

Public Document Pack

Cabinet

Tuesday, 15th October, 2019
at 4.30 pm

PLEASE NOTE TIME OF MEETING

Council Chamber - Civic Centre

This meeting is open to the public

Members

Leader – Councillor Hammond
Adult Care - Councillor Fielker
Aspiration, Children & Lifelong Learning –
Councillor Paffey
Healthier and Safer City – Councillor Shields
Resources - Councillor Barnes-Andrews
Green City & Environment – Councillor Leggett
Homes & Culture - Councillor Kaur
Place and Transport - Councillor Rayment

(QUORUM – 3)

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BACKGROUND AND RELEVANT INFORMATION

The Role of the Executive

The Cabinet and individual Cabinet Members make executive decisions relating to services provided by the Council, except for those matters which are reserved for decision by the full Council and planning and licensing matters which are dealt with by specialist regulatory panels.

The Forward Plan

The Forward Plan is published on a monthly basis and provides details of all the key executive decisions to be made in the four month period following its publication. The Forward Plan is available on request or on the Southampton City Council website, www.southampton.gov.uk

Implementation of Decisions

Any Executive Decision may be “called-in” as part of the Council’s Overview and Scrutiny function for review and scrutiny. The relevant Overview and Scrutiny Panel may ask the Executive to reconsider a decision, but does not have the power to change the decision themselves.

Mobile Telephones – Please switch your mobile telephones to silent whilst in the meeting.

Use of Social Media

The Council supports the video or audio recording of meetings open to the public, for either live or subsequent broadcast. However, if, in the Chair’s opinion, a person filming or recording a meeting or taking photographs is interrupting proceedings or causing a disturbance, under the Council’s Standing Orders the person can be ordered to stop their activity, or to leave the meeting.

By entering the meeting room you are consenting to being recorded and to the use of those images and recordings for broadcasting and or/training purposes. The meeting may be recorded by the press or members of the public. Any person or organisation filming, recording or broadcasting any meeting of the Council is responsible for any claims or other liability resulting from them doing so. Details of the Council’s Guidance on the recording of meetings is available on the Council’s website.

The Southampton City Council Strategy (2016-2020) is a key document and sets out the four key outcomes that make up our vision.

- Southampton has strong and sustainable economic growth
- Children and young people get a good start in life

Executive Functions

The specific functions for which the Cabinet and individual Cabinet Members are responsible are contained in Part 3 of the Council’s Constitution. Copies of the Constitution are available on request or from the City Council website, www.southampton.gov.uk

Key Decisions

A Key Decision is an Executive Decision that is likely to have a significant:

- financial impact (£500,000 or more)
- impact on two or more wards
- impact on an identifiable community

Procedure / Public Representations

At the discretion of the Chair, members of the public may address the meeting on any report included on the agenda in which they have a relevant interest. Any member of the public wishing to address the meeting should advise the Democratic Support Officer (DSO) whose contact details are on the front sheet of the agenda.

Fire Procedure – In the event of a fire or other emergency, a continuous alarm will sound and you will be advised, by officers of the Council, of what action to take.

Smoking policy – The Council operates a no-smoking policy in all civic buildings.

Access – Access is available for disabled people. Please contact the Cabinet Administrator who will help to make any necessary arrangements.

Municipal Year Dates (Tuesdays)

2019	2020
18 June	21 January
16 July	11 February
20 August	18 February (Budget)
17 September	17 March
15 October	21 April
19 November	
17 December	

- People in Southampton live safe, healthy, independent lives
- Southampton is an attractive modern City, where people are proud to live and work

CONDUCT OF MEETING

TERMS OF REFERENCE

The terms of reference of the Cabinet, and its Executive Members, are set out in Part 3 of the Council's Constitution.

RULES OF PROCEDURE

The meeting is governed by the Executive Procedure Rules as set out in Part 4 of the Council's Constitution.

DISCLOSURE OF INTERESTS

Members are required to disclose, in accordance with the Members' Code of Conduct, **both** the existence **and** nature of any "Disclosable Pecuniary Interest" or "Other Interest" they may have in relation to matters for consideration on this Agenda.

DISCLOSABLE PECUNIARY INTERESTS

A Member must regard himself or herself as having a Disclosable Pecuniary Interest in any matter that they or their spouse, partner, a person they are living with as husband or wife, or a person with whom they are living as if they were a civil partner in relation to:

(i) Any employment, office, trade, profession or vocation carried on for profit or gain.

(ii) Sponsorship:

Any payment or provision of any other financial benefit (other than from Southampton City Council) made or provided within the relevant period in respect of any expense incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

(iii) Any contract which is made between you / your spouse etc (or a body in which the you / your spouse etc has a beneficial interest) and Southampton City Council under which goods or services are to be provided or works are to be executed, and which has not been fully discharged.

(iv) Any beneficial interest in land which is within the area of Southampton.

(v) Any license (held alone or jointly with others) to occupy land in the area of Southampton for a month or longer.

(vi) Any tenancy where (to your knowledge) the landlord is Southampton City Council and the tenant is a body in which you / your spouse etc has a beneficial interests.

(vii) Any beneficial interest in securities of a body where that body (to your knowledge) has a place of business or land in the area of Southampton, and either:

a) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body, or

b) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you / your spouse etc has a beneficial interest that exceeds one hundredth of the total issued share capital of that class.

Other Interests

A Member must regard himself or herself as having an, 'Other Interest' in any membership of, or occupation of a position of general control or management in:

Any body to which they have been appointed or nominated by Southampton City Council

Any public authority or body exercising functions of a public nature

Any body directed to charitable purposes

Any body whose principal purpose includes the influence of public opinion or policy

Principles of Decision Making

All decisions of the Council will be made in accordance with the following principles:-

- proportionality (i.e. the action must be proportionate to the desired outcome);
- due consultation and the taking of professional advice from officers;
- respect for human rights;
- a presumption in favour of openness, accountability and transparency;
- setting out what options have been considered;
- setting out reasons for the decision; and
- clarity of aims and desired outcomes.

BUSINESS TO BE DISCUSSED

Only those items listed on the attached agenda may be considered at this meeting.

QUORUM

The minimum number of appointed Members required to be in attendance to hold the meeting is 3.

In exercising discretion, the decision maker must:

- understand the law that regulates the decision making power and gives effect to it. The decision-maker must direct itself properly in law;
- take into account all relevant matters (those matters which the law requires the authority as a matter of legal obligation to take into account);
- leave out of account irrelevant considerations;
- act for a proper purpose, exercising its powers for the public good;
- not reach a decision which no authority acting reasonably could reach, (also known as the “rationality” or “taking leave of your senses” principle);
- comply with the rule that local government finance is to be conducted on an annual basis. Save to the extent authorised by Parliament, ‘live now, pay later’ and forward funding are unlawful; and
- act with procedural propriety in accordance with the rules of fairness.

AGENDA

8 COMMERCIAL PROPERTY INVESTMENT □ (Pages 1 - 6)

Report of the Cabinet Member for Resources outlining a policy for investment in commercial property.

9 MEDIUM TERM FINANCIAL STRATEGY TO 2023/24 AND ASSOCIATED MATTERS □ (Pages 7 - 78)

12 THE FUTURE OF ST MARY'S LEISURE CENTRE (Pages 79 - 82)

To consider a report of the Cabinet Member for Homes and Culture seeking approval for the potential future arrangements of St Mary's Leisure Centre.

Monday, 7 October 2019

Director of Legal and Governance

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Property Investment Strategy

1. Introduction

- 1.1 As local authorities continue to face financial constraints including the phased removal of core central government funding, property has become an important part of many Councils financial strategy to increase income for the Councils revenue budget position. Property also plays an important role in shaping places by providing opportunities for businesses and communities.
- 1.2 This Property Investment Strategy aims to build on the success of the Council's previous strategy to create a Property Investment Fund and in addition develop a strategy for the ongoing management of all the Council's General Fund property investment assets. This strategy does not apply to the Council's Housing Revenue Account assets or the Council's General Fund operational assets.
- 1.3 The strategy also seeks to respond to latest Statutory Guidance on Local Government Investments (3rd Edition), which was updated to reflect changes in patterns of local authority behaviour including investing in non-financial asset for profit generation and increasing economic growth/regeneration. The guidance clearly sets out the need for transparent investment strategies.

2.0 The Investment Property Portfolio

- 2.1 The Council holds 174 commercial interests in its investment portfolio which have a current annual rent roll of circa £8.36M. The majority of the rent is derived from a small number of assets with 55.7% generated from the top 10 assets and 69.6% from the top 20 assets. There are a further 292 minor interests generating an annual rent of circa £152,000. Many of these property interests are associated with owning a large estate, such as leases of gas governor sites, electricity substations, easements and wayleaves. There are also a number of other commercial interests producing nominal income.
- 2.2 The portfolio is largely retail based with 46.6% of the rent coming from this sector, West Quay Shopping Centre equates to a large proportion of this rent at 37.6% (17.5% of whole portfolio). Much of the other property has been held for many years and in the city centre especially it was acquired after the second world war to promote re-development, with long leases granted to developers who re-built damaged parts of the City.
- 2.3 The portfolio is split between rack rented leases (these are properties let at market rent to occupational tenants) and ground leases (long term, full repairing and insuring leases at either fixed or geared rents). Excluding the miscellaneous property, 53.3% of rent is derived from ground leases and

46.7% from rack rented leases. Ground leases tend to be less management intensive than rack rented property and having a number of ground leases within the portfolio helps to spread property risk.

3. Property Investment Fund - Performance to Date

3.1 A strategy for a Property Investment Fund (PIF) was approved by Cabinet on 19th April 2016. To date £ 29.7M has been invested in 3 commercial properties. This strategy does not apply to the indirect funds which are managed externally by CCLA and incorporated within the Treasury Management strategy.

3.2 The three properties acquired are detailed below.

ADDRESS	DESCRIPTION
241 & 271 Winchester Road, Southampton SO16 6TP	2 detached retail warehouses: 241 (Halfords) - 11,421 sq ft + 30 car parking spaces 271 (Wickes) - 50,210 sq ft + external garden centre & builder's yard + 140 car parking spaces
3 Ely Road, Milton, Cambridgeshire CB23 6DD	Detached 2 storey modern office building, total 17,243 sq ft (includes 322 sq ft media room let to Virgin Media)+ 85 car parking spaces
Unit 50, Warth Parkway, Warth Park, Raunds, Northamptonshire NN9 6NY	modern 42,569 sq ft "highly specified 'cross-dock' parcel distribution facility" on a 3.75 acre site plus 19,886 sq ft nearby (not adjacent) additional car park site

3.3 During the financial year 2018/19 these investments generated £1.8M (gross) and after the costs of borrowing has been taken into account £0.6M net. The PIF has provided the Council with a valuable additional revenue stream to help fund Council services.

4. Property Investment Fund - 2019/20

- 4.1 The Property Investment Fund's primary purpose at inception, as set out in the recommendation to Cabinet in April 2016 was to generate income thereby contributing to a financial 'future-proofing' effect, underpinning financial security for the Council by providing further income independent of Government funding or Council Tax revenues to fund activities.
- 4.2 The strategy continues to support the acquisition of commercial property for income generating purposes when suitable opportunities present, however the PIF can also play an important role in helping to stimulate development and provide wider socio-economic benefits to the City thus contributing to Council objectives. This is a strategy which has been adopted by other local authorities such as Torbay Council.
- 4.3 Given current uncertainties in the economic climate the Council can be instrumental in supporting the local economy by bringing forward development as seen by Ashford Borough Council.
- 4.4 In refreshing the Strategy it is proposed that the Council's investment activity in commercial property assets be divided into two groups:
- Investment opportunities whose primary purpose is the delivery of a financial return for the Council.
 - Regeneration investment opportunities that support the delivery of significant city/district regeneration.
- 4.5 By having two clear separate objectives it will ensure that the primary driver of the acquisition is understood by members and the public, which will assist in the transparency of decision making. It is possible that an acquisition can meet both objectives but the overriding purpose will determine which group it sits in.
- 4.6 It is appropriate that different criteria should be adopted for each group and Appendix 1 shows the proposed criteria. All investment activity will be in accordance with this criteria.
- 4.7 The Statutory Guidance on Local Government Investments (3rd Edition) requires that where a local authority classifies an investment as contributing to regeneration or local economic benefit, it should be able to demonstrate that the investment forms part of a project in its Local Plan.
- 4.8 Each property investment will be subject to a detailed business case, supported by internal and/or external professional advice. The business case will set out the benefits and risks associated with the investment, detailing how risks will be mitigated.

5. Financing the Property Investment Fund

- 5.1 Over recent years there has been significant investment by Councils in commercial property, either directly via the purchase or development of property or indirectly via investment in property funds.
- 5.2 Government has become increasingly concerned about the scale of commercial property acquisition which has been funded by the Public Works Loan Board (PWLB) borrowing. As an example in 2016 Spelthorne Borough Council took out 50 separate Public Works Loan Board loans to fund the purchase of a £360M business park in Sunbury-on-Thames.
- 5.3 The Council's borrowing will be in accordance with the limits set with the Treasury Management strategy, approved by full Council in February 2019.
- 5.7 The approach on the Minimum Revenue Provision for commercial property will be agreed by the Service Director Finance and Commercialisation.

6. Management of the Investment Property Portfolio

6.1 The Council's overall property investment assets (including PIF assets) have a total value as at the end of the 2018/19 financial year of circa £135M.

6.2 Investment property assets are currently categorised into Strategic, Managed and Infrastructure. The last review was carried out in June 2015. A review of the system of categorisation has been undertaken and the following has been developed:

- Group 1 (Strategic) - this is property which is being held for strategic land assembly purposes to support re-development and/regeneration initiatives and which are likely to be included in the Council's Local Plan. Properties in this category will only be disposed of (freehold or long lease) where there is a compelling case and the benefits of disposal outweigh those of retention.
- All those properties which fall within development sites identified within the City Centre Action Plan, adopted version 18th March 2015, are included within this group.
- There are 69 properties in this category with a total asset value of circa £47.43M producing a rental income of circa £2.68M per annum
- Some properties within this group will be sold to facilitate re-development/regeneration and whilst this may generate capital receipts there will be a loss of income. Therefore early consideration should be given to mitigating this loss of income by the acquisition of replacement interests ahead of any disposals.
- Group 2 (Managed) - These are all other properties which are not within Group 1.

- Properties which support the following objectives should be retained unless there are exceptional reasons to dispose.
 - strong income producing
 - minimal management costs
 - contribute to a balanced portfolio
 - security of income
 - A review of the portfolio has identified 17 interests recommended for retention. The total asset value of these properties is in the order of £62.24M producing a rental income of circa £3.71M per annum.
 - The remaining 88 interests account for a rent of £1.97M per annum and have an asset value of circa £18.67M, thus producing a yield of 10.5%
- 6.3 Given the Council's need to maximise income, where assets are subject to long leasehold interests, consideration will be given to re-gearing leases (extending the lease term). Re-gearing can have a positive impact on an area by encouraging investment in the asset due to the greater security for the leaseholder enabling finance to be raised. This in turn could increase income to the Council where such investment attracts higher rents which the Council then shares in. There is potential for additional value (marriage value) to be achieved through re-gearing, this is more likely to be realised where leases have less than 80 years unexpired. At present there are 18 such leases within Group 2.
- 6.4 The impact of the potential loss of income on the Council's finances for any sale if a replacement asset(s) is not readily available must be explained. An option could be to invest the proceeds in a property investment fund until a direct investment can be acquired, although any potential costs will need to be taken into account.
- 6.5 The sale of freehold property subject to occupational leases may be considered if management costs of the asset are excessive in relation to income generated or the sale will generate a capital receipt that can be re-invested in replacement property investment assets that will improve the yield return or sector allocation balance. Replacement assets will be in accordance with the criteria set for 'Group 1 Acquisitions' in Section 3 above.
- 6.6 Each asset will be dealt with on a case by case basis and decisions will be approved in accordance with the Council's Constitution.
- 6.7 An investment property will be considered surplus if it is not income producing (notwithstanding temporary uses) and likely to remain so for the foreseeable future and the asset has no potential for future strategic development purposes. The Council will consider all surplus land and property for affordable housing. The identification of alternative uses and development of an appropriate marketing strategy will help maximise the

value of surplus land and property assets. The decision to sell surplus assets will be made in accordance with the Council's Constitution.

- 6.8 The categorisation of assets will be reviewed annually and ratified by an Asset Management Board. The aim of the review is to check and challenge the categorisation of assets and to identify any additional surplus assets to generate capital receipts.
- 6.9 It is envisaged that this system of categorisation will assist in the management of the Council's investment portfolio by proactively identifying those assets where improved returns could be achieved either through lease re-gearing or disposal to generate a capital receipt.

7. Governance Matters

- 7.1 All new investments will be subject to initial evaluation by the Council's property and finance officers. Any investments considered suitable will be considered by the Service Lead, Capital Assets in consultation with the Leader and Service Director, Finance and Commercialisation and Cabinet Member for Resources, who will determine whether an offer should be submitted. Offers will be made subject to contract, all necessary surveys, a formal RICS Red Book valuation, legal and financial due diligence and the requisite Council approvals.
- 7.2 Day to day management of the Council property investment portfolio is undertaken by the Council's in-house Estates and Valuation team and will report into the Asset Management Board.

8. Risk Management

- 8.1 There is a risk of investments underperforming and impacting on the Council's income particularly where borrowing has been used, the issues of investment risk at the point of purchase will be mitigated by robust due diligence and any remaining risks will be fully explained to the Asset Management Board.
- 8.2 There are emerging financial risks for owned property, which include falls in rental and capital values and void periods. This risks will be minimised by factoring in potential costs to the financial appraisal process and undertaking relevant credit checks on potential tenants. These risks will be monitored by regular updates to the Asset Management Board. Any negative significant revenue consequences and detail of the mitigating action which is being taken or proposed will be reported as part of the monthly revenue monitoring process.
- 8.3 The Council will employ use of external experts where specialist knowledge is required.



Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	1: Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital
Brief Service Profile (including number of customers)	
<p>Southampton City Council is proposing to increase the level of support to help more people to return home after a short stay in residential care following discharge from hospital.</p> <p>Some people need to spend a period of time in residential care after being discharged from hospital and before they can return home. This proposal will use existing policies and processes to ensure that the right support is available to help more people regain their independence and move home from these short term placements more quickly. This will involve an assessment being carried out more quickly by a social work practitioner after the individual has been discharged from hospital into residential or nursing care. This will help to make sure that suitable care arrangements are put in place as quickly as possible to support someone to return home in line with their and their family’s wishes, before there is any deterioration in the individual’s ability to return home. This might involve the provision of home care, reablement care and therapy, adaptations, the use of telecare and other community support.</p> <p>We will increase the proportion of people who return home after a short-term period in a residential care bed following discharge from hospital, in line with national best practice benchmarks.</p> <p>Individuals will only be return home where it is safe and reasonable to do so, and with appropriately assessed care and carers packages in place in line with statutory requirements and guidance. If residential or nursing care was subsequently required, this would be arranged from home in a planned way and in the person’s best interests. Any assessments would be undertaken in consultation with those affected.</p>	

Summary of Impact and Issues

The primary impact of this proposal will be that individuals needing a short time in residential care between hospital discharge and returning home, spend less time in that residential setting overall.

Last year, 14 people were discharged in to a residential care home from hospital. 5 returned home after a short stay and 9 became permanent residents. If this proposal is adopted and there were 14 people discharged in similar circumstances, this proposal would mean that 12 would be supported to return home after a short stay and 2 would become permanent residents. These figures are based on the outcome of an independent review of the council's approach to Adult Social Care carried out by the Local Government Association. This found that the council was an outlier in terms of the number of people being supported in residential care and that this was not leading to the best outcomes for people. Research published by the Institute of Public Care, Oxford Brookes University, recommends that at least 75% of people should be supported to return home after a short-term period (no more than six weeks) in a residential care bed, following discharge from hospital. This proposal is based on that recommendation. As well as supporting people to return home in accordance with their and their family's wishes, this leads to a financial saving as the cost of care and other services provided in a person's own home is typically less than the cost of residential care. The average cost to the council of supporting someone in their own home is £10,322 and the average cost to the council of supporting someone in a residential care home is £28,448.

Southampton City Council's driving principle in our approach to supporting people to return home is that individuals are offered the right care, in the right place, at the right time. Best practice guidance states that no one should be admitted directly to long-term care from hospital unless in very exceptional circumstances e.g. for end-of-life care where this is not possible at home. The default pathway should be discharge home, with the right support; reablement (tailored support to maximise a person's capabilities and confidence) should always be considered. This proposal will positively support this approach.

Some people or their families might prefer them to become permanent residents rather than being supported to return home and to make the decision from there. These preferences will be considered in line with the Care Act 2014.

Potential Positive Impacts

This proposal will support more people to return to living within their own homes more quickly, with the right care and support in place to enable them to do so.

This proposal will also help ensure that Southampton City Council meets best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.

Responsible Service Manager	Abi Hamilton Service Manager: Complex Care and Hospital Discharge Service, Adults, Housing & Communities
Date	01 October 2019
Approved by Senior Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	<p>Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who are discharged from hospital into short stay residential care who then go on to become a permanent resident.</p> <p>Just over 13% of the population in Southampton are aged over 65 (33,508 people) which is lower than the national average of 18.2%</p>	<p>Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.</p> <p>The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.</p>
Disability	<p>People living with a disability are more likely to be impacted by this proposal, as it is typically people with disabilities or impairments who are discharged from hospital into short stay residential care who then go on to become a permanent resident.</p> <p>This proposal would improve the situation for people living with a disability as a timely review and the right support would enable them to return home, rather than become permanent residential care residents.</p>	<p>Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.</p> <p>‘Discharge to assess’ models will be kept under review to make sure they are working as intended so that (i) short-term admissions to care homes do not end up becoming long-term placements. For example, persuading someone to enter short-term care that is really long-term care because there are no therapies or reablement is wrong in human, consumer and financial terms and ties up budgets; (ii) premature or inappropriate discharge arrangements do not result in readmission to hospital.</p> <p>Care planning and communication with</p>

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
		<p>individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.</p>
Gender Reassignment	No identified impact	
Marriage and Civil Partnership	<p>Potential positive impact, as more people would be supported to live at home, rather than away from their spouse or partner.</p> <p>Potential impact of additional caring responsibilities for some spouses/partners.</p>	<p>Any individual who is returning home from a short term stay in residential care will be subject to an assessment, in line with the Care Act, to ensure their needs are met. Where these needs are to be met fully or partially by a carer (including a spouse or partner) rather than a care worker, a carers' assessment will also be undertaken in line with the Care Act.</p> <p>Individuals will only move home where it safe and in the best interests of that individual to do so.</p>
Pregnancy and Maternity	No identified impact	
Race	No identified impact	
Religion or Belief	No identified impact	
Sex	No identified impact	
Sexual Orientation	No identified impact	
Community Safety	No identified impact	
Poverty	Potential positive impact, as the value of an individual's home (where it is owned) is disregarded from the adult social care financial assessment) when someone lives at home (as opposed to being taken into account when they are living permanently in a residential	N/A

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	care home [subject to certain conditions])	
Health & Wellbeing	Overall positive impact on health and wellbeing.	Any adverse impacts would in any case be mitigated through the robust application of Care Act Principles.
Other Significant Impacts	No other identified impact	

DRAFT

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	2. Making best use of the full range of services that are currently available to support people to live independently in a community setting.
Brief Service Profile (including number of customers)	
<p>Southampton City Council provides support to customers through telecare and other home based community support such as meals on wheels. This allows customers to receive support quickly and efficiently when they need it within their own homes, and making sure that it is the most appropriate help for their needs, whilst promoting their independence. In order to provide the most cost effective service that is able to support customers in the best way possible, it has been proposed to meet lower level needs through increased use of telecare and community support.</p> <p>The proposal is to bring the Southampton City Council’s activity in line with recommendations on the provision of small home care packages made by the Institute of Public Care, Oxford Brookes University.</p>	
Summary of Impact and Issues	
<p>The needs of approximately 400 clients with lower level needs are currently met through home care packages provided by a care agency. Over 5 years, this is expected to reduce to about 100 clients, with more clients being better supported to live independently through improved access to support provided by the voluntary sector (for example through the recently launched SO:Linked project which includes a community navigation service to link people with support available in the city and their communities); the use of telecare (for example, through the provision of a medication dispenser and an alarm unit); through the delivery of hot meals (for example, from City Catering) or by identifying additional community support by using an online community resource directory.</p> <p>As well as supporting greater levels of independence, this proposal is expected to deliver savings to the home care budget, as it is more cost effective to provide support by developing and supporting community networks, telecare and hot meal delivery than paying agencies to provide home care. This is expected to have the</p>	

added benefit of preventing needs arising and delaying needs becoming more complex, and the home care capacity freed up can be used to support people for whom community support would not be suitable or sufficient.

This proposal is about applying a 'strengths-based' approach as the council carries out social care assessments for new clients, which mirrors the approach proposed for existing clients as their packages of care are reviewed. New clients will be offered alternatives to meet their needs, in accordance with the council's existing policy.

The provision of telecare, hot meal delivery, support from friends, neighbours and community groups and other 'strengths-based' approaches would be considered as part of a Care Act individual needs assessment, before a home care package was approved.

Some individuals or their families might prefer to have a home care package than the alternative offered or agreed to meet their needs. These preferences would be considered under the Care Act 2014.

Potential Positive Impacts

This proposal will provide more options for lower level care needs to be met within the home and community, supporting increased independence in an efficient and cost effective way.

The proposal will support the council to meet best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.

Responsible Service Manager	Sharon Stewart Service Lead: Adult Social Care Service Lead
Date	01 October 2019
Approved by Senior Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who have home care packages to meet lower level needs. Just over 13% of the population in Southampton are aged over 65	Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	(33,508 people) which is lower than the national average of 18.2%	and the involvement of carers.
Disability	People living with a disability will be impacted by this proposal, as it is disabled people who have home care packages to meet lower level needs.	<p>The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.</p> <p>Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.</p> <p>Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.</p>
Gender Reassignment	No identified impact	
Marriage and Civil Partnership	No identified impact	
Pregnancy and Maternity	No identified impact	
Race	No identified impact	
Religion or Belief	No identified impact	
Sex	No identified impact	
Sexual Orientation	No identified impact	
Community Safety	No identified impact	
Poverty	Some alternative support arrangements such as telecare, hot meal delivery or community groups etc may have associated costs which may be passed on to the client.	Any adverse impacts would be kept under review on an individual basis. Special arrangements would be made in the unusual situation of a client being unable to afford telecare or

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	These costs are likely to be lower than the client contribution to any home care support package that might be required should these types of alternative support not be put in place.	hot meal delivery, for example.
Health & Wellbeing	Overall positive impact on health and wellbeing.	Any adverse impacts would in any case be mitigated through the robust application of Care Act Principles.
Other Significant Impacts	No other identified impact.	

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The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	3. Expanding the successful reablement service so more people benefit from short term, intensive support.
Brief Service Profile (including number of customers)	
<p>Southampton has a well-established approach to reablement care, providing short term, tailored and intensive support to maximise independence, which in turn can prevent, defer or reduce the need for a long-term care package.</p> <p>The council’s activity is currently not in line with the highest performing authorities for the provision of reablement care, as defined by the Institute of Public Care, Oxford Brookes University and as identified through an independent review of adult social care carried out by the Local Government Association in May 2019. This proposal will use existing policies and processes to increase the number of people who are offered reablement services, and therefore reduce overall need for longer term care packages.</p> <p>The current focus is on providing reablement care to people being discharged from hospital, but this proposal will widen this to ensure that it can be offered to people living at home, who approach the council for support for the first time or when their needs change. People who are identified as being most likely to benefit from reablement care will be prioritised for the expanded service.</p>	
Summary of Impact and Issues	
<p>Currently, approximately 26% of people who could benefit from reablement receive this service (approximately 189 people a year). Over 5 years, this is expected to increase to 70% of people who could benefit (approximately 511 people a year in total, if the overall number of people remains the same).</p> <p>Following reablement, approximately 50% of people do not require a long-term package of care, as the reablement has given them the skills, confidence and ability to live independently without this.</p>	

<p>This would meet the targets defined by Oxford Brookes University's Institute of Public Care (an academic body that sets standards for the quality of adult social care provision).</p> <p>Proposals will be in line with the Care Act 2014 and client's needs and wishes (preferences) would continue to be considered as well as kept under review on an ongoing basis.</p> <p>The proposal will widen the scope of offers to be made to include reablement care to people being discharged from hospital and people living in their homes. Under the Care Act people are entitled to request a full assessment at any time.</p>	
<p>Potential Positive Impacts</p> <p>This proposal will support the council to meet best practice guidelines around supporting independence.</p> <p>The proposal will increase the proportion of people being offered reablement (short term, tailored and intensive support to maximise independence), preventing, deferring or reducing the need for a long-term care package.</p> <p>The proposal will widen the scope of people being offered reablement.</p>	
<p>Responsible Service Manager</p>	<p>Sharon Stewart Service Lead: Adult Social Care</p>
<p>Date</p>	<p>01 October 2019</p>
<p>Approved by Senior Manager</p>	<p>Paul Juan Service Director: Adults, Housing and Communities</p>
<p>Date</p>	<p>01 October 2019</p>

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
<p>Age</p>	<p>Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who have home care packages, but this would be a positive impact, as more people would be receiving a service that leads to improved outcomes.</p> <p>Just over 13% of the population in Southampton are aged over 65 (33,508 people) which is lower than the national average of 18.2%.</p>	<p>Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.</p> <p>The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.</p>
<p>Disability</p>	<p>People living with a disability are more likely to be impacted by this proposal, as it is typically people</p>	

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	<p>living with a disability who have home care packages but this would be a positive impact, as more people would be receiving a service that leads to improved outcomes.</p>	<p>Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.</p> <p>Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.</p>
Gender Reassignment	No identified impact.	
Marriage and Civil Partnership	No identified impact.	
Pregnancy and Maternity	No identified impact.	
Race	No known impacts	
Religion or Belief	No identified impact.	
Sex	No identified impact.	
Sexual Orientation	No identified impact.	
Community Safety	No identified impact.	
Poverty	<p>Of the 326 Local Authorities in England, Southampton is ranked 54th (previously 72nd) most deprived.</p> <p>Reablement is provided free to the individual and there could be a positive impact in 50% of cases as no ongoing care would be needed (meaning the individual does not have to contribute to the cost of this care).</p>	

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Health & Wellbeing	The health and wellbeing of an individual will be taken into account when deciding on the most appropriate care and support package during and after the implementation of this proposal.	Any adverse impacts would in any case be mitigated through the robust application of Care Act Principles.
Other Significant Impacts	No other identified impact.	

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Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	4. Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer.
Brief Service Profile (including number of customers)	
<p>Southampton has a well-established Occupational Therapy (OT) service which currently provides clients with double handed care (the use of two carers) with clients who require manual handling.</p> <p>As part of normal review processes, the council will review whether current care packages are right for clients, and in cases of double handed care, whether that client still requires two carers at once. This may change because of changing need, or the introduction of new equipment and technologies.</p> <p>The proposal is to have Occupational Therapy review all double handed care packages that are being supplied by the council and, where appropriate, reduce this through training and/or the introduction of new equipment, having undertaken appropriate customer, staff and contractor risk assessments.</p> <p>Clients will continue to receive the care and support needed to meet their needs in full. In the future, this may be through one carer using equipment and the latest techniques.</p>	
Summary of Impact and Issues	
<p>Some clients who currently receive double handed care and are visited by two carers at a time will see a change in their support package, reducing to one carer. This will only be implemented after a review of individual care packages in line with statutory guidance and having undertaken appropriate H&S risk assessments for staff and contractors to ensure that this reduction can be made safely, and the needs of the client will continue to be met.</p>	

Currently, approximately 200 people are receiving care packages requiring two carers in attendance at once.

Clients may have new equipment installed in their homes, and this will be done in agreement with the client and/or their representatives, and training and support will be provided. The hoist and sling (MoLift) will be similar in size to the hoist that is currently used for two handed care. The storage and use of the sling will be similar also. The care agency and the family members will need specific training in single handed care and the functions of the hoist. This training will be the responsibility of the prescribing staff member. The care agency will disseminate the training to ensure all carers in attendance are able to use the hoist.

Potential Positive Impacts

This proposal will support the council to meet best practice guidelines around supporting independence.

Home care resources will be freed up to support more people in the city (for example, speeding up discharges from hospital, people not having to wait as long for a home care package to start). Clients will be provided with a more tailor-made, personalised level of support in order to provide maximised independence to our clients.

Responsible Service Manager	Sharon Stewart Service Lead: Adult Social Care
Date	01 October 2019
Approved by Senior Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who receive double handed care packages.	Clients will continue to have their needs met in full through a safe way of working and this would be kept under regular review.
Disability	People living with a disability people are more likely to be impacted by this proposal, as it is	

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	typically disabled people who receive double up care packages.	
Gender Reassignment	No identified impact.	
Marriage and Civil Partnership	No identified impact.	
Pregnancy and Maternity	No identified impact.	
Race	No identified impact.	
Religion or Belief	No identified impact.	
Sex	No identified impact.	
Sexual Orientation	No identified impact.	
Community Safety	No identified impact.	
Poverty	No identified impact.	
Health & Wellbeing	The health and wellbeing of an individual will be taken into account when deciding on the most appropriate care and support package during and after the implementation of this proposal.	<p>Any adverse impacts would be mitigated on a case by case basis through the robust application of Care Act Principles.</p> <p>Assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.</p> <p>The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals. Timely assessments and reviews would be carried out.</p>
Other Significant Impacts	Potential impacts on SCC staff and contractors have been considered. No significant impacts on staff working within the care sector is anticipated.	

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	<p>SCC staff do not currently deliver home care visits. There is no anticipated reduction in availability of work anticipated for contracted suppliers of these services, as there is currently a shortfall in carers within the city resulting in greater demand than availability of carers. Some care workers may change their visit patterns if some clients move from double to single person requirements, but this is part of normal business and will be part of staff contracts.</p>	

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The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	5. Increased availability of housing with care options (‘extra care’) across the city.
Brief Service Profile (including number of customers)	
<p>Southampton City Council has made a commitment to increase its supply of housing with care (also referred to as ‘extra care’ housing) in line with local and national agendas. Housing with care refers to specialist housing designed to effectively accommodate people with additional needs, mostly related to old age and disability (e.g. frailty, mobility and cognitive issues), who would normally struggle to live independently in ordinary housing.</p> <p>Some of the key features of housing with care that enable it to support a wide range of individuals with needs include; purpose built environment (preventing falls and increasing accessibility), 24/7 care, communal restaurant and wellbeing facilities, as well as emergency cover. Housing with care enables individuals to sustain their independence for longer, and either avoid or delay the need for institutional care (such as residential and nursing care settings).</p> <p>The proposal is to expand citywide provision of housing with care to support more people in community based settings and to reduce the city’s reliance on residential care. This approach links to other key agendas for the city, such as the Southampton City Five Year Health & Care Strategy, The Better Care Plan, and housing and adult social care services around personalised support offer.</p> <p>There are currently five housing with care schemes in the city, jointly providing capacity of around 160 units of adapted accommodation for people with needs. Four of these schemes are owned and managed by SCC, and one scheme by Saxon Weald. To maximise the use of this type of housing to support people with care needs most effectively, the city is developing a further 450 – 500 units of extra care housing over the next eight years. This includes Potter’s Court, which will be</p>	

one of the schemes developed as a part of the wider delivery programme and will produce 84 units of extra care accommodation, due to go live in October 2020.

The Potter's Court scheme will accommodate people with identified care and housing need, and will support individuals over the age of 18. While we believe it is more likely the majority of clients will be older people, the lack of age restrictions will enable the council to offer this type of accommodation to younger people who have an assessed care need and would like to be supported in extra care housing.

A number of individuals accessing Potter's Court will have significant care needs. The referrals will come from community settings as well as from residential care. This strategy will result in significant savings to SCC (care delivery is more cost effective in housing with care), but most importantly, housing with care will provide a better environment for people requiring care.

Only people who have been assessed as being suitable for extra care housing will be offered this as an option, based on meeting need and taking account of any preferences expressed by individuals and their families, in accordance with the council's Care and Support Planning Policy and relevant legislation.

Summary of Impact and Issues

Overall, the council's strategy to deliver more housing with care accommodation is expected to have a positive impact on people with support needs. This proposal will offer the city's residents suitable accommodation in an independent living setting, while traditionally an alternative for this type of housing would be residential care, which is associated with a loss of independence and an institutional setting.

In addition, housing with care plays a preventative function, whereby people who are likely to develop needs are identified early and encouraged to move to extra care to help manage their conditions. Housing with care can act as a direct alternative to institutional (residential and nursing) care, and contribute to the number of options available to people with support needs.

Potential Positive Impacts

SCC have not identified any negative impacts on individuals in relation to increasing the supply of housing with care. There have been, however, a number of positive impacts identified in relation to individuals' health and wellbeing ' These include:

- slower deterioration of functional ability in comparison to a comparator group in the community – due to the availability of support and adapted environment
- improved social wellbeing, mental health and reduced feeling of isolation – due to the activities and the support offer available
- improved assessment of care needs – due to 24/7 staff availability and regular contact with client
- improved impact on health – evidenced by a reduced use of health facilities (GPs, nursing, shorter hospital stays).

Taken from 'Identifying the Health Care System Benefits of Housing with Care' (2019). Housing Learning Improvement Network and Southampton City Council.

In addition, people that choose to access 'extra care' over residential care can sustain their independent living status due to the sustainment of housing and occupancy rights to their accommodation, which isn't the case for people moving onto residential care.

The development of extra care schemes also benefits the community as the facilities are available to the nearby community that can access the support and facilities available on site, enabling and deepening community interactions. It also produces similar regeneration benefits to other housing developments.

Responsible Service Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019
Approved by Senior Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	<p>Potter's Court will be available to individuals over the age of 18 who have an assessed care and housing need.</p> <p>Other extra care housing schemes in the city are currently available to older adults (the age depends on the scheme, but is generally aimed at people who are aged 55 and over). Age criteria for new schemes being planned for the city will be determined following an evaluation of the Potter's Court scheme (and the adjacent new supported housing scheme at Kiln Court).</p>	<p>This is a positive impact – it increases choice of care options for people with needs.</p>
Disability	<p>Potter's Court will be purpose-built to meet the needs of disabled people. This can include people with Mental Health, Learning Disabilities and physical disabilities. It will have appropriate</p>	<p>The provision will expand the number of housing units available to people with needs and disabilities. Care provision will be tailored to meet the needs of individuals. Staff will</p>

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	<p>support and care on site to cater to needs effectively.</p> <p>Other extra care housing schemes in the city are also purpose-built or adapted to meet the needs of disabled people and have appropriate care and support on site. The design of future schemes will take into account an evaluation of the scheme at Potter's Court when it opens in 2020.</p>	<p>have completed relevant training (see Home Care Framework requirements).</p>
Gender Reassignment	<p>No impacts identified.</p>	
Marriage and Civil Partnership	<p>A proportion of two-bedroom apartments will allow for couples to move in together.</p> <p>Planning of future extra care housing schemes will take in to account demographic forecasts.</p>	
Pregnancy and Maternity	<p>No impacts identified.</p>	
Race	<p>No impacts identified.</p>	
Religion or Belief	<p>No impacts identified.</p>	
Sex	<p>No impacts identified.</p>	
Sexual Orientation	<p>No impacts identified.</p>	
Community Safety	<p>Accommodation access will be by key fobs and staff will support with the day to day management of the scheme and promote safety among residents.</p> <p>Interaction between residents and the wider community is encouraged in existing schemes and this will continue with Potter's Court and new schemes, for example by opening up the restaurant and other facilities (hairdresser, wellbeing, community room etc.).</p>	
Poverty	<p>Individual financial circumstances will be taken into account when assessing care need.</p>	

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Health & Wellbeing	Positive impact identified as extra care delivers support to enable people to sustain their independence in a community setting.	
Other Significant Impacts	No other impacts identified.	

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The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	6. Ensuring direct payments are being used in accordance with care and support plans to meet care needs
Brief Service Profile (including number of customers)	
<p>Southampton City Council currently pays Direct Payments to 326 Adult Social Care clients. These payments are paid into 2 types of accounts. A traditional bank account that is managed by the client in its entirety or into an Allpay account that is set up by the council. Currently 258 Clients use a traditional bank account and 68 have Allpay accounts. The council pays a total of £4m in Direct Payments per year.</p> <p>The council is responsible for auditing payments and accounts to ensure that funds are spending in line with agreed care plans.</p> <p>Where payments are made into a traditional bank account, the client is required to retain evidence to be produced when a financial audit request is received. Where payments are made into an Allpay account, the account is visible on-line to authorised officers of the council, meaning that there is less need for the client to keep documentary evidence (with exceptions such as receipts for cash expenditure).</p> <p>The proposal is to review and audit direct payments to ensure the funds are being used in accordance with the care and support plan in line with council policies.</p> <p>Audit activity in 2019/20 identified that 16% of funds paid into the accounts audited was potentially misspent. Therefore, the proposal is to ensure more rigorous audit activity is undertaken to identify any funds that have been potentially misspent, or remain unused (overpayments). Where appropriate, the council will seek to recover these funds.</p>	

Summary of Impact and Issues	
<p>Clients will continue to receive the care and support needed to meet their needs in full.</p> <p>The use of direct payments will be subject to more regular checks (in accordance with the council's current policy) to make sure that additional support is not needed and that the payment is being used to meet identified care needs. This means that some clients may be required to provide evidence relating to their spend in line with policies and Direct Payment agreements, when this may not previously have been routinely requested.</p> <p>Where overpayments or misused funds are identified, the council may seek to recover these funds.</p>	
Potential Positive Impacts	
<p>This proposal will support the council to meet best practice guidelines around direct payments.</p> <p>More frequent audits will ensure that clients do not accrue large balances, and overpayments are identified quickly.</p> <p>The direct payment process will be more streamlined, encouraging more people to take these up, to have greater control of their personalised care.</p>	
Responsible Service Manager	Louise Ryan Service Manager: Social Wellbeing Service
Date	01 October 2019
Approved by Senior Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	No identified impact. This process will be applied in the same way to all Direct Payment recipients, regardless of age.	
Disability	People living with a disability are more likely to be affected by the proposal as this group tend to receive direct payments and therefore are more likely to be impacted by this proposal, as it is	Clients will continue to have their needs met in full; timely reviews would be offered along with support and advice.

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	typically disabled people who receive direct payments.	
Gender Reassignment	No identified impact.	
Marriage and Civil Partnership	No identified impact.	
Pregnancy and Maternity	No identified impact.	
Race	No identified impact.	
Religion or Belief	No identified impact.	
Sex	No identified impact.	
Sexual Orientation	No identified impact.	
Community Safety	No identified impact.	
Poverty	<p>Of the 326 Local Authorities in England, Southampton is ranked 54th (previously 72nd) most deprived.</p> <p>This proposal will make it more difficult for a direct payment to be used for any other purpose than meeting an individual's assessed unmet care and support needs. This may impact negatively on their finances overall.</p>	<p>People will be signposted to benefit and debt advice as part of the financial assessment for social care (as appropriate).</p> <p>A repayment plan for any payments that have to be repaid will be agreed, having regard to individual circumstances.</p>
Health & Wellbeing	No identified impact.	
Other Significant Impacts	No identified impact.	

Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	7. The provision of better and earlier advice and information on adult social care and community support etc. to meet Care Act duties on promoting wellbeing and supporting independence
Brief Service Profile (including number of customers)	
<p>Information is currently provided to the public on support services available in the city via the Southampton Information Directory (SID).</p> <p>The proposal is to explore alternative web-based advice system and/or improvements to the current SID system for adult social care.</p> <p>This will be kept more regularly updated with advice and information about support available in people’s communities that can help to prevent needs arising and help to keep people independent and well.</p> <p>We will also maximise the use of SO:Linked, the new Community Support framework that has been commissioned in Southampton (and is provided by Southampton Voluntary Services) to signpost people to support.</p> <p>Overall this is expected to reduce demand on council delivered support services, through signposting and self-service, and to help prevent problems from escalating.</p>	
Summary of Impact and Issues	
<p>Some clients who currently use the Southampton Information Directory may need to visit an alternative website. This would be supported through clear communications and messaging to alert users to any change. This proposal is anticipated to have a positive impact, as any new or improved web experience will provide improved information on a wider scale than previously. That information</p>	

will be more comprehensive and up to date, and will provide intelligent search functions to direct users quickly to relevant information.

Some users currently access information on support services through intermediaries. For example, they will visit face to face advice centres, ask for advice from care and support workers, or phone the council or other advice lines. These users will experience no direct impact, as these channels will remain. However, workers within these channels may move to using any new system and indirectly provide a positive impact to the service users, through having access to a more comprehensive support tool.

The Community Support framework will boost access to and availability of community and voluntary sector organisations and services that can provide practical help and support.

Potential Positive Impacts

This proposal is anticipated to have an overall positive impact. The Community Network framework will enable more people to access more help and support in the community, with the improved web-based advice service helping more people to find out what support is available.

Responsible Service Manager	Anita Hill Team Manager: Adult Social Care Connect Team
Date	01 October 2019
Approved by Senior Manager	Paul Juan Service Director: Adults, Housing and Communities
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who have adult social care needs that can be prevented or deferred through the provision of advice and information.	Communications will be accessible and tailored. The existing council provided Connect Service will remain available to provide telephone and email advice and support and triage clients with the most complex needs for appropriate follow up.
Disability	People living with a disability are more likely to be impacted by this proposal, as it is typically disabled people who have adult social care needs that can be prevented or	The use of systems will be monitored in order to identify any safeguarding

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	deferred through the provision of advice and information.	concerns, which will then be addressed. The service will complement existing services in order to meet Care Act requirements to provide early advice and support in order to prevent needs arising.
Gender Reassignment	No identified impact	
Marriage and Civil Partnership	No identified impact	
Pregnancy and Maternity	No identified impact	
Race	No identified impact	
Religion or Belief	No identified impact	
Sex	No identified impact	
Sexual Orientation	No identified impact	
Community Safety	No identified impact	
Poverty	In some cases, accessing support via the internet can have associated costs (access to a computer or data costs).	The council will continue to ensure that residents can access online services for free in libraries and other community and partner venues, to ensure that they do not need own personal devices or data to access online services. Access to alternative channels for information will not be impacted by this proposal.
Health & Wellbeing	No identified impact	
Other Significant Impacts	No other identified impacts.	

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

Name or Brief Description of Proposal	8. Developing a ‘Level 4’ Specialist Foster Care scheme in Southampton
Brief Service Profile (including number of customers)	
<p>The proposal is to develop a Specialist Foster Care scheme in Southampton, by introducing an additional level (level 4) to the fee structure, for those carers able to care for children and young people with complex behavioural needs who are currently placed in out of city Residential Settings or Independent Fostering Agency placements.</p> <p>The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour who would currently be more likely to be placed externally.</p> <p>This enhanced ‘Level 4’ service will enable Looked After Children (LAC), for whom Southampton City Council hold a corporate parenting responsibly, to be brought back into the city to access specialist in-house foster care services and therefore improve overall outcomes, increasing their chances to be successful. This proposal also allows the service to reduce the dependency on specialist services being purchased outside of the city, where positive outcomes are impacted due to children being geographically dispersed.</p> <p>Weekly payments to foster carers have two elements – a fee and an allowance. The allowance is the amount paid to the carer for the upkeep of the child – this includes food and clothing as well as a contribution towards household costs, transport etc. The fee is paid to the carer as a reward for the skills and experience they bring to the role of fostering. This is not a salary - all foster carers are self-employed, not employees of the agencies they foster for. This proposal will</p>	

introduce a new 'level 4' fee for those foster carers that are able to care for children with complex behavioural needs.

A team of workers will be created to provide the fostering service and specialist carers with a high level of wrap-around support so that placements remain stable. This support will consist of:

- 1.0FTE Supervising Social Worker
- 0.5FTE Psychologist
- 1.0FTE Mental Health Social Worker
- 3.0FTE Family Engagement Workers
- 1.0FTE Administrator

The scheme will be piloted with six fostering households, recruited both externally and from the in-house foster carer population. Assuming some households would be approved for more than one child, the initial capacity of the service would be around 10 children.

Summary of Impact and Issues

This proposal will affect around 10 children and young people who are currently placed outside the city in Residential Care settings, and new children who are being placed in a care setting who might previously have been placed outside the city in a Residential Care setting or with an Independent Fostering Agency (IFA) placement. For those children and young people this proposal is anticipated to have an overall positive impact, in providing a supportive wrap-around service within the city, keeping children and young people within their communities where suitable, and minimising disruption when they are moved into care placements.

Where a child or young person is already in a placement outside the city and consideration is given to a move into a new placement within the 'Level 4' service in Southampton, a full assessment will be undertaken to ensure that the move is positive and will not have negative impacts on the child or young person.

This proposal will also affect foster carers within the city who opt to take part in the 'Level 4' service. These carers will be given support and training before a child or young person with more complex behavioural needs is placed with them, and throughout the placement. Placements will only be made where it is deemed safe and suitable for both the child/young person and the carer. The 'Level 4' enhanced fee is reflective of the additional skills and experience required to support these placements.

Potential Positive Impacts

This proposal is anticipated to have an overall positive impact for children and young people who are currently or would be placed outside the city, by ensuring that the council can deliver a 'wrap-around' and holistic services including therapeutic work and education within the city.

Outcomes for those children and young people are expected to improve, as remaining within their communities and familiar settings will be less disruptive when placed in a care setting. Remaining within the city will also support children's social care practitioners to be continually revisiting opportunities for children to return home to their families at the earliest point.

Staff time will be reduced in terms of travelling to visit children if they are within the city boundaries, meaning that workers will be more productive and can achieve better outcomes for our children and young people. Dependency on longer term services can again be minimised by ensuring that children are able to access good quality local education, health support and mental health support in their local area.

Improving our 'in house' foster care service will also reduce costs of individual placements (recognising that out of city Residential or IFA placements are generally higher cost), meaning that funds can be used effectively to meet need across the service.

Responsible Service Manager	Sharon Hawkes Service Lead: Children's Social Care
Date	01 October 2019
Approved by Senior Manager	Hilary Brooks Service Director: Children, Families and Education
Date	01 October 2019

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	<p>This proposal will mostly impact children and young people – predominantly the 'older' age group (generally 10-18).</p> <p>The initial capacity of the service would mean that this service will impact around 10 children.</p> <p>The overall impact is anticipated to be positive for these children, by ensuring that the council can deliver a 'wrap-around' and holistic services including therapeutic work and education within the city.</p> <p>Remaining within their communities and familiar settings will be minimise disruption to children when placed in a care setting.</p>	<p>Full assessments will be undertaken to ensure that the placement is safe and suitable for the individual child and meets their needs.</p> <p>If a child is being moved from an out of city residential placement, a full assessment will be undertaken to ensure that the move is positive and will not have negative impacts on the child or young person.</p>

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Disability	<p>The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour.</p> <p>Children and young people with complex behavioural needs may also be living with a disability, including learning disabilities and mental health needs.</p>	<p>Any child or young person being placed in a foster care setting will have their needs assessed, and the placement will only be agreed where it is safe and suitable and meets the needs of the individual child.</p> <p>Where the child or young person is living with a disability they will be supported under the council's SEND service and provided with support in line with the Education Health and Care Plan (EHCP).</p>
Gender Reassignment	No identified impact.	
Marriage and Civil Partnership	No identified impact.	
Pregnancy and Maternity	<p>This proposal will support older children and young people (generally 10-18) who have complex behavioural needs. Therefore this proposal is not anticipated to have any impact on children entering care at birth and their mothers.</p>	
Race	No identified impact.	
Religion or Belief	No identified impact.	
Sex	<p>In general, the children likely to be in scope of this proposal include more males. However, the support delivered through the Level 4 Fostering approach will not be differentiated between sexes, and will be offered based on need rather than sex.</p>	
Sexual Orientation	No identified impact.	
Community Safety	The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting	This proposal will relate to a small cohort of children and young people (around 10). Each placement will be

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	<p>challenging and/or risky behaviour within Southampton.</p> <p>Whilst the overall impact of remaining in the city is considered to be positive, there is a risk of negative impact on community safety. If antisocial behaviour persists within the placement this could have an impact on residents in the area. Furthermore, remaining within a locality could encourage a child or young person to persist in anti-social behaviours where this is linked to a social group or other local influences.</p>	<p>subject to assessment, which, on a case by case basis, will consider the impacts of the location of placement in order to take into account any individual circumstances and minimise risk for the young person, carers, and community. Ongoing assessment will be in place alongside wraparound support to address any behavioural needs.</p>
Poverty	No identified impact.	
Health & Wellbeing	No identified impact.	
Other Significant Impacts	No other identified impact.	

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Budget Proposals 2020/21 Equality and Safety Cumulative Impact Assessment

October 2019

Equality and Safety Cumulative Impact Assessment

Introduction

1. Southampton City Council, in line with its statutory responsibilities, undertakes Equality and Safety Impact Assessments (ESIAs). ESIAs provide a systematic way of assessing the impact of policies, strategies, programmes, projects, services or functions on different equality groups - and on poverty and community safety. During the council's annual budget cycle, ESIAs are completed for all proposals identified as requiring them to inform decision making.
2. This document draws into one place a summary of all the ESIAs for the 2020/21 budget proposals. This assessment focuses on service based proposals identified as having a direct impact on customers/residents. In addition, there are a range of budget proposals which are efficiencies and do not have a disproportionate impact for people within the equalities legislation, and therefore are not represented by ESIAs.
3. It is important to fully understand the impact of the budget proposals on equality groups (identified in paragraph 10) and on community safety, poverty and health and wellbeing. The council, working with others, will need to take action to mitigate the collective impact of any such proposals. Mitigating actions could include re-shaping services to target more efficiently and to reduce the potential of disproportionate impacts on equalities groups, community safety, poverty and health and wellbeing.
4. Consultation will be undertaken with residents and stakeholders on the draft budget proposals between 16 October 2019 and 8 January 2020. Analysis on consultation feedback will be considered by the Cabinet before they finalise their budget proposals that will be recommended to Full Council in February 2020 when it will set the budget. Feedback will be incorporated into the relevant individual Equality and Safety Impact Assessments and reflected in an updated version of this Cumulative Impact Assessment.

Context

5. Local government has had to change significantly in response to ongoing changes in the city's profile, trends in customer behaviour, national and local policies and the austerity challenges. This is accompanied by ongoing challenges in the shape of rising demand in adults and children's social care.
6. On 4 September 2019 the Government published the Spending Round 2019, which announced additional funding for Local Government, in particular in relation to adult social care. Southampton City Council has not yet received a financial settlement for 2020/21, and this is expected at the end of 2019. This CIA will be updated following further announcements from the government regarding funding allocations 2020/21.
7. This Cumulative Impact Assessment covers the budget proposals for the financial year 2020/21 which are being considered by Cabinet from October 2019, and will be proposed to Full Council in February 2020. These proposals should be considered in addition to proposals set out in the [Cumulative Impact Assessment published in February 2019](#), which included proposals for 2019/20 and 2020/21. The overall impact of both the decisions made in February 2019 and this set of proposals is demonstrated in **Appendix 1**.

Legal Framework – Equalities

8. The Equality Duty, section 149 of the Equality Act, came into effect on 5th April 2011 and places a duty on all public bodies and others carrying out public functions.
9. The Public Sector Equality Duty (the Equality Duty) replaced three previous public sector equality duties – for race, disability and gender, and broadened the breadth of protected characteristics to include:
 - Age
 - Disability
 - Gender reassignment
 - Marriage and civil partnership, but only in respect of the requirements to have due regard to the need to eliminate discrimination.
 - Pregnancy and maternity
 - Race – ethnic or national origins, colour or nationality
 - Religion or Belief – including lack of belief
 - Sex
 - Sexual orientation.
10. The Act was designed to ensure public bodies consider the needs of all individuals in their day to day work, including: shaping policy, delivering services and employment of employees. It requires public bodies, such as local councils not to discriminate against any person on the basis of a protected characteristic such as disability. The legislation strengthened existing provisions about discrimination to also include associative and perceptive discrimination as well as direct and indirect discrimination.
11. Direct discrimination occurs when a rule, policy or practice offers less favourable treatment to a group and indirect discrimination occurs by introducing a rule, policy or practice that applies to everyone but particularly disadvantages people who have a protected characteristic. Direct discrimination will always be unlawful. Indirect discrimination will not be unlawful if it can be justified, for instance it can be shown that the rule, policy or practice was intended to meet a legitimate objective in a fair, balanced and reasonable way.
12. In considering whether or not any indirect discrimination is justified, the council must consider whether or not there is any other way to meet their objective that is not discriminatory or is less likely to disadvantage those with protected characteristics. This may well mean setting out clearly whether or not consideration has been given to other ways of achieving these objectives.
13. The Equality Duty does not impose a legal requirement to conduct an Equality and Safety Impact Assessment, rather it requires public bodies to demonstrate their consideration of the Equality Duty and the conscious thought of the Equality Duty as part of the process of decision-making. This entails an understanding of the potential effect the organisation's activities could have on different people and a record of how decisions were reached. Producing an Equality Impact Assessment post decision making is non-compliant with the Public Sector Equality Duty. For this reason the council requires adherence to the existing impact assessment framework.

Legal Framework - Community Safety

14. Community Safety is a broad term. It refers to the protection of local communities from the threat and consequence of criminal and anti-social behaviour by achieving reductions in relation to both crime and the fear of crime.
15. Section 17 of the Crime and Disorder Act 1998, as amended by the Police and Justice Act 2006, requires responsible authorities to consider crime and disorder, including antisocial behaviour and other behaviour adversely affecting the local environment; and the misuse of drugs, alcohol and other substances in the exercise of all their duties, activities and decision-making. This means consideration must be given to the likely impact on crime and disorder in the development of any policies, strategies and service delivery. This responsibility affects all employees of the council.
16. This responsibility is summed up by guidance issued by the Home Office. This guidance describes the legal responsibility as: *'a general duty on each local authority to take account of the community safety dimension in all of its work. All policies, strategies, plans and budgets will need to be considered from the standpoint of their potential contribution to the reduction of crime and disorder'*.

Other considerations

17. In line with the [Southampton Joint Health and Wellbeing 2017-2025](#), the council has committed to ensuring that health inequalities are taken into account in policy development, commissioning and service delivery. This means that consideration will be given to impacts on health and wellbeing in the ESIA's.
18. The council's approach on assessing the impact of its policies, proposals and decisions, is designed to demonstrate that it has acted over and above its statutory duties. This is reflected in including poverty in the ESIA, as the council is committed to addressing the impact on poverty for people in work and unemployed and for other low income households.
19. The ESIA's also consider any other significant impacts that in relation to the proposal and decision.

Scope and our approach

20. This assessment identifies areas where there is a risk that changes resulting from individual budget proposals for 2020/21, may have, when considered together, negative impacts on particular groups.
21. It is important to note this is an ongoing process. As individual budget proposals are developed and implemented, they will be subject to further assessment. This assessment also describes mitigating actions that will need to be considered.
22. In order to inform decision-making on the budget proposals, the council has taken the following steps:
 - Managers identified proposals which in their view require an Equality and Safety Impact Assessment (ESIA).
 - All budget proposals have been screened independently by a group of officers to consider whether or not an ESIA was required. This was based on an assessment

of whether or not they were likely to have a disproportionate equalities impact on particular groups of residents, or have implications for community safety, health and wellbeing or increasing poverty.

- This resulted in a list of proposals for which an ESIA was clearly required and those for which further detail was needed to be gathered before making a decision.
- As a result of the screening, ESIA's have been produced for every proposal assessed as requiring one. These primarily focus on the impact of proposals on residents and service users.

23. This Cumulative Impact Assessment will be updated and developed based on the final proposals and detail of individual ESIA's. It will also be informed by the feedback from residents and stakeholders as part of the public budget consultation.

City Profile

24. The most recent data available for the population of Southampton is from the Office of National Statistics mid-year estimate 2018. This puts the total figure at 252,796. There were 129,167 (51.1%) males and 123,629 (48.9%) females. Southampton's population is predicted to increase to 273,020 people by 2025, a rise of 6.5% (16,561 people) from 2018.

25. However, the 2011 Census provides a more detailed population profile for the city. According to this, in 2011 the city's population profile comprised 236,900 residents and:

- There were 122,368 females and 127,168 males, a 49% to 51% split.
- 77.7% of residents were white British (compared to 88.7% in 2001).
- The 'Other white' population, which includes migrants from Europe, increased by over 200% (from 5,519 to 17,461) compared to Census 2001.
- The largest percentage increase is in our 'other Asian' population, which increased from 833 to 5,281 people compared to Census 2001.
- It is estimated that there are 26,929 residents whose main language is not English; of these 717 cannot speak English at all and a further 4,587 do not speak it well. In 2019 there were 149 different languages spoken in schools across Southampton.
- 4,672 residents in Southampton are aged 85 or over, of whom 834 are in bad or very bad health and have a long-term illness or disability.

26. The Index of Multiple Deprivation (IMD) provides another range of data about the city. It focuses on the geographical profile of poverty but there is also a link between equality strands and risk factors for poverty. The most recent IMD was published in 2019, and covers the period between 2015/16. It indicates that, during this period, Southampton became relatively less deprived compared to other places in the country. Of the 317 local authorities in England, Southampton is now ranked 55th most deprived, compared to 54th in IMD 2015.

**Table1:
Budget Proposals: Negative Impact By Protected Characteristics, Community Safety, Health and Wellbeing and Poverty.**

Code	Description of Proposal	Age	Disability	Gender Reassignment	Marriage & Civil Partnership	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Community Safety	Poverty	Health & Wellbeing	Other
People in Southampton live safe, healthy, independent lives														
1	Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital	*	*		*									
2	Making best use of the full range of services that are currently available to support people to live independently in a community setting	*	*									*		
3	Expanding the successful reablement service so more people benefit from short term, intensive support	*	*											
4	Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer	*	*											*
5	Increased availability of housing with care options ('extra care') across the city	*	*											
6	Ensuring direct payments are being used in accordance with care and support plans to meet care needs		*									*		
7	The provision of better and earlier advice and information on adult social care and community support etc. to meet Care Act duties on promoting wellbeing and supporting independence	*	*									*		
Children and young people get a good start in life														
8	Developing a 'Level 4' Specialist Foster Care scheme in Southampton	*	*								*			

Age – Older people

27. People in later life may be more likely to use some council services and so may be more vulnerable than the general population to reductions or changes in those services. This vulnerability will be worsened for those living on low incomes. Some older people may feel the impact of several proposals. Some of the most significant are those relating to social care, and accessing services and information.
28. The proposals for adult social care are designed to improve the quality of adult social care services and to ensure that the way that the council works gives people aged over 65 the best opportunity to live independently.
29. The proposals being considered in the Budget are designed to deliver support more older people to live independently. For example, the proposals will provide older people with improved access to advice and information, which may prevent any social care needs arising in the first place or worsening.
30. If and when older people do need support, these proposals offer more people “reablement care”. This is currently offered to people being discharged from hospital but it would be extended so that others could benefit. Reablement care is offered at no cost to the individual on a short term basis, in a way that is tailored to their needs. People who receive reablement care are more likely to reach their individual goals and to not need ongoing support, but ongoing support would still be available to those who need it. Older people identified as having lower level needs at any stage (this might be people who are receiving advice and information and those receiving reablement) will be offered options for how these needs could be met. It is anticipated that more people could benefit from telecare, hot meal delivery, befriending groups etc. to provide support and reassurance as a result of these proposals.
31. These proposals also mean that people being discharged from hospital into a care home would receive an earlier social care assessment with a view to supporting all those that can to return to their own homes. People in this situation generally already benefit from reablement care. They would also routinely be offered telecare and any other community based service that could support them to remain living independently at home. They would also have improved access to advice and information and support to plan ahead should their circumstances change. Older people who currently receive care at home from two carers would receive a review to see whether any equipment could mean that care could safely be given by one carer.
32. These Budget proposals may impact on individuals affected by Budget proposals agreed by Council in February 2019. The Budget decision taken in February 2019 to increase the amount some people have to pay towards their non-residential care (home care) means that some may face financial hardship if they are required to make a further contribution towards the cost of telecare, hot meal delivery or any other chargeable service provided in addition to home care. There is a mechanism in place to mitigate any negative impact of this by taking into account essential expenditure incurred because of a person’s disability as part of their financial assessment. For example, the cost of telecare and other services would not be taken into account as income as it is a disability related expense. This means that the person would not be worse off overall because of having to pay for these services. In exceptional circumstances, the council will consider options to defer, suspend or waive any charges.

33. Adult social care decisions are undertaken in the best interest of the individual taking personal circumstances into account, and cumulative impacts will be considered on a case by case basis where appropriate.
34. **1: Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital.** Southampton City Council is proposing to increase the level of support to help more people to return home after a short stay in residential care following discharge from hospital.
35. Some people need to spend a period of time in residential care after being discharged from hospital and before they can return home. This proposal will use existing policies and processes to ensure that the right support is available to help more people regain their independence and move home from these short term placements more quickly. This will involve an assessment being carried out more quickly by a social work practitioner after the individual has been discharged from hospital into residential or nursing care. This will help to make sure that suitable care arrangements are put in place as quickly as possible to support someone to return home in line with their and their family's wishes, before there is any deterioration in the individual's ability to return home. This might involve the provision of home care, reablement care and therapy, adaptations, the use of telecare and other community support.
36. We will increase the proportion of people who return home after a short-term period in a residential care bed following discharge from hospital, in line with national best practice benchmarks.
37. Individuals will only be return home where it is safe and reasonable to do so, and with appropriately assessed care and carers packages in place in line with statutory requirements and guidance. If residential or nursing care was subsequently required, this would be arranged from home in a planned way and in the person's best interests. Any assessments would be undertaken in consultation with those affected.
38. We have identified the following impacts:
- Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who are discharged from hospital into short stay residential care who then go on to become a permanent resident.
 - Just over 13% of the population in Southampton are aged over 65 (33,508 people) which is lower than the national average of 18.2%.
 - The primary impact of this proposal will be that individuals needing a short time in residential care between hospital discharge and returning home, spend less time in that residential setting overall.
 - Last year, 14 people were discharged in to a residential care home from hospital. 5 returned home after a short stay and 9 became permanent residents. If this proposal is adopted and there were 14 people discharged in similar circumstances, this proposal would mean that 12 would be supported to return home after a short stay and 2 would become permanent residents.
 - Some people or their families might prefer them to become permanent residents rather than being supported to return home and to make the decision from there. These preferences will be considered in line with the Care Act 2014.
39. We have identified the following mitigations:

- Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
- The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.
- Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.
- 'Discharge to assess' models will be kept under review to make sure they are working as intended so that (i) short-term admissions to care homes do not end up becoming long-term placements. For example, persuading someone to enter short-term care that is really long-term care because there are no therapies or reablement is wrong in human, consumer and financial terms and ties up budgets; (ii) premature or inappropriate discharge arrangements do not result in readmission to hospital.
- Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.

40. Southampton City Council's driving principle in our approach to supporting people to return home is that individuals are offered the right care, in the right place, at the right time. Best practice guidance states that no one should be admitted directly to long-term care from hospital unless in very exceptional circumstances e.g. for end-of-life care where this is not possible at home. The default pathway should be discharge home, with the right support; reablement (tailored support to maximise a person's capabilities and confidence) should always be considered. This proposal will positively support this approach.

41. For all groups, this proposal will support more people to return to living within their own homes more quickly, with the right care and support in place to enable them to do so.

42. This proposal will also help ensure that Southampton City Council meets best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.

43.2: Making best use of the full range of services that are currently available to support people to live independently in a community setting. Southampton City Council provides support to customers through telecare and other home based community support such as meals on wheels. This allows customers to receive support quickly and efficiently when they need it within their own homes, and making sure that it is the most appropriate help for their needs, whilst promoting their independence. In order to provide the most cost effective service that is able to support customers in the best way possible, it has been proposed to meet lower level needs through increased use of telecare and community support.

44. The proposal is to bring the Southampton City Council's activity in line with recommendations on the provision of small home care packages made by the Institute of Public Care, Oxford Brookes University.

45. The needs of approximately 400 clients with lower level needs are currently met through home care packages provided by a care agency. Over 5 years, this is expected to reduce to about 100 clients, with more clients being better supported to live independently through improved access to support provided by the voluntary

sector (for example through the recently launched SO:Linked project which includes a community navigation service to link people with support available in the city and their communities); the use of telecare (for example, through the provision of a medication dispenser and an alarm unit); through the delivery of hot meals (for example, from City Catering) or by identifying additional community support by using an online community resource directory.

46. This proposal is about applying a 'strengths-based' approach as the council carries out social care assessments for new clients, which mirrors the approach proposed for existing clients as their packages of care are reviewed. New clients will be offered alternatives to meet their needs, in accordance with the council's existing policy.

47. The provision of telecare, hot meal delivery, support from friends, neighbours and community groups and other 'strengths-based' approaches would be considered as part of a Care Act individual needs assessment, before a homecare package was approved.

48. We have identified the following impacts:

- Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who have home care packages to meet lower level needs.
- Just over 13% of the population in Southampton are aged over 65 (33,508 people) which is lower than the national average of 18.2%.
- Some individuals or their families might prefer to have a homecare package than the alternative offered or agreed to meet their needs. These preferences would be considered under the Care Act 2014.

49. We have identified the following mitigations:

- Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
- The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.
- Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.
- Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.

50. As well as supporting greater levels of independence, this proposal is expected to deliver savings to the home care budget, as it is more cost effective to provide support by developing and supporting community networks, telecare and hot meal delivery than paying agencies to provide home care. This is expected to have the added benefit of preventing needs arising and delaying needs becoming more complex, and the home care capacity freed up can be used to support people for whom community support would not be suitable or sufficient.

51. Across all groups, this proposal will provide more options for lower level care needs to be met within the home and community, supporting increased independence in an efficient and cost effective way.

52. This proposal will also support the council to meet best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.
53. **3: Expanding the successful reablement service so more people benefit from short term, intensive support.** Southampton has a well-established approach to reablement care, providing short term, tailored and intensive support to maximise independence, which in turn can prevent, defer or reduce the need for a long-term care package.
54. The council's activity is currently not in line with the highest performing authorities for the provision of reablement care, as defined by the Institute of Public Care, Oxford Brookes University and as identified through an independent review of adult social care carried out by the Local Government Association in May 2019. This proposal will use existing policies and processes to increase the number of people who are offered reablement services, and therefore reduce overall need for longer term care packages.
55. The current focus is on providing reablement care to people being discharged from hospital, but this proposal will widen this to ensure that it can be offered to people living at home, who approach the council for support for the first time or when their needs change. People who are identified as being most likely to benefit from reablement care will be prioritised for the expanded service.
56. Currently, approximately 26% of people who could benefit from reablement receive this service (approximately 189 people a year). Over 5 years, this is expected to increase to 70% of people who could benefit (approximately 511 people a year in total, if the overall number of people remains the same).
57. Following reablement, approximately 50% of people do not require a long-term package of care, as the reablement has given them the skills, confidence and ability to live independently without this.
58. This would meet the targets defined by Oxford Brookes University's Institute of Public Care (an academic body that sets standards for the quality of adult social care provision).
59. We have identified the following impacts:
- Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who have home care packages, but this would be a positive impact, as more people would be receiving a service that leads to improved outcomes.
 - Just over 13% of the population in Southampton are aged over 65 (33,508 people) which is lower than the national average of 18.2%.
 - The proposal will widen the scope of offers to be made to include reablement care to people being discharged from hospital and people living in their homes. Under the Care Act people are entitled to request a full assessment at any time.
60. We have identified the following mitigations:
- Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
 - The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.

- Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.
- Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.
- This proposal will provide more options for lower level care needs to be met within the home and community, supporting increased independence in an efficient and cost effective way.

61. Proposals will be in line with the Care Act 2014 and client's needs and wishes (preferences) would continue to be considered as well as kept under review on an ongoing basis.

62. This proposal will support the council to meet best practice guidelines around supporting independence.

63. The proposal will increase the proportion of people being offered reablement (short term, tailored and intensive support to maximise independence), preventing, deferring or reducing the need for a long-term care package. The proposal will also widen the scope of people being offered reablement.

64. 4: Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer. Southampton has a well-established Occupational Therapy (OT) service which currently provides clients with double handed care (the use of two carers) with clients who require manual handling.

65. As part of normal review processes, the council will review whether current care packages are right for clients, and in cases of double handed care, whether that client still requires two carers at once. This may change because of changing need, or the introduction of new equipment and technologies.

66. The proposal is to have Occupational Therapy review all double handed care packages that are being supplied by the council and, where appropriate, reduce this through training and/or the introduction of new equipment, having undertaken appropriate customer, staff and contractor risk assessments.

67. Clients will continue to receive the care and support needed to meet their needs in full. In the future, this may be through one carer using equipment and the latest techniques.

68. We have identified the following impacts:

- Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who receive double handed care packages.
- Some clients who currently receive double handed care and are visited by two carers at a time will see a change in their support package, reducing to one carer. This will only be implemented after a review of individual care packages in line with statutory guidance and having undertaken appropriate H&S risk assessments for staff and contractors to ensure that this reduction can be made safely, and the needs of the client will continue to be met.
- Currently, approximately 200 people are receiving care packages requiring two carers in attendance at once.

- Clients may have new equipment installed in their homes, and this will be done in agreement with the client and/or their representatives, and training and support will be provided.

69. We have identified the following mitigation:

- Clients will continue to have their needs met in full through a safe way of working and this would be kept under regular review.

70. The hoist and sling (MoLift) will be similar in size to the hoist that is currently used for two handed care. The storage and use of the sling will be similar also. The care agency and the family members will need specific training in single handed care and the functions of the hoist. This training will be the responsibility of the prescribing staff member. The care agency will disseminate the training to ensure all carers in attendance are able to use the hoist.

71. This proposal will support the council to meet best practice guidelines around supporting independence.

72. Home care resources will be freed up to support more people in the city (for example, speeding up discharges from hospital, people not having to wait as long for a home care package to start). Clients will be provided with a more tailor-made, personalised level of support in order to provide maximised independence to our clients.

73. 5. Increased availability of housing with care options ('extra care') across the city. Southampton City Council has made a commitment to increase its supply of housing with care (also referred to as 'extra care' housing) in line with local and national agendas. Housing with care refers to specialist housing designed to effectively accommodate people with additional needs, mostly related to old age and disability (e.g. frailty, mobility and cognitive issues), who would normally struggle to live independently in ordinary housing.

74. The proposal is to expand citywide provision of housing with care to support more people in community based settings and to reduce the city's reliance on residential care. This approach links to other key agendas for the city, such as the Southampton City Five Year Health & Care Strategy, The Better Care Plan, and housing and adult social care services around personalised support offer.

75. There are currently five housing with care schemes in the city, jointly providing capacity of around 160 units of adapted accommodation for people with needs. Four of these schemes are owned and managed by SCC, and one scheme by Saxon Weald. To maximise the use of this type of housing to support people with care needs most effectively, the city is developing a further 450 – 500 units of extra care housing over the next eight years. This includes Potter's Court, which will be one of the schemes developed as a part of the wider delivery programme and will produce 84 units of extra care accommodation, due to go live in October 2020.

76. Potter's Court will be available to individuals over the age of 18 who have an assessed care and housing need. However, this is a positive impact – it increases choice of care options for people with needs. Other extra care housing schemes in the city are currently available to older adults (the age depends on the scheme, but is generally aimed at people who are aged 55 and over). Age criteria for new schemes being planned for the city will be determined following an evaluation of the Potter's Court scheme (and the adjacent new supported housing scheme at Kiln Court).

77. A number of individuals accessing Potter's Court will have significant care needs. The referrals will come from community settings as well as from residential care. This strategy will result in significant savings to SCC (care delivery is more cost effective in housing with care), but most importantly, housing with care will provide a better environment for people requiring care.
78. Only people who have been assessed as being suitable for extra care housing will be offered this as an option, based on meeting need and taking account of any preferences expressed by individuals and their families, in accordance with the council's Care and Support Planning Policy and relevant legislation.
79. Overall, the council's strategy to deliver more housing with care accommodation is expected to have a positive impact on people with support needs. This proposal will offer the city's residents suitable accommodation in an independent living setting, while traditionally an alternative for this type of housing would be residential care, which is associated with a loss of independence and an institutional setting.
80. In addition, housing with care plays a preventative function, whereby people who are likely to develop needs are identified early and encouraged to move to extra care to help manage their conditions. Housing with care can act as a direct alternative to institutional (residential and nursing) care, and contribute to the number of options available to people with support needs.
81. **7. The provision of better and earlier advice and information on adult social care and community support etc. to meet Care Act duties on promoting wellbeing and supporting independence.** Information is currently provided to the public on support services available in the city via the Southampton Information Directory (SID).
82. The proposal is to explore alternative web-based advice system and/or improvements to the current SID system for adult social care.
83. This will be kept more regularly updated with advice and information about support available in people's communities that can help to prevent needs arising and help to keep people independent and well.
84. We will also maximise the use of SO:Linked, the new Community Support framework that has been commissioned in Southampton (and is provided by Southampton Voluntary Services) to signpost people to support.
85. Overall this is expected to reduce demand on council delivered support services, through signposting and self-service, and to help prevent problems from escalating.
86. We have identified the following impacts:
- Older people are more likely to be impacted by this proposal, as it is typically older people (aged over 65) who have adult social care needs that can be prevented or deferred through the provision of advice and information.
 - Some clients who currently use the Southampton Information Directory may need to visit an alternative website. This would be supported through clear communications and messaging to alert users to any change.
 - Some users currently access information on support services through intermediaries. For example, they will visit face to face advice centres, ask for

advice from care and support workers, or phone the council or other advice lines. These users will experience no direct impact, as these channels will remain.

87. We have identified the following mitigations:

- Communications will be accessible and tailored.
- The existing council provided Connect Service will remain available to provide telephone and email advice and support and triage clients with the most complex needs for appropriate follow up.
- The use of systems will be monitored in order to identify any safeguarding concerns, which will then be addressed.
- The service will complement existing services in order to meet Care Act requirements to provide early advice and support in order to prevent needs arising.

88. This proposal is anticipated to have an overall positive impact. The Community Network framework will enable more people to access more help and support in the community, with the improved web-based advice service helping more people to find out what support is available.

Age - Children and young people

89. Nearly a quarter of children live in poverty in the city and this figure rises to almost 40% in one of our most deprived wards. Continued economic and social pressures on families, including the impact of welfare reforms, are likely to put increase pressure on support services.

90. The proposal being considered relating to children and young people introduces a Specialist Foster Care scheme in Southampton, children and young people with complex behavioural needs who are currently placed in out of city Residential Settings or Independent Fostering Agency placements.

91. This scheme will only impact a small cohort of around 10 children and young people. These will be children and young people requiring specialist support relating to complex behavioural needs. The proposal does not impact any universal services (services available to the general public) or other cohorts of individuals receiving support such as children with Special Educational Needs or Disabilities (SEND). Any child or young person will be assessed on a case by case basis before a placement is made under this proposal, and any cumulative impacts of local and national policies will be assessed on a case by cases basis. The placement will only be made in the best interest of the child or young person.

92. 8: Fostering: Developing a 'Level 4' Specialist Foster Care scheme in Southampton. The proposal is to develop a Specialist Foster Care scheme in Southampton, by introducing an additional level (level 4) to the fee structure, for those carers able to care for children and young people with complex behavioural needs who are currently placed in out of city Residential Settings or Independent Fostering Agency placements.

93. The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour who would currently be more likely to be placed externally.

94. This enhanced 'Level 4' service will enable Looked After Children (LAC), for whom Southampton City Council hold a corporate parenting responsibility, to be brought back into the city to access specialist in-house foster care services and therefore improve overall outcomes, increasing their chances to be successful. This proposal also allows the service to reduce the dependency on specialist services being purchased outside of the city, where positive outcomes are impacted due to children being geographically dispersed.
95. We have identified the following impacts:
- This proposal will mostly impact children and young people – predominantly the 'older' age group (generally 10-18).
 - The initial capacity of the service would mean that this service will impact around 10 children.
 - The overall impact is anticipated to be positive for these children, by ensuring that the council can deliver a 'wrap-around' and holistic services including therapeutic work and education within the city.
 - Remaining within their communities and familiar settings will be minimise disruption to children when placed in a care setting.
96. We have identified the following mitigations:
- Full assessments will be undertaken to ensure that the placement is safe and suitable for the individual child and meets their needs.
 - If a child is being moved from an out of city residential placement, a full assessment will be undertaken to ensure that the move is positive and will not have negative impacts on the child or young person.
97. This proposal is anticipated to have an overall positive impact for children and young people who are currently or would be placed outside the city, by ensuring that the council can deliver a 'wrap-around' and holistic services including therapeutic work and education within the city.
98. Outcomes for those children and young people are expected to improve, as remaining within their communities and familiar settings will be less disruptive when placed in a care setting. Remaining within the city will also support children's social care practitioners to be continually revisiting opportunities for children to return home to their families at the earliest point.
99. Staff time will be reduced in terms of travelling to visit children if they are within the city boundaries, meaning that workers will be more productive and can achieve better outcomes for our children and young people. Dependency on longer term services can again be minimised by ensuring that children are able to access good quality local education, health support and mental health support in their local area.
100. Improving our 'in house' foster care service will also reduce costs of individual placements (recognising that out of city Residential or IFA placements are generally higher cost), meaning that funds can be used effectively to meet need across the service.

Disability

101. According to the Equality Act 2010, a person has a disability if he or she has a physical or mental impairment which has a long term adverse effect on that person's ability to carry out day to day activities. People living with a disability may feel the impact of

several proposals. Some of the most significant are those relating to accessing services, information and social care. Below is a summary of the main proposals that may impact on people with a physical or mental impairment.

102. The proposals for adult social care are designed to improve the quality of adult social care services and to ensure that the way that the council works gives people living with a disability the best opportunity to live independently.
103. The proposals for the Budget are designed to deliver support more people to live independently. For example, people living with a disability will have improved access to advice and information, which may prevent any social care needs arising in the first place or worsening.
104. If and when an individual does need support, these proposals offer more people "reablement care". This is currently offered to people being discharged from hospital but it would be extended so that others could benefit. Reablement care is offered at no cost to the individual on a short term basis, in a way that is tailored to their needs. People who receive reablement care are more likely to reach their individual goals and to not need ongoing support, but ongoing support would still be available to those who need it. People living with a disability, identified as having lower level needs at any stage (this might be people who are receiving advice and information and those receiving reablement) will be offered options for how these could be met. It is anticipated that more people could benefit from telecare to provide support and reassurance.
105. People living with a disability who currently receive care at home from two carers would receive a review to see whether any equipment could mean that care could safely be given by one carer. People in this situation may have previously been given advice and information or have received reablement care, but these proposals are not expected to result in any negative impacts on people living with a disability.
106. These proposals may impact on some individuals living with a learning disability and their carers who were subject to the previous proposal to close the Kentish Road residential respite unit. This scheme has now reopened and the current proposals are not considered to impact on their continuing use of the scheme or alternative respite care provision. All respite placements are carefully considered following a full assessment of an individual's needs and taking into account individual preferences. These safeguards will continue to form a crucial part of the council's approach to mitigating any negative impacts on individuals that may have been unforeseen.
107. The Budget decision taken in February 2019 to increase the amount some people have to pay towards their non-residential care (home care) means that some people may face financial hardship if they are required to make a further contribution towards the cost of telecare, hot meal delivery or any other chargeable service provided in addition to home care. There is a mechanism in place to mitigate any negative impact of these by taking into account essential expenditure incurred because of a person's disability as part of their financial assessment (for example, the cost of telecare and other services would not be taken into account as income, which means that the person would not be worse off because of having to pay for this).
108. Adult social care decisions are undertaken in the best interest of the individual taking personal circumstances into account, and cumulative impacts will be considered on a case by case basis where appropriate.

109. **1: Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital.** Southampton City Council is proposing to increase the level of support to help more people to return home after a short stay in residential care following discharge from hospital.
110. Some people need to spend a period of time in residential care after being discharged from hospital and before they can return home. This proposal will use existing policies and processes to ensure that the right support is available to help more people regain their independence and move home from these short term placements more quickly. This will involve an assessment being carried out more quickly by a social work practitioner after the individual has been discharged from hospital into residential or nursing care. This will help to make sure that suitable care arrangements are put in place as quickly as possible to support someone to return home in line with their and their family's wishes, before there is any deterioration in the individual's ability to return home. This might involve the provision of home care, reablement care and therapy, adaptations, the use of telecare and other community support.
111. We will increase the proportion of people who return home after a short-term period in a residential care bed following discharge from hospital, in line with national best practice benchmarks.
112. Individuals will only be return home where it is safe and reasonable to do so, and with appropriately assessed care and carers packages in place in line with statutory requirements and guidance. If residential or nursing care was subsequently required, this would be arranged from home in a planned way and in the person's best interests. Any assessments would be undertaken in consultation with those affected.
113. We have identified the following impacts:
- People living with a disability are more likely to be impacted by this proposal, as it is typically people with disabilities or impairments who are discharged from hospital into short stay residential care who then go on to become a permanent resident.
 - The primary impact of this proposal will be that individuals needing a short time in residential care between hospital discharge and returning home, spend less time in that residential setting overall.
 - Last year, 14 people were discharged in to a residential care home from hospital. 5 returned home after a short stay and 9 became permanent residents. If this proposal is adopted and there were 14 people discharged in similar circumstances, this proposal would mean that 12 would be supported to return home after a short stay and 2 would become permanent residents.
 - Some people or their families might prefer them to become permanent residents rather than being supported to return home and to make the decision from there. These preferences will be considered in line with the Care Act 2014.
114. We have identified the following mitigations:
- Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
 - The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.

- Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.
- 'Discharge to assess' models will be kept under review to make sure they are working as intended so that (i) short-term admissions to care homes do not end up becoming long-term placements. For example, persuading someone to enter short-term care that is really long-term care because there are no therapies or reablement is wrong in human, consumer and financial terms and ties up budgets; (ii) premature or inappropriate discharge arrangements do not result in readmission to hospital.
- Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.

115. Southampton City Council's driving principle in our approach to supporting people to return home is that individuals are offered the right care, in the right place, at the right time. Best practice guidance states that no one should be admitted directly to long-term care from hospital unless in very exceptional circumstances e.g. for end-of-life care where this is not possible at home. The default pathway should be discharge home, with the right support; reablement (tailored support to maximise a person's capabilities and confidence) should always be considered. This proposal will positively support this approach.

116. This proposal would improve the situation for people living with a disability as a timely review and the right support would enable them to return home, rather than become permanent residential care residents.

117. For all groups, this proposal will support more people to return to living within their own homes more quickly, with the right care and support in place to enable them to do so.

118. This proposal will also help ensure that Southampton City Council meets best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.

119. **2: Making best use of the full range of services that are currently available to support people to live independently in a community setting.** Southampton City Council provides support to customers through telecare and other home based community support such as meals on wheels. This allows customers to receive support quickly and efficiently when they need it within their own homes, and making sure that it is the most appropriate help for their needs, whilst promoting their independence. In order to provide the most cost effective service that is able to support customers in the best way possible, it has been proposed to meet lower level needs through increased use of telecare and community support.

120. The proposal is to bring the Southampton City Council's activity in line with recommendations on the provision of small home care packages made by the Institute of Public Care, Oxford Brookes University.

121. The needs of approximately 400 clients with lower level needs are currently met through home care packages provided by a care agency. Over 5 years, this is expected to reduce to about 100 clients, with more clients being better supported to live independently through improved access to support provided by the voluntary sector (for example through the recently launched SO:Linked project which includes a

community navigation service to link people with support available in the city and their communities); the use of telecare (for example, through the provision of a medication dispenser and an alarm unit); through the delivery of hot meals (for example, from City Catering) or by identifying additional community support by using an online community resource directory.

122. This proposal is about applying a 'strengths-based' approach as the council carries out social care assessments for new clients, which mirrors the approach proposed for existing clients as their packages of care are reviewed. New clients will be offered alternatives to meet their needs, in accordance with the council's existing policy.

123. The provision of telecare, hot meal delivery, support from friends, neighbours and community groups and other 'strengths-based' approaches would be considered as part of a Care Act individual needs assessment, before a homecare package was approved.

124. We have identified the following impacts:

- People living with a disability will be impacted by this proposal, as it is disabled people who have home care packages to meet lower level needs.
- Some individuals or their families might prefer to have a homecare package than the alternative offered or agreed to meet their needs. These preferences would be considered under the Care Act 2014.

125. We have identified the following mitigations:

- Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
- The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.
- Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.
- Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.

126. As well as supporting greater levels of independence, this proposal is expected to deliver savings to the home care budget, as it is more cost effective to provide support by developing and supporting community networks, telecare and hot meal delivery than paying agencies to provide home care. This is expected to have the added benefit of preventing needs arising and delaying needs becoming more complex, and the home care capacity freed up can be used to support people for whom community support would not be suitable or sufficient.

127. Across all groups, this proposal will provide more options for lower level care needs to be met within the home and community, supporting increased independence in an efficient and cost effective way.

128. This proposal will also support the council to meet best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.

129. **3: Expanding the successful reablement service so more people benefit from short term, intensive support.** Southampton has a well-established approach to reablement care, providing short term, tailored and intensive support to maximise independence, which in turn can prevent, defer or reduce the need for a long-term care package.
130. The council's activity is currently not in line with the highest performing authorities for the provision of reablement care, as defined by the Institute of Public Care, Oxford Brookes University and as identified through an independent review of adult social care carried out by the Local Government Association in May 2019. This proposal will use existing policies and processes to increase the number of people who are offered reablement services, and therefore reduce overall need for longer term care packages.
131. The current focus is on providing reablement care to people being discharged from hospital, but this proposal will widen this to ensure that it can be offered to people living at home, who approach the council for support for the first time or when their needs change. People who are identified as being most likely to benefit from reablement care will be prioritised for the expanded service.
132. Currently, approximately 26% of people who could benefit from reablement receive this service (approximately 189 people a year). Over 5 years, this is expected to increase to 70% of people who could benefit (approximately 511 people a year in total, if the overall number of people remains the same).
133. Following reablement, approximately 50% of people do not require a long-term package of care, as the reablement has given them the skills, confidence and ability to live independently without this.
134. This would meet the targets defined by Oxford Brookes University's Institute of Public Care (an academic body that sets standards for the quality of adult social care provision).
135. We have identified the following impacts:
- People living with a disability are more likely to be impacted by this proposal, as it is typically people living with a disability who have home care packages but this would be a positive impact, as more people would be receiving a service that leads to improved outcomes.
 - The proposal will widen the scope of offers to be made to include reablement care to people being discharged from hospital and people living in their homes. Under the Care Act people are entitled to request a full assessment at any time.
136. We have identified the following mitigations:
- Robust application of Care Act Principles: assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
 - The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals.
 - Assessments will be carried out swiftly on discharge from hospital to enable the right support to be put in place to facilitate a safe return home for the individual.
 - Care planning and communication with individuals and families will involve providing clear information about care options, including cost (now and in the future) implications for individual charges of any changes or transfers in care settings.

- This proposal will provide more options for lower level care needs to be met within the home and community, supporting increased independence in an efficient and cost effective way.

137. Proposals will be in line with the Care Act 2014 and client's needs and wishes (preferences) would continue to be considered as well as kept under review on an ongoing basis.

138. This proposal will support the council to meet best practice guidelines around supporting independence.

139. The proposal will increase the proportion of people being offered reablement (short term, tailored and intensive support to maximise independence), preventing, deferring or reducing the need for a long-term care package. The proposal will also widen the scope of people being offered reablement.

140. **4: Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer.** Southampton has a well-established Occupational Therapy (OT) service which currently provides clients with double handed care (the use of two carers) with clients who require manual handling.

141. As part of normal review processes, the council will review whether current care packages are right for clients, and in cases of double handed care, whether that client still requires two carers at once. This may change because of changing need, or the introduction of new equipment and technologies.

142. The proposal is to have Occupational Therapy review all double handed care packages that are being supplied by the council and, where appropriate, reduce this through training and/or the introduction of new equipment, having undertaken appropriate customer, staff and contractor risk assessments.

143. Clients will continue to receive the care and support needed to meet their needs in full. In the future, this may be through one carer using equipment and the latest techniques.

144. We have identified the following impacts:

- People living with a disability people are more likely to be impacted by this proposal, as it is typically disabled people who receive double up care packages.
- Some clients who currently receive double handed care and are visited by two carers at a time will see a change in their support package, reducing to one carer. This will only be implemented after a review of individual care packages in line with statutory guidance and having undertaken appropriate H&S risk assessments for staff and contractors to ensure that this reduction can be made safely, and the needs of the client will continue to be met.
- Currently, approximately 200 people are receiving care packages requiring two carers in attendance at once.
- Clients may have new equipment installed in their homes, and this will be done in agreement with the client and/or their representatives, and training and support will be provided.

145. We have identified the following mitigation:

- Clients will continue to have their needs met in full through a safe way of working and this would be kept under regular review.

146. The hoist and sling (MoLift) will be similar in size to the hoist that is currently used for two handed care. The storage and use of the sling will be similar also. The care agency and the family members will need specific training in single handed care and the functions of the hoist. This training will be the responsibility of the prescribing staff member. The care agency will disseminate the training to ensure all carers in attendance are able to use the hoist.
147. This proposal will support the council to meet best practice guidelines around supporting independence.
148. Home care resources will be freed up to support more people in the city (for example, speeding up discharges from hospital, people not having to wait as long for a home care package to start). Clients will be provided with a more tailor-made, personalised level of support in order to provide maximised independence to our clients.
149. **5. Increased availability of housing with care options ('extra care') across the city.** Southampton City Council has made a commitment to increase its supply of housing with care (also referred to as 'extra care' housing) in line with local and national agendas. Housing with care refers to specialist housing designed to effectively accommodate people with additional needs, mostly related to old age and disability (e.g. frailty, mobility and cognitive issues), who would normally struggle to live independently in ordinary housing.
150. The proposal is to expand citywide provision of housing with care to support more people in community based settings and to reduce the city's reliance on residential care. This approach links to other key agendas for the city, such as the Southampton City Five Year Health & Care Strategy, The Better Care Plan, and housing and adult social care services around personalised support offer.
151. There are currently five housing with care schemes in the city, jointly providing capacity of around 160 units of adapted accommodation for people with needs. Four of these schemes are owned and managed by SCC, and one scheme by Saxon Weald. To maximise the use of this type of housing to support people with care needs most effectively, the city is developing a further 450 – 500 units of extra care housing over the next eight years. This includes Potter's Court, which will be one of the schemes developed as a part of the wider delivery programme and will produce 84 units of extra care accommodation, due to go live in October 2020.
152. Potter's Court will be purpose-built to meet the needs of disabled people. This can include people with Mental Health, Learning Disabilities and physical disabilities. It will have appropriate support and care on site to cater to needs effectively.
153. Other extra care housing schemes in the city are also purpose-built or adapted to meet the needs of disabled people and have appropriate care and support on site. The design of future schemes will take into account an evaluation of the scheme at Potter's Court when it opens in 2020.
154. A number of individuals accessing Potter's Court will have significant care needs. The referrals will come from community settings as well as from residential care. This strategy will result in significant savings to SCC (care delivery is more cost effective in housing with care), but most importantly, housing with care will provide a better environment for people requiring care.

155. Only people who have been assessed as being suitable for extra care housing will be offered this as an option, based on meeting need and taking account of any preferences expressed by individuals and their families, in accordance with the council's Care and Support Planning Policy and relevant legislation.
156. Overall, the council's strategy to deliver more housing with care accommodation is expected to have a positive impact on people with support needs. This proposal will offer the city's residents suitable accommodation in an independent living setting, while traditionally an alternative for this type of housing would be residential care, which is associated with a loss of independence and an institutional setting.
157. In addition, housing with care plays a preventative function, whereby people who are likely to develop needs are identified early and encouraged to move to extra care to help manage their conditions. Housing with care can act as a direct alternative to institutional (residential and nursing) care, and contribute to the number of options available to people with support needs.
158. **6. Ensuring direct payments are being used in accordance with care and support plans to meet care needs.** Southampton City Council currently pays Direct Payments to 326 Adult Social Care clients. The council is responsible for auditing payments and accounts to ensure that funds are spending in line with agreed care plans.
159. The proposal is to review and audit direct payments to ensure the funds are being used in accordance with the care and support plan in line with council policies.
160. Audit activity in 2019/20 identified that 16% of funds paid into the accounts audited was potentially misspent. Therefore, the proposal is to ensure more rigorous audit activity is undertaken to identify any funds that have been potentially misspent, or remain unused (overpayments). Where appropriate, the council will seek to recover these funds.
161. We have identified the following impacts:
- People living with a disability are more likely to be affected by the proposal as this group tend to receive direct payments and therefore are more likely to be impacted by this proposal, as it is typically disabled people who receive direct payments.
 - Clients will continue to have their needs met in full through a safe way of working and this would be kept under regular review.
 - Clients will continue to receive the care and support needed to meet their needs in full.
 - The use of direct payments will be subject to more regular checks (in accordance with the council's current policy) to make sure that additional support is not needed and that the payment is being used to meet identified care needs. This means that some clients may be required to provide evidence relating to their spend in line with policies and Direct Payment agreements, when this may not previously have been routinely requested.
 - Where overpayments or misused funds are identified, the council may seek to recover these funds.
162. We have identified the following mitigation:
- Clients will continue to have their needs met in full; timely reviews would be offered along with support and advice.

163. This proposal will support the council to meet best practice guidelines around direct payments. More frequent audits will ensure that clients do not accrue large balances, and overpayments are identified quickly. The direct payment process will be more streamlined, encouraging more people to take these up, to have greater control of their personalised care.
164. **7. The provision of better and earlier advice and information on adult social care and community support etc. to meet Care Act duties on promoting wellbeing and supporting independence.** Information is currently provided to the public on support services available in the city via the Southampton Information Directory (SID).
165. The proposal is to explore alternative web-based advice system and/or improvements to the current SID system for adult social care.
166. This will be kept more regularly updated with advice and information about support available in people's communities that can help to prevent needs arising and help to keep people independent and well.
167. We will also maximise the use of SO:Linked, the new Community Support framework that has been commissioned in Southampton (and is provided by Southampton Voluntary Services) to signpost people to support.
168. Overall this is expected to reduce demand on council delivered support services, through signposting and self-service, and to help prevent problems from escalating.
169. We have identified the following impacts:
- People living with a disability are more likely to be impacted by this proposal, as it is typically disabled people who have adult social care needs that can be prevented or deferred through the provision of advice and information.
 - Some clients who currently use the Southampton Information Directory may need to visit an alternative website. This would be supported through clear communications and messaging to alert users to any change.
 - Some users currently access information on support services through intermediaries. For example, they will visit face to face advice centres, ask for advice from care and support workers, or phone the council or other advice lines. These users will experience no direct impact, as these channels will remain.
170. We have identified the following mitigations:
- Communications will be accessible and tailored.
 - The existing council provided Connect Service will remain available to provide telephone and email advice and support and triage clients with the most complex needs for appropriate follow up.
 - The use of systems will be monitored in order to identify any safeguarding concerns, which will then be addressed.
 - The service will complement existing services in order to meet Care Act requirements to provide early advice and support in order to prevent needs arising.
171. This proposal is anticipated to have an overall positive impact. The Community Network framework will enable more people to access more help and support in the community, with the improved web-based advice service helping more people to find out what support is available.

- 172. 8: Fostering: Developing a ‘Level 4’ Specialist Foster Care scheme in Southampton.** The proposal is to develop a Specialist Foster Care scheme in Southampton, by introducing an additional level (level 4) to the fee structure, for those carers able to care for children and young people with complex behavioural needs who are currently placed in out of city Residential Settings or Independent Fostering Agency placements.
173. The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour who would currently be more likely to be placed externally.
174. This enhanced ‘Level 4’ service will enable Looked After Children (LAC), for whom Southampton City Council hold a corporate parenting responsibility, to be brought back into the city to access specialist in-house foster care services and therefore improve overall outcomes, increasing their chances to be successful. This proposal also allows the service to reduce the dependency on specialist services being purchased outside of the city, where positive outcomes are impacted due to children being geographically dispersed.
175. We have identified the following impacts:
- The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour.
 - Children and young people with complex behavioural needs may also be living with a disability, including learning disabilities and mental health needs.
176. We have identified the following mitigations:
- Any child or young person being placed in a foster care setting will have their needs assessed, and the placement will only be agreed where it is safe and suitable and meets the needs of the individual child.
 - Where the child or young person is living with a disability they will be supported under the council’s SEND service and provided with support in line with the Education Health and Care Plan (EHCP).
 - This proposal will affect around 10 children and young people who are currently placed outside the city in Residential Care settings, and new children who are being placed in a care setting who might previously have been placed outside the city in a Residential Care setting or with an Independent Fostering Agency (IFA) placement.
 - Where a child or young person is already in a placement outside the city and consideration is given to a move into a new placement within the ‘Level 4’ service in Southampton, a full assessment will be undertaken to ensure that the move is positive and will not have negative impacts on the child or young person.
 - This proposal will also affect foster carers within the city who opt to take part in the ‘Level 4’ service. These carers will be given support and training before a child or young person with more complex behavioural needs is placed with them, and throughout the placement. Placements will only be made where it is deemed safe and suitable for both the child/young person and the carer. The ‘Level 4’ enhanced fee is reflective of the additional skills and experience required to support these placements.
177. This proposal is anticipated to have an overall positive impact for children and young people who are currently or would be placed outside the city, by ensuring that the council can deliver a ‘wrap-around’ and holistic services including therapeutic work and education within the city.

178. Outcomes for those children and young people are expected to improve, as remaining within their communities and familiar settings will be less disruptive when placed in a care setting. Remaining within the city will also support children's social care practitioners to be continually revisiting opportunities for children to return home to their families at the earliest point.
179. Staff time will be reduced in terms of travelling to visit children if they are within the city boundaries, meaning that workers will be more productive and can achieve better outcomes for our children and young people. Dependency on longer term services can again be minimised by ensuring that children are able to access good quality local education, health support and mental health support in their local area.
180. Improving our 'in house' foster care service will also reduce costs of individual placements (recognising that out of city Residential or IFA placements are generally higher cost), meaning that funds can be used effectively to meet need across the service.

Marriage and Civil Partnership

- 181. 1: Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital.** Southampton City Council is proposing to increase the level of support to help more people to return home after a short stay in residential care following discharge from hospital.
182. Some people need to spend a period of time in residential care after being discharged from hospital and before they can return home. This proposal will use existing policies and processes to ensure that the right support is available to help more people regain their independence and move home from these short term placements more quickly. This will involve an assessment being carried out more quickly by a social work practitioner after the individual has been discharged from hospital into residential or nursing care. This will help to make sure that suitable care arrangements are put in place as quickly as possible to support someone to return home in line with their and their family's wishes, before there is any deterioration in the individual's ability to return home. This might involve the provision of home care, reablement care and therapy, adaptations, the use of telecare and other community support.
183. We will increase the proportion of people who return home after a short-term period in a residential care bed following discharge from hospital, in line with national best practice benchmarks.
184. Individuals will only be return home where it is safe and reasonable to do so, and with appropriately assessed care and carers packages in place in line with statutory requirements and guidance. If residential or nursing care was subsequently required, this would be arranged from home in a planned way and in the person's best interests. Any assessments would be undertaken in consultation with those affected.
185. We have identified the following impact:
- Potential impact of additional caring responsibilities for some spouses/partners.
186. We have identified the following mitigations:

- Any individual who is returning home from a short term stay in residential care will be subject to an assessment, in line with the Care Act, to ensure their needs are met. Where these needs are to be met fully or partially by a carer (including a spouse or partner) rather than a care worker, a carers' assessment will also be undertaken in line with the Care Act.
- Individuals will only move home where it safe and in the best interests of that individual to do so.

187. There is also a potential positive impact on marriage/civil partnership, as more people would be supported to live at home, rather than away from their spouse or partner.

Community Safety

188. **5. Increased availability of housing with care options ('extra care') across the city.** Southampton City Council has made a commitment to increase its supply of housing with care (also referred to as 'extra care' housing) in line with local and national agendas. Housing with care refers to specialist housing designed to effectively accommodate people with additional needs, mostly related to old age and disability (e.g. frailty, mobility and cognitive issues), who would normally struggle to live independently in ordinary housing.

189. The proposal is to expand citywide provision of housing with care to support more people in community based settings and to reduce the city's reliance on residential care. This approach links to other key agendas for the city, such as the Southampton City Five Year Health & Care Strategy, The Better Care Plan, and housing and adult social care services around personalised support offer.

190. Some of the key features of housing with care that enable it to support a wide range of individuals with needs include; purpose built environment (preventing falls and increasing accessibility), 24/7 care, communal restaurant and wellbeing facilities, as well as emergency cover. The development of extra care schemes benefits the community as the facilities are available to the nearby community that can access the support and facilities available on site, enabling and deepening community interactions. It also produces similar regeneration benefits to other housing developments.

191. Interaction between residents and the wider community is encouraged in existing schemes and this will continue with Potter's Court and new schemes, for example by opening up the restaurant and other facilities (hairdresser, wellbeing, community room etc.).

192. Accommodation access will be by key fobs and staff will support with the day to day management of the scheme and promote safety among residents.

193. **8: Fostering: Developing a 'Level 4' Specialist Foster Care scheme in Southampton.** The proposal is to develop a Specialist Foster Care scheme in Southampton, by introducing an additional level (level 4) to the fee structure, for those carers able to care for children and young people with complex behavioural needs who are currently placed in out of city Residential Settings or Independent Fostering Agency placements.

194. The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour who would currently be more likely to be placed externally.
195. This enhanced 'Level 4' service will enable Looked After Children (LAC), for whom Southampton City Council hold a corporate parenting responsibility, to be brought back into the city to access specialist in-house foster care services and therefore improve overall outcomes, increasing their chances to be successful. This proposal also allows the service to reduce the dependency on specialist services being purchased outside of the city, where positive outcomes are impacted due to children being geographically dispersed.
196. The specialist scheme will offer placements to those with the highest level of need, particularly older children exhibiting challenging and/or risky behaviour within Southampton. Whilst the overall impact of remaining in the city is considered to be positive, there is a risk of negative impact on community safety. If antisocial behaviour persists within the placement this could have an impact on residents in the area. Furthermore, remaining within a locality could encourage a child or young person to persist in anti-social behaviours where this is linked to a social group or other local influences.
197. This proposal will relate to a small cohort of children and young people (around 10). Each placement will be subject to assessment, which, on a case by case basis, will consider the impacts of the location of placement in order to take into account any individual circumstances and minimise risk for the young person, carers, and community. Ongoing assessment will be in place alongside wraparound support to address any behavioural needs.

Poverty

198. **2. Making best use of the full range of services that are currently available to support people to live independently in a community setting.** Southampton City Council provides support to customers through telecare and other home based community support such as meals on wheels. This allows customers to receive support quickly and efficiently when they need it within their own homes, and making sure that it is the most appropriate help for their needs, whilst promoting their independence. In order to provide the most cost effective service that is able to support customers in the best way possible, it has been proposed to meet lower level needs through increased use of telecare and community support.
199. The proposal is to bring the Southampton City Council's activity in line with recommendations on the provision of small home care packages made by the Institute of Public Care, Oxford Brookes University.
200. We have identified the following impact:
- Some alternative support arrangements such as telecare, hot meal delivery or community groups etc may have associated costs which may be passed on to the client. These costs are likely to be lower than the client contribution to any home care support package that might be required should these types of alternative support not be put in place.
201. We have identified the following mitigations:

- Any adverse impacts would be kept under review on an individual basis. Special arrangements would be made in the unusual situation of a client being unable to afford telecare or hot meal delivery, for example.

202. This proposal will provide more options for lower level care needs to be met within the home and community, supporting increased independence in an efficient and cost effective way.

203. The proposal will support the council to meet best practice guidelines around supporting independence and decision making regarding an individual's care and support arrangements.

204. **5. Increased availability of housing with care options ('extra care') across the city.** Southampton City Council has made a commitment to increase its supply of housing with care (also referred to as 'extra care' housing) in line with local and national agendas. Housing with care refers to specialist housing designed to effectively accommodate people with additional needs, mostly related to old age and disability (e.g. frailty, mobility and cognitive issues), who would normally struggle to live independently in ordinary housing.

205. The proposal is to expand citywide provision of housing with care to support more people in community based settings and to reduce the city's reliance on residential care. This approach links to other key agendas for the city, such as the Southampton City Five Year Health & Care Strategy, The Better Care Plan, and housing and adult social care services around personalised support offer.

206. Individual financial circumstances will be taken into account when assessing care need.

207. **6. Ensuring direct payments are being used in accordance with care and support plans to meet care needs.** Southampton City Council currently pays Direct Payments to 326 Adult Social Care clients. The proposal is to review and audit direct payments to ensure the funds are being used in accordance with the care and support plan in line with council policies.

208. Audit activity in 2019/20 identified that 16% of funds paid into the accounts audited was potentially misspent. Therefore, the proposal is to ensure more rigorous audit activity is undertaken to identify any funds that have been potentially misspent, or remain unused (overpayments). Where appropriate, the council will seek to recover these funds.

209. We have identified the following impacts:

- Of the 326 Local Authorities in England, Southampton is ranked 54th (previously 72nd) most deprived.
- This proposal will make it more difficult for a direct payment to be used for any other purpose than meeting an individual's assessed unmet care and support needs. This may impact negatively on their finances overall.
- Clients will continue to receive the care and support needed to meet their needs in full.
- The use of direct payments will be subject to more regular checks (in accordance with the council's current policy) to make sure that additional support is not needed and that the payment is being used to meet identified care needs. This means that some clients may be required to provide evidence relating to their

spend in line with policies and Direct Payment agreements, when this may not previously have been routinely requested.

- Where overpayments or misused funds are identified, the council may seek to recover these funds.

210. We have identified the following mitigations:

- People will be signposted to benefit and debt advice as part of the financial assessment for social care (as appropriate).
- A repayment plan for any payments that have to be repaid will be agreed, having regard to individual circumstances.

211. This proposal will support the council to meet best practice guidelines around direct payments. More frequent audits will ensure that clients do not accrue large balances, and overpayments are identified quickly. The direct payment process will be more streamlined, encouraging more people to take these up, to have greater control of their personalised care.

212. **7. The provision of better and earlier advice and information on adult social care and community support etc. to meet Care Act duties on promoting wellbeing and supporting independence.** Information is currently provided to the public on support services available in the city via the Southampton Information Directory (SID).

213. The proposal is to explore alternative web-based advice system and/or improvements to the current SID system for adult social care.

214. This will be kept more regularly updated with advice and information about support available in people's communities that can help to prevent needs arising and help to keep people independent and well.

215. We will also maximise the use of SO:Linked, the new Community Support framework that has been commissioned in Southampton (and is provided by Southampton Voluntary Services) to signpost people to support.

216. Overall this is expected to reduce demand on council delivered support services, through signposting and self-service, and to help prevent problems from escalating.

217. We have identified the following impact:

- In some cases, accessing support via the internet can have associated costs (access to a computer or data costs).

218. We have identified the following mitigations:

- The council will continue to ensure that residents can access online services for free in libraries and other community and partner venues, to ensure that they do not need own personal devices or data to access online services.
- Access to alternative channels for information will not be impacted by this proposal.

219. This proposal is anticipated to have an overall positive impact. The Community Network framework will enable more people to access more help and support in the community, with the 'Connect to Support Hampshire' helping more people to find out what support is available.

Health and Wellbeing:

220. The following proposals in the Adult Social Care portfolio directly impact the health and wellbeing of clients/service users:

- 1. Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital.
- 2. Making best use of the full range of services that are currently available to support people to live independently in a community setting.
- 3. Expanding the successful reablement service so more people benefit from short term, intensive support.
- 4. Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer
- 5. Increased availability of housing with care options ('extra care') across the city.

221. Overall these proposals are anticipated to have a positive impact on the health and wellbeing of clients. The proposals all focus on promoting greater independence so that people can remain in or return to their own homes, and ensuring that they have the right support in place to do so.

222. 1: Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital. Southampton City Council is proposing to increase the level of support to help more people to return home after a short stay in residential care following discharge from hospital.

223. Some people need to spend a period of time in residential care after being discharged from hospital and before they can return home. This proposal will use existing policies and processes to ensure that the right support is available to help more people regain their independence and move home from these short term placements more quickly. This will involve an assessment being carried out more quickly by a social work practitioner after the individual has been discharged from hospital into residential or nursing care. This will help to make sure that suitable care arrangements are put in place as quickly as possible to support someone to return home in line with their and their family's wishes, before there is any deterioration in the individual's ability to return home. This might involve the provision of home care, reablement care and therapy, adaptations, the use of telecare and other community support.

224. We will increase the proportion of people who return home after a short-term period in a residential care bed following discharge from hospital, in line with national best practice benchmarks.

225. Individuals will only be return home where it is safe and reasonable to do so, and with appropriately assessed care and carers packages in place in line with statutory requirements and guidance. If residential or nursing care was subsequently required, this would be arranged from home in a planned way and in the person's best interests. Any assessments would be undertaken in consultation with those affected.

226. No negative impacts have been identified in relation to health and wellbeing, but on a case by case basis, any adverse impacts would in any case be mitigated through the robust application of Care Act Principles.

227. 2: Making best use of the full range of services that are currently available to support people to live independently in a community setting. Southampton City

Council provides support to customers through telecare and other home based community support such as meals on wheels. This allows customers to receive support quickly and efficiently when they need it within their own homes, and making sure that it is the most appropriate help for their needs, whilst promoting their independence. In order to provide the most cost effective service that is able to support customers in the best way possible, it has been proposed to meet lower level needs through increased use of telecare and community support.

228. The proposal is to bring the Southampton City Council's activity in line with recommendations on the provision of small home care packages made by the Institute of Public Care, Oxford Brookes University.
229. No negative impacts have been identified in relation to health and wellbeing, but on a case by case basis, any adverse impacts would in any case be mitigated through the robust application of Care Act Principles.
230. **3: Expanding the successful reablement service so more people benefit from short term, intensive support.** Southampton has a well-established approach to reablement care, providing short term, tailored and intensive support to maximise independence, which in turn can prevent, defer or reduce the need for a long-term care package.
231. The council's activity is currently not in line with the highest performing authorities for the provision of reablement care, as defined by the Institute of Public Care, Oxford Brookes University and as identified through an independent review of adult social care carried out by the Local Government Association in May 2019. This proposal will use existing policies and processes to increase the number of people who are offered reablement services, and therefore reduce overall need for longer term care packages.
232. The current focus is on providing reablement care to people being discharged from hospital, but this proposal will widen this to ensure that it can be offered to people living at home, who approach the council for support for the first time or when their needs change. People who are identified as being most likely to benefit from reablement care will be prioritised for the expanded service.
233. The health and wellbeing of an individual will be taken into account when deciding on the most appropriate care and support package during and after the implementation of this proposal and any adverse impacts would in any case be mitigated through the robust application of Care Act Principles.
234. **4: Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer.** Southampton has a well-established Occupational Therapy (OT) service which currently provides clients with double handed care (the use of two carers) with clients who require manual handling.
235. As part of normal review processes, the council will review whether current care packages are right for clients, and in cases of double handed care, whether that client still requires two carers at once. This may change because of changing need, or the introduction of new equipment and technologies.
236. The proposal is to have Occupational Therapy review all double handed care packages that are being supplied by the council and, where appropriate, reduce this through training and/or the introduction of new equipment.

237. The health and wellbeing of an individual will be taken into account when deciding on the most appropriate care and support package during and after the implementation of this proposal and any adverse impacts would be mitigated on a case by case basis through the robust application of Care Act Principles.
238. Assessments and reviews will be needs-driven, and the requirements of statutory guidance in respect of choice, access to advocacy where needed and the involvement of carers.
239. The Mental Capacity Act will be used where appropriate to protect the needs and rights of the individuals. Timely assessments and reviews would be carried out.
240. **5. Increased availability of housing with care options ('extra care') across the city.** Southampton City Council has made a commitment to increase its supply of housing with care (also referred to as 'extra care' housing) in line with local and national agendas. Housing with care refers to specialist housing designed to effectively accommodate people with additional needs, mostly related to old age and disability (e.g. frailty, mobility and cognitive issues), who would normally struggle to live independently in ordinary housing.
241. The proposal is to expand citywide provision of housing with care to support more people in community based settings and to reduce the city's reliance on residential care. This approach links to other key agendas for the city, such as the Southampton City Five Year Health & Care Strategy, The Better Care Plan, and housing and adult social care services around personalised support offer.
242. No negative impacts have been identified in relation to health and wellbeing. Positive impacts are anticipated as extra care delivers support to enable people to sustain their independence in a community setting.

Other Significant Impacts

243. **4: Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer.** Southampton has a well-established Occupational Therapy (OT) service which currently provides clients with double handed care (the use of two carers) with clients who require manual handling.
244. Potential impacts on SCC staff and contractors have been considered. No significant impacts on staff working within the care sector is anticipated.
245. SCC staff do not currently deliver home care visits. There is no anticipated reduction in availability of work anticipated for contracted suppliers of these services, as there is currently a shortfall in carers within the city resulting in greater demand than availability of carers. Some care workers may change their visit patterns if some clients move from double to single person requirements, but this is part of normal business and will be part of staff contracts.

Other Protected Characteristics

246. We have identified no direct impacts for the following:
- Gender reassignment

- Pregnancy and maternity
- Race – ethnic or national origins, colour or nationality
- Religion or Belief – including lack of belief
- Sex
- Sexual orientation.

Public Consultation

247. A programme of consultation will be undertaken between the between 15 October 2019 and 8 January 2020. Public consultation will be undertaken with any people or organisations affected by the proposals to ensure all options have been considered, as well as with residents at a wider level. Southampton City Council is in a challenging financial position with significant reductions in its funding from central government, at a time when demand for certain services such as adult and children’s social care continues to increase. Therefore the aim of this consultation is to:

- Communicate clearly and make residents aware of the financial pressures the council is facing
- Ensure residents understand what is being proposed in the draft 2020/21 budget and are aware of what this will mean for them
- Enable any resident, business or stakeholder who wishes to comment on the proposals the opportunity to do so, allowing them to raise any impacts the proposals may have
- Ensure that the results are analysed in a meaningful, timely fashion, so that feedback is taken into account when final decisions are made
- Provide feedback on the results to the consultation and how these results have influenced the final decision.

248. Every effort will be made to ensure consultation is:

- Inclusive: so that everyone in the city has the opportunity to express their views.
- Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impacts, particularly the equality and safety impacts.
- Understandable: by ensuring that the language we use to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
- Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.
- Meaningful: by ensuring decision makers have the full consultation feedback information so they can make informed decisions.
- Reported: by letting consultees know what we have done with their feedback.

249. The consultation will be based around an online questionnaire and paper copies will also be made available.

250. This Cumulative Impact Assessment will be updated and developed based on the final proposals and detail of individual ESIAs. It will also be informed by the feedback from residents and stakeholders as part of the public budget consultation.

APPENDIX 1

Table 2: Cumulative Impacts of Budget agreed February 2019 (including years 2019/20 and 2020/2021) and Budget Proposals October 2019 (year 2020/21)

	Code	Description of Proposal	Age	Disability	Gender Reassignment	Marriage & Civil Partnership	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Community Safety	Poverty	Health & Wellbeing	Other	
Children and young people get a good start in life																
Page 76 Feb 2019 Budget (2019/20 & 2020/21)	CYP1	Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council	*	*									*	*		
	CYP2	Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service	*	*			*						*	*		
	CYP3	Review the Contact Service which facilitates contact for Looked After Children with their birth families, with a view to this being delivered by a partner organisation	*	*												
	CYP4	Reduce the funding provided to Compass School Pupil Referral Unit from 160 to 100, in line with actual demand	*	*												
	CYP6	Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision	*	*				*						*	*	

	Code	Description of Proposal	Age	Disability	Gender Reassignment	Marriage & Civil Partnership	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Community Safety	Poverty	Health & Wellbeing	Other	
Oct 2019 (2020/21)	8	Developing a 'Level 4' Specialist Foster Care scheme in Southampton	*	*								*				
People in Southampton live safe, healthy, independent lives																
Feb 2019 Budget (2019/20 & 2020/21)	SHIL 1	Revise the Adult Social Care Charging Policy.	*	*						*			*	*		
	SHIL 2	Future of two council owned residential care homes for older people, enabling the council to focus on the development of housing with care and community-based services, with the local home care market providing residential care where this is needed	*	*		*		*	*	*			*	*	*	
	SHIL 3	Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50	*												*	
	SHIL 4	Review service charges to tenants in council owned properties, increasing the existing charges and introducing four new ones												*	*	
Oct 2019 (2020/21)	1	Increasing availability of support and carrying out assessments more quickly to help people to return home after a short stay in residential care on discharge from hospital	*	*		*								*		
	2	Making best use of the full range of services that are currently available to support people to live independently in a community setting	*	*									*			

	Code	Description of Proposal	Age	Disability	Gender Reassignment	Marriage & Civil Partnership	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Community Safety	Poverty	Health & Wellbeing	Other	
Page 78	3	Expanding the successful reablement service so more people benefit from short term, intensive support	*	*										*		
	4	Occupational Therapy (OT) reviews to identify where equipment can be used to enable care to be provided in the home by one carer	*	*										*	*	
	5	Increased availability of housing with care options ('extra care') across the city	*	*												
	6	Ensuring direct payments are being used in accordance with care and support plans to meet care needs		*										*		
	7	The provision of better and earlier advice and information on adult social care and community support etc. to meet Care Act duties on promoting wellbeing and supporting independence	*	*										*		
Southampton is a city with strong sustainable economic growth																
Feb 2019 Budget (2019/20)	SSEG1	Introduce charges for Blue Badge holders in council owned off-street car parks	*	*								*	*			
	SSEG2	Increase Itchen Bridge fees for non-residents	*										*			



Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

<p>Name or Brief Description of Proposal</p>	<p>For St Marys Centre to operate as flexible community hub including a limited leisure offering from January 2020 by allowing a property transfer with a lease to a sole Provider.</p>
<p>Brief Service Profile (including number of customers)</p>	
<p>The aim is to provide a venue for a multi-use community hub including limited leisure facilities in St Marys, operated by one Provider who will operate and fully maintain the venue and be able to sub-let/rent out space to other organisations in order to provide an additional range of flexible activities for the whole community, which is not limited to leisure.</p> <p>Until May 2019 the St Marys Leisure Centre venue has provided leisure facilities to the local community of approx.150 users per week under an agreement between the council and Solent University. Following the expiry of the contract in June 2019, the user numbers dropped to xx per week.</p> <p>The building is being kept open with a limited service provision (5 a side and a squash court) within limited hours at a cost to the council of around £16k per month.</p> <p>The building use is currently classed as a D2 Assembly and Leisure venue for indoor sports and recreation only.</p> <p>The council wish to change the use to a D1/D2 Assembly and Leisure and Non-Residential mixed use venue which will allow the premises full flexibility to operate as a community hub from early 2020.</p> <p>The council wish to offer a property transfer with a lease to a sole Provider for 20 years who will be fully responsible for the venue in order that they are able to provide a flexible and unlimited wide range of activities to meet the needs of the whole community for the future.</p>	
<p>Summary of Impact and Issues</p>	
<p>There is a possibility there will be a change in leisure provision delivered from the St Mary’s Leisure Centre venue, with only limited leisure provisions being retained (squash courts and gym).</p>	

However, a modern new sports facility with community access has been built by Solent University in the area less than 0.2 miles away on the university campus site on East Park Terrace which can provide a full leisure service and more (except squash courts). Most of the current St Mary's Leisure Centre users have been encouraged to, and have transferred to this facility from May 2019. There is no longer the need for a full leisure service to be delivered from St Mary's Leisure Centre. A community hub which can offer a range of more flexible services will be much more beneficial to the local residents.

Potential Positive Impacts

Residents local to the venue (within 2 miles) will have a venue that can be utilised for a range of flexible services including limited leisure provisions that will benefit the community. Costs to the Council for the building currently are significant and no future budget exists for any management fee or building maintenance and repair. The new Provider will be fully responsible for structural, repair, building maintenance and insurance of the grade II listed building, removing the risk and cost from the council.

Responsible Service Manager	Paul Paskins
Date	
Approved by Senior Manager	James Strachan
Date	

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	No specific impact	The new gym at Solent University meets the needs of the older members of the community wanting to engage in leisure services. Improved venue and facility allowing for flexibility of services delivered dependant on community, local and central government trends.
Disability	No specific impact	The new gym at Solent University meets the needs of the disabled community wanting to engage in leisure services.

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
		<p>The wheel chair basketball team has already relocated to the new facility.</p> <p>Improved venue and facility which will be able to accommodate people with disabilities.</p>
Gender Reassignment	No specific impact	No specific impact
Marriage and Civil Partnership	No specific impact	No specific impact
Pregnancy and Maternity	No specific impact	Improved venue and facility allowing for flexibility of services delivered dependant on community, local and central government trends.
Race	Negative impact	Solent University's new facility is in close proximity at East Park Terrace. It is open to members of the public and Solent have continued to offer their women only gym classes to the local BME community. 273 former users of St Mary's are already using Solent's facility.
Religion or Belief	Single sex classes held	The women only gym class has already relocated to the new facility at East Park Terrace.
Sex	Single sex classes held	The women only gym class has already relocated to Solent's new facility.
Sexual Orientation	No specific impact	
Community Safety	Positive impact	<p>Most users live within a 2 mile radius.</p> <p>Having the building open and occupied rather than mothballed hopefully will deter from vandalism and anti-social behaviour.</p>
Poverty	No specific impact	Improved venue and facility which can accommodate classes to

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
		<p>promote health and well-being allowing for flexibility dependant on community, local and central government trends.</p>
Health & Wellbeing	Positive impact	<p>Improved venue and facility which can accommodate classes to promote health and well-being allowing for flexibility dependant on community, local and central government trends.</p>
Other Significant Impacts		