that it was this service that ensured that the user was checked up on and therefore helped maintain their independence, safety and helped prevent them from the need for more intensive services. There was also concern about whether the voluntary sector would have the capacity to support service users on low needs.
List of External Agencies/Organisations

Older people

Pensioners Forum
120 Rushey Green
SE6 4HQ
Tel: 0208 314 9841

Pensioners Independent Advocacy Service
C/o Pensioners Forum – see above

Deptford Methodist Mission
1 Creek Road
London SE8 3BT
0208 692 5599

Alzheimer’s Society
C/o 81 Barry Rd
London SE6 2LD

Age Concern
20 Brownhill Road
London SE6 2EN

Elders First
12 Brownhill Road
London
SE6 2EJ
Tel: 0208 314 7365

Physical and Sensory Disability

Lewisham Independent Living Schemes User Group (LILSUG)
C/o 21a Lewisham Park
London
SE13 6QZ
Tel: 0208 694 1222

Multiple Sclerosis Society
C/o 95 Marvels Lane
London Borough of Lewisham SE12 9PH
0208 378 0897
Mental Health

Mental Health Foundation
Leemore Centre

Casual Centre
Forest Hill

Learning Disabilities

Access For Living
Martin Harris
Ivy House
Bradgate Road
Catford SE6 4JD

Aurora Charity
Ricky Mayo
Avalon House
114/116 Manor Avenue
Brockley SE4 1TE

Providence Project
Jennifer Melotte
Guardian House
1A Thornford Road
Hither Green SE13 6SG

LINC
Sally Pennington
6 Belmont Hill
Lewisham SE13 5BD

Lewisham Nexus Service
Mandy Grierson
127 Rushey Green
Catford SE6 4AA

Three C’s
Jan Underhill
1 Myron Place
Lewisham SE13 5AT
South London Family Housing Association
Sheila Davis
41 Tressillian Road
Brockley
SE1 1YG

Horizon Housing Group
Judy Lowe
Care & Support Department
3 Heath Road
Thornton Heath
CR7 8NF

Entelechy
David Slater
Room 25
The Albany
Douglas Way
Deptford
SE8 4AG

Keyring
128-130
Curtain Road
London
EC2A 3AR

MENCAP
83 Catford Hill
London SE6
Tel: 0208 690 1190

UNICUP
MENCAP see above

Carers

Carers Lewisham
Waldram Place
Forest Hill
SE23 2LB
Tel: 0208 699 8686

Miscellaneous

VAL Community Care Forum
C/o Voluntary Action Lewisham
120 Rushey Green
London SE6 4HQ
Tel: 0208 314 9411
Sabre Employment Ltd
Steve Parr
Units 1-3
Deptford Park Business Centre
Grinstead Road
Deptford
SE8 5AD

**Ethnic Minorities**

**Irish Pensioners Group**
c/o Lewisham Irish Community Centre
2a Davenport Road
London SE6 2AZ
Tel: 0208 697 4821

**Federation of Refugees from Vietnam**
**In Lewisham**
Evelyn Community Centre
Wotton Road
Deptford
SE8 5TW

**Isis**
183 – 185 Rushey Green
London
SE6 4BD

**Turkish Day Care User Group**
C/o Ladywell Day Centre

**Asian Day Care User Group**
C/o Ladywell Day Centre

**Rose Apple Centre Users**

**Calabash Users**

**St Mauritius Users**

**Elderflower Group**
(African Caribbean Elders)
1 Wells Park Road
Sydenham, London Borough of Lewisham  
SE26 6JE

**External Providers**  
*Domiciliary Care Agencies*

**AG Care**  
13 Franthorne Way  
Bellingham  
SE6 3BX  
0208 695 0044

**Beverly Martins Social Care Agency**  
8 Canadian Avenue  
Catford  
SE6 3AS  
0208 690 1280

**Crossroads**  
2a Wildfell Road  
Catford  
SE6 4HU  
0208 690 8554

**Harmony**  
Unit 2a  
Broomsleigh Business Park  
Station Approach  
Sydenham  
SE26 5BN  
0208 698 9911

**Indo-Chinese Home Care Project**  
33-35 Clyde Street  
Deptford  
SE8 5LW  
0208 692 2772

**L`Avenda**  
8 Station Buildings  
Catford Road  
SE6 4QZ  
0208 690 4333

**Nicholls Agency**  
61 Lee High Road  
SE13 5NS  
0208 297 9335  
0208 746 4800
Pro-Active Care
Unit 9
Brockley Business Centre
Endwell Road
SE4 2PD
0207 358 9014

Senior Care
38b Mottingham Road
Mottingham
SE9 4QR
0208 857 7912

Carewatch
25 Cannon Wharf
Evelyn Street
Surrey Quays
SE8 5RT
0207 231 5533

Ace Medichoice
77 Ladywell Road
SE13 7JA
0208 314 1066

Day Services

Housing 21
Burnt Ash Day Centre
253 Burnt Ash Hill
SE 12
0208 857 4682

Woodpecker
Clyde Street
Deptford
SE8
0208 692 6157

Lewisham Park Housing Association
Calabash
26 George Lane
Catford SE6
0208 461 3420

Rose Apple
1 Octavius Street
Deptford SE8
0208 692 0290
St Mauritius Day Centre
65-67 Lewisham Park
SE13 6QX
0208 314 5391

Eldervine Day Centre
182 Dartmouth Road
Forest Hill
SE26 4QZ
0208 699 5265

Health
South London and Maudsley Mental Health Trust
Lewisham Primary Care Trust
Lewisham Hospital
Dear Users/Carer

“Fair Access to Care Services”
New Eligibility Criteria for Community Care Services for Adults

I am writing to let you know that from October this year Lewisham Social Care and Health will be introducing revised eligibility criteria for adult community care services.

The Department of Health requires all councils to change their eligibility criteria to bring them in line with new government guidance called *Fair Access to Care Services*. Lewisham is revising its eligibility criteria in line with Department of Health guidelines.

Following an assessment of need, eligibility criteria are used by Social Services Officers to measure the level of support or care an individual may require in order to maintain their independence.

It is important to note that there will be no changes to services for existing users without a full re-assessment of their individual needs. Re-assessments will be conducted from October 2002 through to April 2003 once the revised criteria have been introduced.

Consultation Process

We are consulting widely with community and user groups, voluntary sector organisations and our partners in the health service. The consultation period will be from the 15th July 2002 to 30th August 2002. During this period Social Care and Health Officers will be visiting establishments that are used by our users to discuss the eligibility criteria and to get feedback from them.

If you would like to comment on the *draft* of the revised eligibility criteria we will send you a copy or you can access it on Lewisham’s website: [www.lewisham.gov.uk](http://www.lewisham.gov.uk)
We will also be holding a public meeting on the 14th August 2002 where officers from Social Care and Health will be available to answer any queries you may have about the revised eligibility criteria. This meeting will be held at the Civic Suite Room 2 from 1.00pm – 3.00pm.

If you would like a copy of the draft eligibility criteria and/or attend the meeting on the 14th August 2002, please contact;

Ms. Carol Doherty
Administrator
Quality and Standards Unit
2nd Floor Town Hall Chambers
Rushey Green
SE6 4RY
Tel: 0208 314 8660
E-mail: carol.doherty@lewisham.gov.uk

Please note if you require the draft eligibility criteria in another format (e.g. Braille, tape, another language) please let Carol know.

If you would like to comment on the draft eligibility criteria please write, phone or e-mail:

Mr. David Moss
User Involvement Consultant
Quality and Standards Unit
2nd Floor Town Hall Chambers
Rushey Green
SE6 4WY
Tel: 0208 314 8668
E-mail: david.moss@lewisham.gov.uk

Your views are important to us and we look forward to hearing your comments regarding the revised eligibility criteria.

Yours sincerely,

Zena Peatfield
Executive Director
Social Care & Health
Dear Colleague,

**New Eligibility Criteria for Community Care Services for Adults**

I am writing to let you know that Lewisham Social Care and Health will be introducing revised eligibility criteria for community care services in October 2002 and will be carrying out a consultation exercise to ensure that the views of all stakeholders are taken into consideration.

You may be aware that a new eligibility criteria is one of the requirements of the Department of Health’s *Fair Access to Care Services* initiative. All councils are required to revise their eligibility criteria under this initiative according to detailed policy guidance [www.doh.gov.uk/publications/index.html](http://www.doh.gov.uk/publications/index.html). The guidance prescribes the framework within which each council must work when defining local eligibility criteria.

It is important to note that there will be no changes to services for existing users without a full re-assessment of their individual needs. Re-assessments will be conducted from October 2002 to April 2003 once the revised criteria has been introduced.

I have attached to this letter a copy of the committee report to members, which includes the draft eligibility criteria for comment. It is also available on Lewisham’s Website [www.lewisham.gov.uk](http://www.lewisham.gov.uk).

**Consultation Process**
The consultation period for the draft eligibility criteria will be from the 15 July 2002 until the 30 August 2002.

We will be consulting widely with user and carer groups, voluntary sector organisations and our partners in the health service, as well as our own staff.
To ensure that we gain the views of as many stakeholders as possible, representatives from Lewisham Social Care and Health will be visiting organisations to discuss the draft eligibility criteria and make note of any feedback. This feedback will be considered before the final eligibility criteria is completed. Please find attached a pro forma for you to complete, indicating convenient times for Social Care and Health officers to visit your organisation.

In addition organisations can send their views by mail/e-mail or by phone to:

Mr. David Moss  
User Involvement Consultant  
Quality and Standards Unit  
2nd Floor Council Chambers  
Rushey Green  
SE6 4RY  
Tel: 0208 314 8668  
E-mail: david.moss@lewisham.gov.uk

We will be holding a public meeting on the 14 August 2002 to give a further opportunity for stakeholders to feedback their views. The meeting will be from 1.00pm until 3.00pm and will be held in Room 2 at the Civic Suite. If you would like to attend this meeting please contact:

Ms. Carol Doherty  
Administrator  
Quality and Standards Unit  
Rushey Green  
SE6 4RY  
Tel: 0208 314 8660  
E-mail: carol.doherty@lewisham.gov.uk

Your views are important to us and we look forward to hearing your comments regarding the eligibility criteria.

Yours sincerely
Lewisham Social Care and Health

Consultation on the Revised Eligibility Criteria.
for Adult Community Care Services

Officers from Social Care and health will be visiting organisations, user and carer groups and providers of services from the 15 July 2002 to the 30 August 2002.

Please fill out the form below indicating when a visit to your organisation will be convenient and return it in the reply paid envelop by the 29 July to ensure officer availability at your meeting. An alternative date and time would be useful to further ensure availability.

If you have a newsletter going out to your members/users during the consultation period, could you please indicate when the deadline for articles to be included in the newsletter is, as we wish to highlight the consultation to as many people as possible.

<table>
<thead>
<tr>
<th>Organisation and contact officer name/phone number</th>
<th>Date/Time Officers required to attend the meeting plus alternative date if possible</th>
<th>Where meeting is taking place (full address)</th>
<th>Newsletter deadline for articles if appropriate</th>
</tr>
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</tbody>
</table>


Organisations visited by SC&H Officers
Lewisham Indo Chinese Community
Horizon Housing Group
L’Avenda (Domiciliary care agency)
Carers Lewisham
Eldervine (Day Service - Older people with mental health difficulties)
Federation of Refugees from Vietnam in Lewisham
Pensioners Forum
LINC (Learning Disabilities)

Representatives of Organisations attending the Public Meeting
Carers Lewisham
Pensioners Forum
Lewisham Association of People with Disabilities
Community Support Team
Care Watch Lewisham
Lewisham MENCAP
Lewisham Primary Care Trust

Organisations providing comments and feedback (written comments)
Carers Lewisham
Pensioners Forum
Excel Care Holdings
Lewisham primary Care Trust
South London and Maudsley Mental health Trust including both:
Mental Health for Older Adults Services and Mental Health for Adults Services
Appendix 2

London Borough of Lewisham
Consultation Draft

Eligibility Criteria
for Adult Community Care Services

1 This paper outlines Lewisham’s revised Eligibility Criteria for adult community care services. It provides the opportunity for you to comment on the changes that will affect services available for adult residents of the Borough. Please take the time to read through the draft eligibility criteria and let us know what you think.

2 Introduction

2.1 We want to help as many people as possible to make sure that our services go to those who need them most. Whether you qualify for a particular service will depend on your level of need.

2.2 This review of eligibility criteria provides the opportunity to re-frame the criteria so that services can be prioritised and targeted at those with the highest levels of need and those at the greatest risk. The revised eligibility criteria will apply to all adult community care services including home care, day care, nursing and residential care.

3 Why are we changing our Eligibility Criteria?

3.1 All councils are required to revise their eligibility criteria for adult community care services to bring them in line with the government’s new Fair Access to Care Services guidance. The guidance provides councils with the opportunity to standardise their eligibility criteria across all services.

3.2 Fair Access to Care Services guidance is based on individuals’ needs and associated risks to independence. It includes four eligibility bands – critical, substantial, moderate and low, and requires Councils to adopt these bands in determining their criteria.

4 What are Eligibility Criteria?

4.1 Eligibility criteria describe who will receive services, based on a careful assessment of an individual’s needs. When a person receives a community care assessment, Social Services Officers use the eligibility criteria to measure the level of support or care an individual may require in order to maintain their independence.
4.2 Eligibility criteria assist Social Services Officers in reaching difficult decisions in a fair, consistent and open manner while ensuring the council’s accountability to service users and their carers.

5 How will the draft eligibility criteria work?

5.1 Lewisham’s draft eligibility criteria is divided into four bands (critical, substantial, moderate and low) which describe the seriousness of risk to independence and outline needs that may indicate these levels of risk.

5.2 This provides us with a framework to describe those circumstances that make individuals eligible for help.

5.3 The draft criteria proposes that individuals assessed with critical (acute or temporary) or substantial (on-going) need are prioritised for services. This prioritisation is reflected in the draft eligibility criteria in Lewisham. In some circumstances, people will be referred on to more specialist teams such as Intermediate Care, Mental Health, People with Learning Disabilities or Substance misuse for additional specialist assessment.

5.4 Those whose needs are assessed as moderate or low will not normally be eligible for directly provided community care services, unless we consider that those in moderate need may be likely to move into either critical or substantial need without service provision. If this is the case, we will provide you with information about other agencies who provide advice and support services.

5.5 There will be no changes to services for existing users without a full re-assessment by a Social Services Officer prior to any change of decision about their eligibility for services.

6 What happens now?

6.1 Assessments of need will continue to be available throughout the consultation process and into the implementation phase via Social Services Officers at:

| Younger Adults Services (Adults up to 65 years) | John Henry |
| Older Adults (65+) | Cantilever House |
| University Hospital | Lewisham for people ill in hospital |
| Lewisham Partnership (People with Learning Disabilities) |
| Mental Health Services |

6.2 The consultation period will finish on the 30 August 2002. All comments and suggestions will be considered and appropriate changes made to the draft criteria. Once the new eligibility criteria has been approved by the Mayor, we will begin implementation in October 2002.

6.3 It is important to note that there will be no changes to services for existing users without a full re-assessment of their individual needs. Re-
assessments will be conducted from October 2002 through to April 2004 once the revised criteria have been introduced.

<table>
<thead>
<tr>
<th>CRITICAL risk to Independence</th>
<th>(Acute or Temporary)</th>
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</thead>
<tbody>
<tr>
<td><strong>Risks</strong> to health &amp; safety, autonomy, management of daily routines and involvement in family or community life</td>
<td></td>
</tr>
<tr>
<td>➢ Life is, or could be threatened</td>
<td></td>
</tr>
<tr>
<td>➢ Major health problems have developed or are likely to develop</td>
<td></td>
</tr>
<tr>
<td>➢ Serious forms of abuse or neglect have occurred or are likely to occur</td>
<td></td>
</tr>
<tr>
<td>➢ There is, or could be, an extensive loss of choice and control over the immediate environment</td>
<td></td>
</tr>
<tr>
<td>➢ Involvement in work, education or learning is, or could be, at great risk of not being sustained</td>
<td></td>
</tr>
<tr>
<td>➢ There is, or could be, an inability to carry out many personal care, domestic, family or other daily routines</td>
<td></td>
</tr>
<tr>
<td>➢ Many social support systems and relationships are, or could be, at great risk</td>
<td></td>
</tr>
<tr>
<td>➢ Individuals cannot undertake or will be unlikely to be able to undertake, most of the family and social roles and responsibilities that are important to them and others</td>
<td></td>
</tr>
</tbody>
</table>

Needs that may indicate this level of risk

Your situation, actions, or how you look after yourself, is causing extreme concern about your immediate safety;

You need immediate support to avoid critical risk to your safety or life or that of others;

You need help immediately because you have suffered or are believed to have suffered serious abuse or neglect;

Your health and safety is at risk because you are dependent on assistance which is not otherwise available to you to perform essential daily functions, e.g. toileting, nutrition and moving between a bed and a chair;

You need immediate support in responding to a crisis to enable you to sustain your involvement in work, education or learning;

You need intensive support for a short period (or equipment) to avoid admission to hospital or a residential home;

Your situation and circumstances are putting an unacceptable strain on significant social support systems and relationships which are in imminent danger of breaking down;
Your physical and/or mental health is at risk because you have no social support systems or no relationships or no social interaction;

A lot of support for a short period (or assistive equipment) will enable you to perform daily routines such as maintaining personal hygiene and cooking for yourself;

Your situation and circumstances are putting an unacceptable strain on your carer/s, significant social support systems and relationships which are in imminent danger of breaking down.

You are at risk of accidental harm or not having your essential needs met sufficiently because your carer is in a crisis due to illness or other critical difficulties.

You need support because your carer’s vital involvement in work, education or learning will not be sustained otherwise

- Self-injurious behaviour that is not managed and is likely to cause significant harm to user.
- Regular or intense assaults on carer, service user, staff or members of the public are sufficient to cause an immediate breakdown in current placement/living situation.

At least one of the above risks or needs applies to you and your care/support arrangements have broken down or are about to break down.

<table>
<thead>
<tr>
<th><strong>SUBSTANTIAL risk to independence (On-going)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk</strong> to health &amp; safety, autonomy, management of daily routines and involvement in family or community life</td>
</tr>
<tr>
<td>➢ Significant health problems have developed or are likely to develop</td>
</tr>
<tr>
<td>➢ There is, or could be, some significant loss of choice and control over the immediate environment</td>
</tr>
<tr>
<td>➢ Involvement in some significant aspects of work, education or learning is, or could be, at risk of not being sustained</td>
</tr>
<tr>
<td>➢ There is, or could be, an inability to carry out some personal care, domestic or other daily routines</td>
</tr>
<tr>
<td>➢ Some significant social support systems and relationships are, or could be, at risk</td>
</tr>
<tr>
<td>➢ Individuals cannot undertake or will be unlikely to be able to undertake, some significant family and social roles and responsibilities that are important to them and others</td>
</tr>
</tbody>
</table>
**Needs that may indicate this level of risk**

Your situation, actions, or how you look after yourself, is causing serious concern that your safety will not be maintained without assistance;

Significant health problems have developed or are likely to develop and assistance will help to avoid risk to your safety or that of others, or hospitalisation;

You are vulnerable to exploitation;

You are at risk of accidental harm or not having your essential needs met sufficiently because your carer is not able to carry out all necessary tasks, for example due to age or deteriorating illness;

You cannot perform essential daily activities such as changing clothes, washing yourself, (obtaining and) preparing food without assistance, and this is not otherwise available to you;

Your mobility in the home is severely restricted and you cannot access essential facilities e.g. sink;

You are currently undergoing a major life transition, e.g. moving from institutional care to the community, or from your parental home to a more independent setting, and this is unlikely to be successfully achieved without assistance;

You have severe communication difficulties or cannot communicate without assistance;

You need support because you have few social supports or networks and the majority of these are very stressed or are breaking down;

You cannot perform significant family and social roles such as observing religion and maintaining family and social contacts without assistance;

The role of your carer, as your major support system, will not be sustained without a range of support services.

Your carer is not able to maintain their principal daytime activity e.g. working or learning without some assistance.

- Regular or intense assaults on carer, service users, staff or members of public, which are managed within the service/placement.

- Self-injurious behaviour related to specific circumstances that are controllable (e.g. lack of stimulation in service environment)

**At least one of the above risks or needs apply to you and your care/support arrangements have broken down or are about to break down.**
<table>
<thead>
<tr>
<th><strong>THRESHOLD FOR SERVICES</strong></th>
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<tbody>
<tr>
<td><strong>MODERATE risk to independence</strong></td>
</tr>
<tr>
<td><strong>Risks</strong> to health &amp; safety, autonomy, management of daily routines and involvement in family or community life</td>
</tr>
</tbody>
</table>

- Several aspects of work, education or learning are, or could be, at risk of not being sustained
- There is, or could be, some inability to carry out several daily routines
- Several social support systems and relationships are, or could be, at risk
- Individuals cannot undertake or will be unlikely to be able to undertake, several family and social roles and responsibilities

**Needs that may indicate this level of risk**

You have an illness which is at risk of deteriorating to the extent that safety or the safety of others will be at risk in the longer term if support is not provided;

You are struggling to maintain some essential daily activities such as maintaining personal or oral hygiene and your problems are increasing;

You are not able to carry out regular domestic routines such as shopping and laundry, and assistance is not otherwise available to you;

Your mobility outside the home is severely restricted and you cannot access the community;

Support or assistance for a short period will promote your independence, for example by enabling you to get about safely, or carry out some of the essential tasks you used to do, e.g. shopping for yourself;

You need support to develop like skills which you will need in order to look after yourself and maintain social support networks in the future;

You want to access education, vocational or social activities, but you are dependent on assistance to do so;

You are finding it very difficult to access or maintain your principal daytime activity e.g. working or learning without some assistance;

You are isolated and need help to access or maintain any social support systems or relationships;

It is becoming difficult for you to maintain family and social roles such as observing religion and maintaining family contacts;

- High risk factors present but risk assessment indicates ability to comprehend risk and make choices/consent.
**LOW risk to independence**

**Risk** to health & safety, autonomy, management of daily routines and involvement in family or community life

- There is, or could be, some inability to carry out one or two daily routines
- One or two social support systems and relationships are, or could be, at risk of not being sustained
- Individuals cannot undertake or will be unlikely to be able to undertake, one or two family and social roles and responsibilities

**Needs that may indicate this level of risk**

You have difficulty carrying out daily activities and routines such as shopping, cooking, grooming and home maintenance, and assistance is not available to you;

You cannot get into or out of the bath, but you are able to wash;

You have difficulty getting around

Support to fully develop one or two skills that would help you to look after yourself better;

You would like to participate in educational or vocational activities because it would improve your quality of life and/or enable you to meet obligations that are important to you;

You have some educational or vocational activities and need some assistance to access them;

You would like to participate in more social or leisure activities because it would improve your quality of life, e.g. because you get lonely, and you need assistance to do so;

You need some assistance to access some of your social or leisure activities;

You are unable to maintain some of your family and social contacts without some assistance.
1. **Summary**

1.1 Too few students stay on in education in the borough at age 16 and there is a need to generally improve retention rates, results and the choice of progression pathways across the area. The proposed Sixth Form Centre, together with Lewisham College’s complementary plan to remodel its 16-19 offer – its Academy for Young People, the proposed new Stephen Lawrence Techno Centre and the improvement plans of other providers, particularly the Hillsyde Sixth Form Consortium, will dramatically improve the quality of provision across the area. The Centre proposal, which is borne out of extensive dialogue and consultation with Lewisham secondary schools, the wider education community and local parents, students and other interested parties, will provide greater 16-19 educational choice and opportunity for the young people of north-central Lewisham.

1.2 The former community school known as Telegraph Hill in Wallbutton Road SE4 is the proposed site for the new Centre. It will open September 2004 and will have strong links with the schools of the present Crossways consortium - Deptford Green, Catford Girls, Addey and Stanhope and Crofton. Pupils from these schools will move to the Centre at the end of compulsory schooling and by its 3rd year the Centre will have about 750 students, the majority of whom will have formerly attended one of the above partner schools.

1.3 The Wallbutton Road site is a good location for the Centre - it is relatively close to the partner schools or is reasonably accessible by public transport. However, considerable investment is required to remodel the site and its buildings to create a modern, attractive, fit for purpose facility, designed and equipped to deliver a broad, technology enabled curriculum. To this end the Council applied to the Learning and Skills Council for a grant from the 16-19 Rationalisation Fund to carry the proposal forward. The grant application is based on a site assessment and indicative design by architectural consultants AFH Shaw Sprunt.
2. Purpose

2.1 The purpose of this report is to advise the Mayor and Cabinet of the decision reached by the London East Learning and Skills Council when it considered the proposal on 17 July 2002 and the decision reached by the LSC National Capital Committee when it considered the proposal on 22 August 2002. In the light of these decisions it also seeks agreement to now proceed with the issue of the public notices required by legislation.

3. Recommendations

1. To agree to the issue of the public notice at Appendix A proposing the establishment of the Centre as an LEA maintained 16-19 school and setting out how the proposal affects the partner community schools – Deptford Green, Catford Girls and Crofton.

2. To recommend the Governing Body of Addey and Stanhope School to issue the public notice at Appendix B setting out how the proposal affects that school.

4. Narrative

4.1 Lewisham presently has:

- below average attainment at GCSE and post 16;
- low participation rates post 16. While, at 71%, the staying on rate is not far below the national average, currently only 40% of students stay in Lewisham schools. The majority of the remaining students choose to leave the borough to find appropriate provision.
- poor retention rates from Year 12 to Year 13;
- a need to broaden and tailor the curriculum offer and strengthen collaboration across providers to secure appropriate progression routes;
- particular weaknesses in the northern post-16 school consortium;
- a priority to improve secondary schools in the borough 11-19;
- a need for greater choice, diversity and complementarity;
- a commitment to the Government’s 14-19 agenda and to educational innovation.

4.2 The case for a 16-19 Centre in the north of the borough stems from a report by the Institute of Education at the beginning of January 2000. The report looked at 16-19 education across the area and gave focus to the need to generally improve staying on rates, retention rates and exam results across the borough. In this context it particularly contrasted the relative strength of the Hillsyde sixth form consortium, which serves the south of the borough, with concerns about the performance and future viability of the Crossways sixth form consortium, which serves the north of the borough. It broadly supported the continuation of the larger and more successful Hillsyde consortium while recommending a completely new approach for north
Lewisham - a free-standing 16-19 Centre, developed in collaboration with other local 16-19 providers.

4.3 The Adult Learning Inspectorate/OfSTED 16-19 area inspection, conducted between 29 October and 09 November 2001, concurred that the central issues across the area as a whole were to raise participation, improve attainment and increase the number of relevant progression routes for young people. In this respect it particularly highlighted work based learning pathways. It further found that while across Lewisham there is a broad range of programmes available to learners’ aged 16-19 the choice in school sixth forms and work based learning is more limited and an overall increase in provision at Level 1/2 is required.

4.4 The proposal will:

4.4.1 Allow us to develop a new approach to 14-19 education. The strong links the new Centre will have with schools on curriculum and pedagogy will provide the focus and flexibility across the 14-19 phase needed to ensure that students are properly stretched and fulfil their potential; for example the new Centre will:

- Provide extended / accelerated learning opportunities for KS4 pupils.
- Provide different teaching and learning experiences for KS4 pupils’ in support of the KS4 curriculum and to inform post 16 educational choices.
- Facilitate the development of the compulsory stage vocational offer by providing access to it, teacher expertise and learning resources and through the development of clear and planned 14-19 progression pathways.

4.4.2 Address the particular weaknesses in the north of the borough while providing a borough-wide engine for curriculum change and development.

4.4.3 Allow individualised progression routes to be offered with strong tutorial support to ensure all students are on the right programme for them and progress at a pace consistent with their abilities and aspirations.

4.4.4 Support innovation in teaching and learning, including ensuring flexible access and delivery through ICT; joint teaching from teachers at the schools, at the Centre, lecturers at the FE College, lecturers from HE and involvement from employers; joint curriculum and strategic planning across institutions; more high quality work-based learning programmes and greater opportunities for teacher development and creativity.

4.4.5 Enhance the reputation of the partner schools with each becoming an even more attractive choice for parents and children at age 11. The large number of pupils not continuing in education within the borough at age 11, particularly band I pupils, distorts the student ability mix across the proposed partner schools, and Lewisham’s LEA maintained secondary sector generally. All schools will find it easier to secure genuinely comprehensive intakes if more pupils continued in education in the borough at the end of primary schooling.
4.4.6 Be small enough (750, growing to 1000) to meet parents’ and students’ concerns to have choice and diversity within the borough but big enough to offer the necessary breadth and tailoring for students with diverse needs.

4.4.7 Complement the wider regeneration and community initiatives within the borough, particularly the New Deal for Communities work and wider Creative Lewisham cultural strategy. This will be achieved by:

- Looking at the design of the Centre to ensure that alongside distinct, and secure, academic facilities a range independently financed community facilities are provided. These might include a Creative Enterprise Zone including business incubator units and ICT/Multimedia Facilities, Health and Leisure facilities and/or Commercial/Retail outlets.
- Ensuring the design adds interest and variety and reflects and enhances the local area.
- Developing an innovative curriculum which enables students to supplement their core study with modules encapsulating artistic initiatives, business skills, Young Enterprise, ICT, citizenship and possibly a HE module. There will also be opportunities for students to gain work experience linked to the community facilities and mentoring support from individuals engaged in the wider enterprises.

4.5 The proposal, together with the results of an extensive public consultation exercise, was considered by the Council’s former Executive Committee on 7 November when it resolved that:

- expressions of interest be sought, under EU procurement rules, from potential design and build partners with regard to the scheme; and
- suitable public notices be presented for Executive Committee consideration once support funding had been secured.

4.6 The proposal was considered by the London East Learning and Skills Council on 22 January and again on 28 February. While welcoming the proposal it sought clarification on how the scheme sat with the expansion and development plans of other providers and requested further detail on the curriculum and certain financial issues. Following further protracted discussion with the LSC the proposal was again considered by the local Council on 17 July. Satisfied with the outcomes of that discussion, and in accordance with LSC procedure, it recommended the proposal and grant application to the LSC National Capital Committee for approval.

4.7 On 22 August the LSC National Capital Committee agreed the proposal to establish the Centre as a 16-19 LEA maintained school and the in principle award of a capital grant of £8.326m from the 16-19 Rationalisation Fund, subject to the ongoing satisfaction of all LSC property and financial guidelines. This provides sufficient certainty of funding support to proceed with the issue of the public notices required by legislation and the selection of a design and build partner.
5. **Options**

5.1 For practical and educational reasons the Centre can only open at the beginning of an academic year. It was originally intended that the Centre should open September 2003 but the delay in securing local LSC endorsement of the proposal means that the Centre now cannot open until September 2004. This is to allow for completion of the necessary legislative and procurement processes and the design and construction of the new Centre.

5.2 EU procurement rules apply to this scheme with the indicative development cost being over £3.6m. Following the decision of the Executive Committee on 07 November 2001 an OJEC notice was issued on 13 November 2001 seeking expressions of interest from potential design and build partners. A separate report is being presented to Mayor and Cabinet (Contracts) this evening seeking agreement to issue invitations to tender to shortlisted constructors.

5.3 The School Standards and Framework Act 1998 sets out the current arrangements for changes to the organisation of schools. The creation of a LEA maintained 16-19 school and the reshaping of 16-19 provision as proposed are statutory proposals requiring the publication of two public notices in accordance with the requirements of the Act. The first, to be issued by the Council, propose the establishment of the new Centre and will set out how the proposal affects the partner community schools. The 2nd, issued by the governing body of Addey and Stanhope School, will set out how the proposal affects that school. This 2nd notice is required because of Addey and Stanhope’s status as a Voluntary Aided school.

5.4 Once proposals are published there is a statutory two-month objection period during which any person may object to the proposals raised. The School Organisation Committee considers objections received. Where the School Organisation Committee cannot reach a unanimous decision on a proposal it is passed to an adjudicator appointed by the Secretary of State. Once proposals have been approved by the School Organisation Committee or adjudicator there is a statutory duty to implement.

6. **Delivery Milestones**

Subject to agreement of the recommendations outlined above the project milestones will be:

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Date</th>
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<tbody>
<tr>
<td>Issue Public Notices</td>
<td>02 October 2002</td>
</tr>
<tr>
<td>Public Notice Objection Period Closes</td>
<td>02 December 2002</td>
</tr>
<tr>
<td>School Organisation Committee Decision</td>
<td>By end January 2003</td>
</tr>
<tr>
<td>Invitation to Tender to Potential Design and Build Partners</td>
<td>02 October 2002</td>
</tr>
<tr>
<td>Appoint Design and Build Partner</td>
<td>By Mid February 2003</td>
</tr>
</tbody>
</table>
Complete Design Phase By Mid August 2003
Secure Planning Approvals By end October 2003
Works Commence By end October 2003
Complete Works By end June 2004
Open September 2004

7. Financial Implications

7.1 The running costs of the new centre will be met from LSC revenue grant. The LSC have agreed that the Centre will be funded at sixth form funding rates as it replaces and builds upon current sixth form provision in the borough. The revenue grant received each year will depend on the number of students and curriculum offer.

7.2 In addition to the capital grant secured, see paragraph 4.7, the authority is committed to a ‘one-of’ investment of £400,000 in the scheme. This will be funded from the £800,000 Education earmarked reserves 2003-04.

8. Legal Implications

8.1 The Human Rights Act 1998 safeguards the rights of children in the borough to educational provision, which the Council is empowered to provide in compliance with its legal duties under domestic legislation.

8.2 A local education authority has a duty to secure sufficient schools for providing primary and secondary education across its area. A local education authority is not necessarily obliged to provide all the schools required, but to ensure that they are available. A local education authority also has a general responsibility to secure that efficient primary, secondary and further education is available to meet the needs of the population of its area.

8.3 Section 110 of the Learning and Skills Act 2000 enables local authorities to establish and maintain secondary schools that provide full-time education for 16 to 19 year olds without providing education for children of compulsory school age. This power was previously removed on the coming into force of the Further and Higher Education Act 1992, whereupon such institutions became incorporated as further education establishments. Under the provisions of section 110(3) of the Learning and Skills Act 2000 local education authorities will not have the power to continue to maintain any existing institutions for 16 to 19 year olds which are not properly established maintained schools in the categories defined by the School Standards and Framework Act 1998.

8.4 In accordance with Section 28 of the School Standards and Framework Act 1998 proposals must be published for any alteration as defined by Regulation 3 of the Education (School Organisation Proposals) (England) Regulations 1999. Prescribed alterations include the establishment of a new school and any alteration where it is intended to alter the upper or lower age limit of a school by a year or more.
9. **Equalities Implications**

The basis of this report is the need and desire to continue to improve education provision for Lewisham’s young people; allowing individuals to fulfil their potential and take opportunities within the world of work and/or HE. Raising participation rates and achievement are key elements of the Government’s and Lewisham’s approach to tackling the social exclusion of young people and providing opportunity and economic prosperity for all.

10. **Crime and Disorder Implications**

There are none directly arising from this report although disenfranchised / disillusioned young people have a propensity to anti-social behaviour and to become involved in crime. Any initiative that provides opportunity and positive purpose for young people will contribute to improving community safety and reduce crime.

11. **Environmental Implications**

The development of the Telegraph Hill site will be progressed with full regard to the need to apply and demonstrate best environmental practice. The site and buildings will be remodelled with proper regard to achieving high environmental performance in terms of thermal and energy efficiency, the materials used in construction and building systems and fittings. The aim will be for the building to provide students with a direct demonstration of best practice in design feeding into various aspects of the environmental, science and technology curriculum.

**Background Documents**

- Report to Executive Committee 07 November 16-19 Proposal – Consultation Outcomes

If there are any queries on this report please contact:

Stephen Belk, Head of School Effectiveness, Third Floor Laurence House 1 Catford Road London SE6 4RU. Telephone 020 8314 9971
or
Martin Garlick, Special Projects Manager, Third Floor Laurence House 1 Catford Road SE6 4RU. Telephone 020 8314 6866.
MAYOR AND CABINET

11 SEPTEMBER 2002

APPENDIX A TO ITEM NO. 12

DRAFT PUBLIC NOTICE

LONDON BOROUGH OF LEWISHAM

NEW SECONDARY SCHOOL FOR PUPILS PRINCIPALLY AGED
16, 17 AND 18 YEARS
WALLBUTTON ROAD, BROCKLEY, LONDON, SE4 2NY

CATFORD SECONDARY GIRLS’ SCHOOL, BELLINGHAM ROAD, LONDON SE6 2PS

CROFTON SECONDARY MIXED SCHOOL, MANWOOD ROAD, LONDON SE4 1SA

DEPTFORD GREEN SECONDARY MIXED SCHOOL, AMERSHAM VALE, LONDON SE14 6LQ

Explanatory Preamble (not forming part of the statutory proposals)

Following a series of public consultations on the future of post 16 education in the Borough, the London Borough of Lewisham intends, in co-operation with the governing bodies of Addey and Stanhope, Catford, Crofton and Deptford Green schools, to establish a new community secondary school in the premises of the former Telegraph Hill school, Wallbutton Road, London SE4. This new school is intended to improve the facilities for Post 16 education for the pupils at Catford, Crofton and Deptford Green schools and at Addey and Stanhope School, 472, New Cross Road, London SE14 6TJ by offering a broader curriculum than is possible at present in the premises of the schools concerned or in current consortium arrangements. Although it will be a community secondary school with its own Headteacher and Governing Body it is envisaged that there will be close co-operation between the Headteachers and Governors of the new school and of Addey and Stanhope, Catford, Crofton and Deptford Green Schools. The aim of this co-operation will be to ensure that the pupils at all five schools follow a co-ordinated curriculum from the age of 14 until the completion of their sixth form education and examinations.

The London Borough of Lewisham is obliged to issue a public notice setting out formally its proposals in accordance with statutory regulations. These proposals are set out below.
The statutory proposals.

The London Borough of Lewisham hereby gives notice in accordance with the provisions of Section 28(1) of the School Standards and Framework Act 1998, that it intends:

1) to establish a new secondary school, [within the meaning of Section 2 (2) of the Education Act 1996 as amended by Section 110 (1) of the Learning and Skills Act 2000, and of Section 110 (3) of the Learning and Skills Act 2000)] that is principally concerned with providing full time education for 750 boys and girls who are over compulsory school age but under the age of 19 and

2) to make prescribed alterations to Catford Secondary Girls’ School, Bellingham Road, London SE6 2PS, Crofton Secondary Mixed School, Manwood Road, London SE4 1SA and Deptford Green Secondary Mixed School, Amersham Vale, London SE14 6LQ by ceasing to provide sixth form education at the premises of those schools from 2 September 2004 and arranging, from that date, for all pupils at those schools who wish to continue into sixth form education to be given priority for admission to the proposed new school and

3) to establish arrangements, through the close co-operation of the Headteachers and Governing Bodies of Catford, Crofton, Deptford Green schools, Addey and Stanhope school, 472, New Cross Road, London SE14 6TJ and of the proposed new school, to ensure that the pupils at all five schools follow a co-ordinated curriculum from the age of 14 years through to the completion of their sixth form education and examinations,

and has made the following proposals for those purposes;

(i) On 2 September 2004 the London Borough of Lewisham will open a new secondary school in the premises of a former community secondary school, suitably adapted and extended, in Wallbutton Road, Brockley, London SE4 2NY.

(ii) The new school will be principally concerned with providing full time secondary education for 750 boys and girls who are over compulsory school age but who are under the age of 19 years. The new school will give priority for admission to those pupils at Addey and Stanhope Secondary Mixed School, 472, New Cross Road, London SE14 6TJ, Catford Secondary Girls’ School, Bellingham Road, London SE6 2PS, Crofton Secondary Mixed School, Manwood Road, London SE4 1SA and Deptford Green Secondary Mixed School, Amersham Vale, London SE14 6LQ, who will have completed their secondary education and who wish to continue full time education at a secondary school and who meet the requirements for entry to the new school.

(iii) On 2 September 2004 the new community secondary school at Wallbutton Road will admit up to 750 pupils. From 1 September 2005 and each year thereafter the new school will admit up to a standard number of 375 pupils each year.

(iv) The new school will be a community secondary school within the meaning of Section 20 (1) of the School Standards and Framework Act 1998.
(v) The admissions authority for the new school will be the London Borough of Lewisham which will set the entry requirements for the new school.

(vi) The new school will not make provision for selection by ability such as is mentioned in Section 101 of the School Standards and Framework Act 1998 (which allows schools to select by pupil ability banding in order to maintain a balance of ability), or in Section 102 of the School Standards and Framework Act (which allows schools which have a specialism, to select a proportion of pupils according to their aptitude for that specialism). It is proposed that pupils will have to demonstrate that they have the ability to complete the course of study which is offered by the school and for which they wish to apply.

(vii) From 2 September 2004 and for all subsequent years, Catford Secondary Girls’ School, Crofton Secondary Mixed School, and Deptford Green Secondary Mixed School will cease to provide sixth from education at the premises of those schools and all those pupils who, in the previous academic year, will have completed their compulsory secondary education at those schools and who wish to continue full time secondary education at a secondary school, will, together with pupils from Addey and Stanhope Voluntary Aided Secondary Mixed School, be given priority for admission to the proposed new secondary school at Wallbutton Road, provided that they meet the entry requirements for the new school. Those pupils may also seek admission to other schools and colleges which may have appropriate places available.

(viii) On 2 September 2004 all those pupils at Catford, Crofton, Deptford Green and Addey and Stanhope schools who will not have completed their sixth form education will be offered places at the new school so that they may complete their course of study. Those pupils may also seek admission to other schools and Colleges which may have appropriate places available.

(ix) It is not intended, as part of these proposals, to alter the standard numbers of pupils of the age of 11 years to be admitted each year to Catford, Crofton or Deptford Green schools. The current standard numbers of pupils of the age of 11 years to be admitted each year to those schools are;

<table>
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<tr>
<th>School</th>
<th>Number</th>
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<tbody>
<tr>
<td>Catford</td>
<td>138</td>
</tr>
<tr>
<td>Crofton</td>
<td>180</td>
</tr>
<tr>
<td>Deptford Green</td>
<td>208</td>
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However, the London Borough of Lewisham intends, in the current academic year 2002/2003, to consult on proposals to alter those standard numbers in accordance with the provisions of Schedule 23 to the School Standards and Framework Act 1998.

(x) In accordance with the provisions of Section 509 of the Education Act 1996, a travel grant will be payable to all parents whose children attend the new school at Wallbutton Road and who have to travel more than 5 miles from home to the new school and for whom the new school is the nearest educational establishment offering the course to be followed by the pupil. For pupils who have a statement of special educational needs or who have a registered disability the qualifying distance...
from home to school would be 2 miles, again provided that the new school were the nearest educational establishment offering the course to be followed by the pupil.

These proposals should be read in conjunction with proposals also made today by the governors of Addey and Stanhope secondary school for a prescribed alteration to that school. Although the proposals for Addey and Stanhope school are an interdependent part of the proposals for the establishment of the new school, and for the arrangements to change the age limits of the four schools whose pupils will receive priority for admission to the new school, the governors of Addey and Stanhope have to issue a separate notice in view of their status as a voluntary aided school.

Within two months after the date of publication of these proposals any person may make objection to the proposals to the London Borough of Lewisham. Any objection should be sent to Frankie Sulke, Executive Director for Education and Culture, London Borough of Lewisham, 3rd Floor, Laurence House, 1, Catford Road, London SE6 4RU. Within a month after the end of the objection period, the LEA will send to the Lewisham School Organisation Committee for the area copies of all objections made and not withdrawn in writing within the objection period, together with the Authority’s observations on them.

Explanatory Note (not forming part of the statutory proposals).

The new school will offer principally a range of one and two year courses but the course offer may vary from year to year according to demand. The number of places offered each year may therefore vary according to the course offer, but the new school will offer a minimum of 375 places each year to pupils who will have attained the age of 16 years and who will have completed their compulsory education. On 2 September 2004 the school will offer all 750 places, so that pupils in the sixth forms at Addey and Stanhope, Catford, Crofton and Deptford Green schools, who will not have completed their sixth form education, may, if they wish, complete their course of study at the new school. For each year thereafter the new school will offer the minimum of 375 places to pupils who will have attained the age of 16 years and who will have completed their compulsory education.

The standard numbers stated in point (ix) of the notice, refer to the minimum number of pupils that must be offered a place at the schools at the age of 11 years each year. The actual numbers of places offered each year may have been higher than these figures.

Frankie Sulke; Executive Director for Education and Culture
Dated; 2 October 2002
DRAFT PUBLIC NOTICE

LONDON BOROUGH OF LEWISHAM

THE GOVERNING BODY OF ADDEY & STANHOPE SCHOOL

ADDEY AND STANHOPE SECONDARY MIXED SCHOOL, 472, NEW CROSS ROAD, LONDON, SE14 6TJ

Explanatory Preamble (not forming part of the statutory proposals)

Following a series of public consultations on the future of post 16 education in the Borough, the London Borough of Lewisham intends, in co-operation with the governing bodies of Addey and Stanhope, Catford, Crofton and Deptford Green Schools, to establish a new secondary school in the premises of the former Telegraph Hill school, Wallbutton Road, London SE4. This new school is intended to improve the facilities for Post 16 education for the pupils at Addey and Stanhope, Catford, Crofton and Deptford Green schools, by offering a broader curriculum than is possible at present in the premises of Addey and Stanhope or the other schools, or in the current consortium arrangements. Although it will be a secondary school with its own Headteacher and Governing Body it is envisaged that there will be close co-operation between the Headteachers and Governors of the new school and of Addey and Stanhope, Catford, Crofton and Deptford Green schools. The aim of this co-operation will be to ensure that the pupils at all five schools follow a co-ordinated curriculum from the age of 14 until the completion of their sixth form education and examinations.

The governors of Addey and Stanhope school are obliged to issue a public notice setting out formally, in accordance with statutory regulations, how the proposals will affect Addey and Stanhope school. These proposals are set out below.

The statutory proposals.

The governors of Addey and Stanhope Secondary Mixed School, 472, New Cross Road, London SE14 6TJ, hereby give notice in accordance with the provisions of Section 28(2) of the School Standards and Framework Act 1998, that they intend to make a prescribed alteration to the school, by altering the upper age limits of the school by a year or more, arranging for all sixth form education for pupils at the school to take place at a new school to be established by the London Borough of Lewisham at Wallbutton Road, London SE4 2NY, but establishing arrangements for
the planned progression of students’ education beyond compulsory school age, from Addey and Stanhope school to the new school, and have made the following proposals for that purpose;

From 1 September 2004 and for all subsequent years, all those pupils who, in the previous academic year will have completed, their compulsory secondary education at Addey and Stanhope School and who wish to continue full time education at a secondary school will, together with pupils from Catford Secondary Girls’ School, Bellingham Road, London SE6 2PS, Crofton Secondary Mixed School, Manwood Road, London SE4 1SA and Deptford Green Secondary Mixed School, Amersham Vale SE14,6LQ, be given priority for admission to a proposed new secondary school, to be established by the London Borough of Lewisham at Wallbutton Road, London SE4 2NY, provided that they meet the entry requirements for that school. From 1 September 2004, there will be no provision for full time education of pupils over compulsory school age at Addey and Stanhope School but there will be close co-operation between the new school and the governing bodies of Addey and Stanhope, Catford, Crofton and Deptford Green schools. This co-operation is intended to ensure co-ordination of the curricula for the pupils at all five schools, so that there will be clearly identified progression routes for pupils at those schools taking public examinations.

These proposals should be read in conjunction with proposals also made today by the London Borough of Lewisham for the establishment of the new secondary school at Wallbutton Road, SE4 and for prescribed alterations to Catford Secondary Girls School, Bellingham Road, SE14 6TJ, Crofton Secondary Mixed School, Manwood Road, SE4 1SA, and Deptford Green Secondary Mixed School, Amersham Vale SE14 6LQ. Pupils at those schools who are over compulsory school age but wish to continue full time education primarily until the age of 19, will, together with pupils from Addey and Stanhope School, be given priority for admission to the proposed new school in Wallbutton Road, London SE4, provided they meet the requirements for entry to that school.

The new school will be a community secondary school within the meaning of Section 20 (1) of the School Standards and Framework Act 1998, principally offering full time secondary education to pupils from Addey and Stanhope, Catford, Crofton and Deptford Green Schools who will have completed their compulsory school education but are under the age of 19.

In accordance with the provisions of Section 509 of the Education Act 1996, a travel grant will be payable by the London Borough of Lewisham to all parents whose children attend the new school and who have to travel more than 5 miles from home to the new school and for whom the new school is the nearest educational establishment offering the course to be followed by the pupil. For pupils who have a statement of special educational needs or who have a registered disability, the qualifying distance from home to school would be 2 miles, again, provided that the new school were the nearest educational establishment offering the course to be followed by the pupil.

It is not intended, as part of these proposals, to alter the standard number of pupils of the age of 11 years to be admitted each year to the school. The standard number of
pupils of the age of 11 years to be admitted to the school from September 2002 will be 120.

Within two months after the date of publication of these proposals any person may make objection to the proposals. Any objection should be sent to Frankie Sulke, Secretary to the Lewisham School Organisation Committee, 3rd Floor, Laurence House, 1, Catford Road, London SE6 4RU.

Desmond Kirkland Chair of Governors of Addey and Stanhope School

Dated; 2 October 2002