



2018  
Update

**MID AND WEST WALES  
REGIONAL STRATEGIC PLAN  
2017-2020**

**SUBMITTED BY:**  
**Mid and West Wales Regional Collaborative Committee**  
**January 2018**

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# Foreword

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As the Chair of the Mid and West Wales Regional Collaborative Committee, it is my priority to deliver good quality commissioning and procurement to effectively meet the needs of service users in Carmarthenshire, Ceredigion, Pembrokeshire and Powys. In recent years, the Supporting People Programme has gone through a fundamental process of change and so has how we look at delivering our services. We aim to maximise the resources spent on service delivery and make sure that we continually learn and improve from experience.

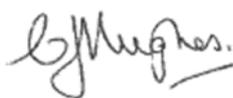
Through this Plan, the RCC sets the strategic direction and priorities for Mid and West Wales for 2017 – 2020. The Plan also highlights the objectives, action plan and the progress made against each priority. Our priorities for development are:

1. Driving service improvement – quality and value for money;
2. Joint commissioning;
3. Partnership working and prevention; and
4. Engagement and service user involvement.

The delivery of priorities is governed by 9 Commissioning Principles:

- Person Centered Approach;
- Co-production;
- Independence;
- Flexibility;
- Accessibility;
- Prevention and Early Intervention;
- Value for Money;
- Well-being; and
- Partnership.

The complex and changing demands across the region requires effective partnership working. The Committee will continue to work together at a regional level to ensure all stakeholders are effectively engaged. It is the ambition of the Mid and West Wales RCC to work closely together to ensure the best use of the Supporting People Programme Grant to support vulnerable people and help in the prevention of homelessness.



Councillor Catherine Hughes

Chairperson  
Mid and West Wales RCC

# Introduction to the Supporting People Programme

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The Supporting People Programme (the Programme) is a Welsh Government funded programme that provides a wide range of housing related support to vulnerable people who are at risk of losing their home and/or their independence.

The programme has a strong prevention and early intervention ethos and supports local, regional and national policy objectives by enabling people to live independently in their own communities. It provides a cost effective alternative to intervention by statutory services by preventing or deferring their use.

The specific aims of the Supporting People Programme are:

- Help vulnerable people live as independently as possible by ensuring Supporting People services are enabling, and develop a person's independence, i.e. 'doing with' as distinct from 'doing for'.
- Prevent problems or provide help as early as possible in order to reduce demand on other services such as health and social services.
- Help people to secure and maintain their home, by helping to maximise people's income, improve their confidence and skills, and enable them to engage with wider programmes to access training and job opportunities.
- Ensure high quality services, which are delivered as efficiently and effectively as possible through joint working between organisations which plan and fund services and those that provide services.
- Provide support based on need.
- Promote equality and reduce inequalities.
- Put people at the heart of the programme.

Last year over 60,000 people in Wales were supported to live as independently as they can by the Programme. In Mid and West Wales, during the six month period from 1<sup>st</sup> January 2017 to 30<sup>th</sup> June 2017, a total of 6,922 vulnerable people were support by the Programme.

## The region

The Mid and West Wales region is a vast geographical area which covers over half of Wales. It is comprised of four local authority areas - Carmarthenshire, Ceredigion, Pembrokeshire and Powys; and two local health boards: Hywel Dda University Health Board and Powys Teaching Health Board. With few centres of dense urban population, the region is predominantly rural, much of which can be characterised as being isolated with poor infrastructure and transportation links. The region has an impressive coastline which contributes to a vibrant tourism economy.

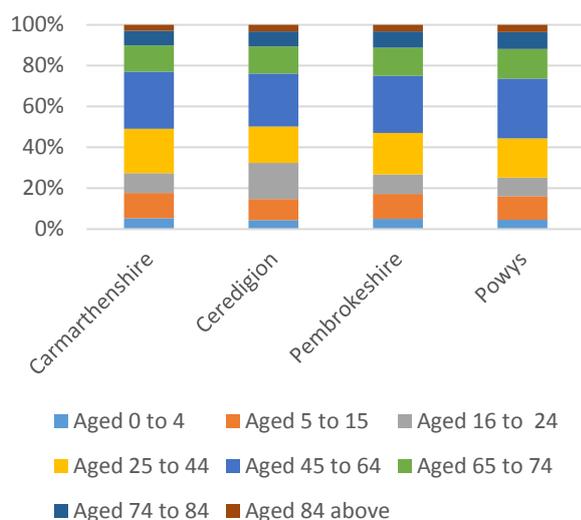


The Welsh language is spoken widely in the region with communities in Carmarthenshire and Ceredigion being a traditional stronghold of the language. However, in recent years, the number of Welsh speakers in the region has decreased, from a high of 171,895 in 2001 to 159,788 people reporting they can speak Welsh in 2011<sup>1</sup> although this trend varies by age category. Amongst the younger age group, the number of 3 to 4 years old Welsh speakers has increased in every local authority within the region which may indicate that the initiatives to promote the language amongst young families are having positive results<sup>2</sup>.

Number of Welsh Speakers by Local Authority, 2001 and 2011

Local Authority	2001		2011	
	Able to speak Welsh	% of LA Population	Able to speak Welsh	% of LA Population
<b>Powys</b>	25,814	21.1	23,990	18.6
<b>Ceredigion</b>	37,918	<b>52</b>	34,964	<b>47.3</b>
<b>Pembrokeshire</b>	23,967	21.8	22,786	19.2
<b>Carmarthenshire</b>	84,196	<b>50.3</b>	78,048	<b>43.9</b>
<b>Total</b>	171,895		159,788	

Population in 2016 by Local Authority and Age



According to the 2016 mid-year estimates, the region has a population of 515, 870.<sup>3</sup> Demographically, the region's population is aging with a high proportion of residents being in the over 65 age category<sup>4</sup>. When compared to the rest of Wales the region has a higher than average proportion of older people and this trend is expected to continue over the coming years due to predicted increase in average life expectancy. Of four areas, Powys holds the largest percentage of people aged 65 and over.

The population in West alone is estimated at 384,000, around half of which live in Carmarthenshire, whilst 31.4% live in Pembrokeshire and 20.7% live in in Ceredigion. There are fewer people aged 25-44 and more people aged 55 and over compared with the rest of Wales. Similarly, there is a higher ratio of

people aged 75 and over (10.3%) compared with 8.9% in Wales as a whole. In Mid Wales, the

<sup>1</sup> A statistical overview of the Welsh Language, 2001 census; Hywel M Jones accessed via: <http://www.comisiynyddygyraeg.cymru/English/Publications%20List/A%20statistical%20overview%20of%20the%20Welsh%20language.pdf>

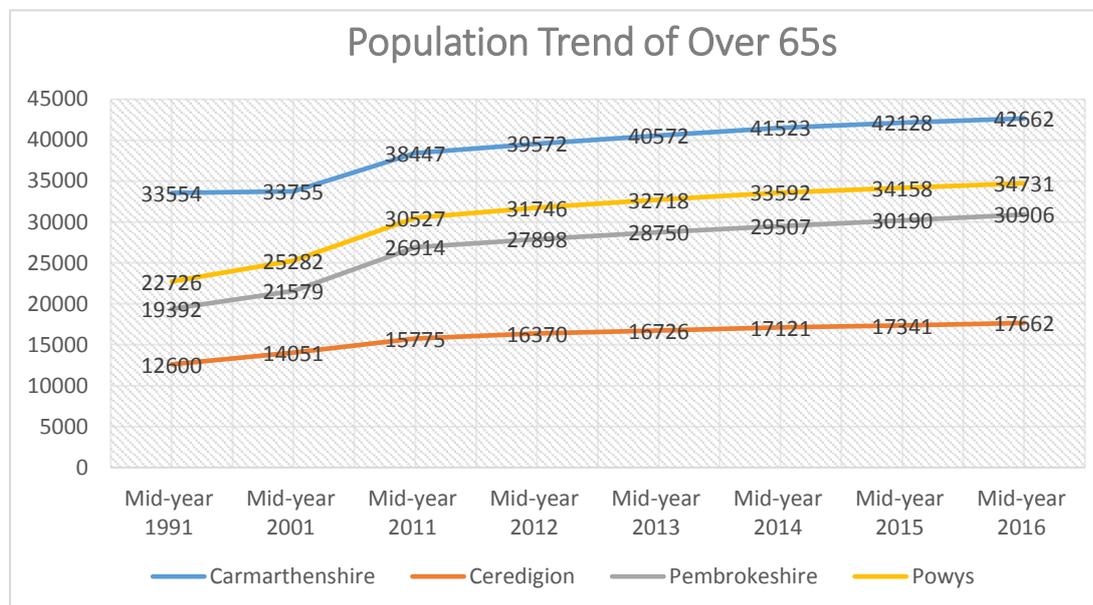
<sup>2</sup> Welsh Language in south west & central Wales Report, accessed via: <http://www.rlp.org.uk/wp-content/uploads/The-Welsh-Language-in-South-West-and-Central-Wales-A-Review-and-Observations.pdf>

<sup>3</sup> Office of National Statistics, Population Estimates, June 2015 accessed via: RLP Website <http://rlp.infobase.cymru.net/IAS/metadata/view/indicatorinstance?pid=5685&id=942211&norefer=true>

<sup>4</sup> Office for National Statistics <http://web.ons.gov.uk/ons/data/web/explorer>

population is 132, 000. The region holds the highest ratio of over 65s. Life expectancy for both males and females in Mid and West Wales is broadly in line with the rest of Wales at 78.9 and 82.7 years respectively.

Population trend of over 65s in Mid and West Wales (1991 – 2016)



Predicted increase in population of over 65s.

Local Authority	Total Population (June 2015)	% of Population 65+ (2015)	Total Population (2039)	% of Population 65+ (2039)
Carmarthenshire	185,123	23%	188,902	31%
Ceredigion	74,642	23%	82,051	27%
Pembrokeshire	123,642	25%	122,225	34%
Powys	132,642	26%	122,415	39%
Wales	3,099,086	20%	3,259,522	27%

The change in the profile of the region’s population, as highlighted in the figures above, will have a significant impact on future service provision, particularly in the areas of health and social care as demand for these services tends to increase with age.

### Carmarthenshire Profile

Carmarthenshire is the third largest local authority in Wales covering some 2,395 square kilometres. Figures from the mid-term population estimates show Carmarthenshire’s population as 185, 610<sup>5</sup>, almost two thirds are of working age, between the ages of 16-64 and just under a third 23% aged 65+. Consistent with the other local authorities, Carmarthenshire has a growing older population with the number of people aged 65+ being predicted to increase by two thirds between 2015 and 2036. As a percentage of the total population the 65+ age group will increase from 23% in 2015 to 31% by 2039.

<sup>5</sup> Office of National Statistics, Population Estimates, June 2016 accessed via: RLP Website <http://rlp.infobasecymru.net/IAS/metadata/view/indicatorinstance?pid=5685&id=942211&norefer=true>

According to the 2014 Welsh Index of Multiple Deprivation (WIMD), Carmarthenshire as a whole is not considered 'deprived'. There are however, small pockets of deprivation in Carmarthenshire, particularly in the Llanelli area.<sup>6</sup>

### **Ceredigion Profile**

Ceredigion's population was estimated at 74,146 in 2016, making it the second most sparsely populated authority in Wales with most of the residents concentrated around the larger towns of Aberystwyth and Cardigan. Population change in Ceredigion is driven by working age and older population growth. The working age growth is influenced by a large student body, with Ceredigion having two renowned universities, Aberystwyth and Lampeter. The shift toward the older age categories is a trend that is reflected both regionally and nationally. The percentage of older people, aged 65+ in Ceredigion is predicted to increase from 23% in 2015 to 27% in 2039. By 2039 it is estimated that 11% of people age 65+ will need somebody to help care for them<sup>7</sup>.

Ceredigion has a very strong Welsh identity and is one of the heartlands of the Welsh language. Despite a substantial student population and significant levels of migration, the 2011 Census shows that 47% of residents still speak Welsh.

Ceredigion is not considered deprived in terms of income, employment, health or education, although there are small pockets of acute deprivation. The 2014 WIMD indicates that in some areas of Ceredigion there are issues relating to people's ability to access services, due to the rural nature of the authority and in 'quality and affordability of housing' in some areas.<sup>8</sup>

### **Pembrokeshire Profile**

According to the 2016 mid-term estimate, Pembrokeshire has a population of 123, 642 which increases over the summer months due to tourism. Looking ahead, it is predicted that the 65+ age group will increase in Pembrokeshire from 25% of the total population in 2015 to 34% by 2039 which equates to 40,961 people being aged 65+ in Pembrokeshire by 2039.<sup>9</sup> It is estimated that 10% of the 65+ age group will require care.

Pembrokeshire is predominately rural in nature and is sparsely populated with a handful of urban towns. This means that people are likely to live further away from public services and other amenities. According to the WIMD 2014, areas of Pembrokeshire are amongst the 10% most deprived areas in Wales in terms of the 'access to services' type of deprivation<sup>10</sup>.

### **Powys Profile**

Powys is the largest local authority in Wales with a land area of over 5,179 square kilometres. It is the most sparsely populated authority in Wales with the majority of residents living in small villages and towns. The largest towns in Powys are Newtown, Ystradgynlais, Brecon and Welshpool. Powys encompasses a rigid, mountainous landscape which makes north – south transport difficult.

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<sup>6</sup> WIMD accessed via <http://gov.wales/docs/statistics/2015/150812-wimd-2014-revised-en.pdf>

<sup>7</sup> Office of National Statistics, Population Estimates, June 2016 accessed via: RLP Website  
<http://rlp.infobaseymru.net/IAS/metadata/view/indicatorinstance?pid=5685&id=942211&norefer=true>

<sup>8</sup> WIMD accessed via  
<https://www.ceredigion.gov.uk/SiteCollectionDocuments/CeredigionForAll/HSCWB/CeredigionPublicEngagementBriefV2Website.pdf>

<sup>9</sup> Office of National Statistics, Population Estimates, June 2015 accessed via: RLP Website  
<http://rlp.infobaseymru.net/IAS/metadata/view/indicatorinstance?pid=5685&id=942211&norefer=true>

<sup>10</sup> WIMD accessed via <http://gov.wales/docs/statistics/2015/150812-wimd-2014-revised-en.pdf>

The population of Powys is older than the average for local authorities in Wales with a current mean average of 45. According to the 2016 mid-term estimate, Powys has a population of 132,160 of which 16% are aged 0-15, 58% are aged 16-64 and 26% are aged 65+. Powys has an aging population with the 65+ age group increasing from 26% of the total population in 2015 to 39% of the total population by 2039.<sup>11</sup> As the number of older people living in Powys increases, it is anticipated that the number of older people requiring care will also rise.

## Mid and West Wales Commissioning Principles

The commissioning and procurement of housing related support services across the region is linked to a wide range of diverse and often competing and complex factors. The Supporting People teams and regional partners have jointly developed and agreed a set of commissioning principles which underpin the programme and guides the commissioning and procurement of housing related support services.

The Mid and West Wales commissioning principles are:

- **Person Centred Approach** – putting the individual and their needs at the centre of their support and giving them a voice in and control over reaching the outcomes that matter to them;
- **Co-production** – encouraging individuals to become more involved in the design and delivery of services; they are the experts of their own lives;
- **Independence** – maximising people’s independence;
- **Flexibility** - developing a commissioning framework which is responsive to the changing needs of the individual;
- **Accessibility** – ensuring services are available and accessible to people from all communities and tenure types irrespective of geographical location;
- **Prevention and Early Intervention** – focusing on the provision of preventative services at the earliest opportunity within the community to minimise escalation to more costly, intensive services;
- **Value for Money** - ensuring a good balance of quality, cost and effectiveness to make the best use of resources and achieve positive outcomes for local people and their communities;
- **Well-being** – supporting people to achieve the best possible outcome with regards to well-being; and
- **Partnership** – working together to promote dignity, respect and social cohesion. Jointly commission services on the basis of meeting people’s needs and maximising effectiveness.

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<sup>11</sup> Office of National Statistics, Population Estimates, June 2015 accessed via: RLP Website <http://rlp.infobasecymru.net/IAS/metadata/view/indicatorinstance?pid=5685&id=942211&norefer=true>

# National, Regional and Local Strategic Priorities and Themes

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## National Priorities

Supporting People is a cross cutting programme that links to a wide range of national, regional and local strategic priorities and themes. Key national drivers of the Supporting People Programme are the legislative Acts and policy initiatives that Welsh Government have introduced or are in the process of being developed. The national policies that have influenced the development of the Mid and West Wales Regional Strategic Plan are:

- The Housing (Wales) Act 2014;
- Social Service & Well-being (Wales) Act 2014;
- Well-being of Future Generations (Wales) Act 2015;
- Violence against Women, Domestic abuse and Sexual Violence (Wales) Act 2015; and
- Welfare Reform Act 2012.

The Plan is also informed by other key legislations such as Tackling Poverty, Homelessness, Community Safety, Homelessness and Vulnerable Groups Health Action Plans (HavGHAP), and local Health Social Care and Wellbeing strategic objectives. It is built upon local priorities and on outputs from the relevant local single integrated planning and partnership structures.

### The Housing (Wales) Act 2014

The Supporting People Programme plays a significant role in helping people overcome difficult circumstances to maintain, find or keep their home and contributes to people's health and well-being. Supporting People services are key to providing the support necessary to prevent people from becoming homeless and the Act acknowledges this.

The Cabinet Minister for Communities and Children recently reconfirmed that the prevention of homelessness is a key priority for Welsh Government and for the Supporting People Programme.

### Regional and Local Priorities

Representatives from statutory housing services and landlord / provider organisations are equal partners on the Mid and West Wales Regional Collaborative Committee (RCC) which enables the committee to keep abreast of the impact the Act is having on services provided by the Supporting People Programme. Locally, SP officers' work is closely aligned with statutory housing services and officers in the authorities are integrated into housing options teams to assist with finding sustainable solutions for households threatened with homelessness or who are homeless.

#### The Housing (Wales) Act 2014

It aims to improve the supply, quality and standards of housing in Wales including the prevention of homelessness. The priorities contained in the Act are:

- Increasing the supply of housing and improving the private rented sector;
- Preventing homelessness and improving help for those who become homeless; and
- Ending family homelessness by 2019.

For the region, a review of homelessness services for all vulnerable adults is a key strategic priority and is in fact a common priority in all four local authority commissioning plans. Reconfiguring homelessness services based on a locality model of provision and supported by specialist housing related support, is the course of action which will be taken in Mid and West Wales to help reduce the number of people who find themselves homeless or under that of being made homeless. In areas where services have already been remodelled to provide generic support in localities, evidence shows that a locally based model of support is more responsive to the needs of the community, with providers being able to identify and intervene with people who are at risk early on and can often prevent problems from escalating to more intensive services. In both Powys and Carmarthenshire, evidence from evaluations of the locality model, where a single provider delivers support in a particular geographical area suggests that:

- there is increased capacity which means that services are more responsive and that the length of time between referral and assessment/commencement of service is minimal;
- everyone referred is assessed and receives a service if applicable;
- there are no waiting lists;
- post support monitoring allows for people to stay connected to the service who do not need the support at present. The monitoring of former service users ensures people successfully sustain their independence by addressing any support needs that arise immediately, before they deteriorate to the point where the individual is at risk of losing their home; and
- the locality model enables services to be more flexible about how much time they spend with people who use services each week and therefore better able to respond to their changing needs.

The rollout of the locality model to all areas across the region was well underway and is continually building on the experiences and learning from Powys and Carmarthenshire. The original impetus for change to localities was the need to improve housing related support provision in rural areas, as much of the region is made up of very small isolated pockets of rural communities and with increased pressures placed on SP budgets the need to deliver more for less was clear. The rollout has not been extended to client groups who require specialist services as these services have not yet been reviewed, reconfigured into the generic locality model of support. Carmarthenshire and Powys are taking the lead with this piece of work, investigating, testing and reviewing services to understand what elements of support are generic and what elements of support are specialist and to test/pilot a model which is generic floating support delivered locally, but which is also supported by specialist services. The findings from this work will be shared with the RCC to assist with service design decisions in all parts of the region.

Currently there are few examples of cross border support in the region; that is support being provided and funded by one local authority with the delivery of support being extended into a neighbouring authority. From a practical point of view, to reduce cost and achieve economies of scale, cross border delivery seems reasonable, as a particular provider operating in a border locality can easily provide support to people living across the border in the same neighbourhood. With the potential of more people in the border locality receiving support and with a reduction in the travel time for support workers, efficiencies can be achieved.

There is RCC agreement in principle to cross border working and to coordinate service delivery in neighbouring areas.

## The Social Services and Well-being (Wales) Act 2014

It provides the legal framework for improving the well-being of people who need care and support, carers who need support, and for transforming social services in Wales. The fundamental principles of the Act are:

- Maintain and enhance the well-being of people in need;
- A stronger voice and real control for citizens;
- Strong direction and local accountability;
- Safeguarding and protection;
- Regulation and inspection; and
- Services - adoption and transition.

Population and Well-being Assessment reports to further inform regional priorities and local and regional commissioning decisions.

In the Mid and West Wales area ongoing discussions with regional partner organisations are being held to identify service areas that would be delivered more cohesively and more effectively if commissioned collaboratively. There is a need in the region for a flexible, responsive approach to the commissioning of services and this would be facilitated by partners working together and aligning budgets.

Local SP teams are working together to identify areas for joint commissioning which will result in resources being used more efficiently and effectively.

To progress collaborative commissioning, current SP contract information across the four local authorities has been collated to determine the number of existing contracts, client groups, type of support (fixed site or floating,) value of the contracts and contract end dates. In conjunction with existing programmes of work, the mapping exercise highlighted services areas that would potentially benefit from joint working and joint commissioning. One such service area is supported accommodation services relating to people with alcohol & substance misuse issues, people with a criminal offending history, young people services and services for young people with a history of criminal offending behaviour. Local SP teams have liaised with each other and with youth services, community safety partners, substance misuse planning boards, offending services, service providers and service users to consider how best SP services can be commissioned to complement and add value to existing statutory services.

Three local authorities, Carmarthenshire, Ceredigion and Pembrokeshire are currently exploring the option to commission a sub-regional alcohol and substance misuse supported accommodation service. Prior to progressing this area of work connections will be made with existing service structures such as the Substance Misuse Area Planning Board, provider organisations and service users to consult on how SP services could complement existing provision.

## The Social Services and Well-being Agreement

The principles of the Act articulate an approach which is built on citizen centred services, and a system of delivery which focuses on greater collaboration, understanding and integration of services.

## Regional and Local Priorities

The RCC recognises the benefits of closer working with regional partnership boards. Links with other partnerships have been made through its membership. Recent population and well-being assessments have been conducted in the region and, at the request of the RCC, two SP officers liaised with partners to ensure data on SP services was included in the regional assessments.

The RCC will utilise the information from the

## The Well-being of Future Generations Act

In order to achieve the goals contained in the Well-being of Future Generations Act, Welsh Government has developed a set of well-being indicators one of which is an indicator that measures homelessness prevention. More specifically, the indicator measures 'the number of households for whom homelessness was successfully prevented for at least 6 months'. The below chart compares the number of homelessness successfully prevented in each area between 2015/16 and 2016/17.

The latest well-being data on homelessness prevention for Mid and West Wales during 2016-17 is shown in the table below as a percentage of the number of people/families who present themselves to statutory housing services. Please note the data is taken from Stats Wales which has a particular definition of the term homelessness prevented, relieved and discharged, (section 66, 73 and 75). In general the region compares favourably to all Wales data.

## The Well-being of Future Generations (Wales) Act 2015

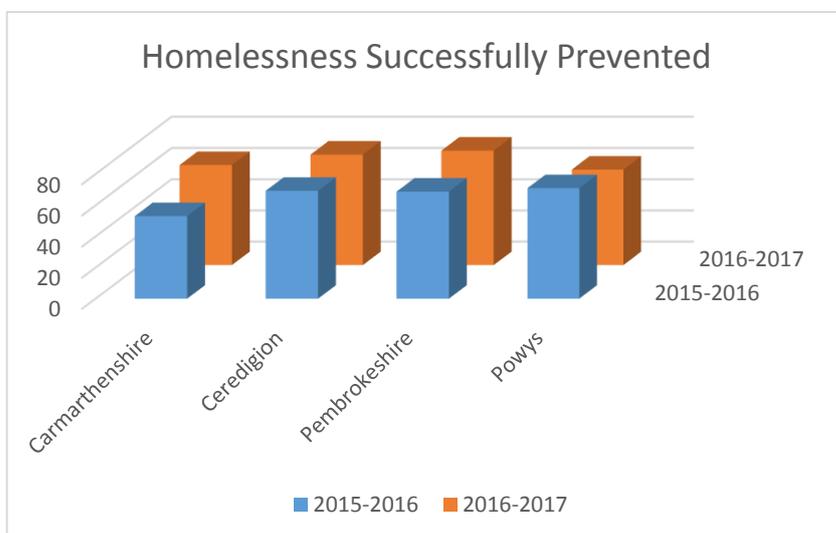
The Act is about improving the social, economic, environmental and cultural well-being of Wales. It will make the public bodies listed in the Act think more about the long-term, work better with people and communities and each other, look to prevent problems and take a more joined-up approach to help create a Wales that we all want to live in, now and in the future.

To make sure we are all working towards the same vision, the Act puts in place seven well-being goals which are:

- A resilient Wales;
- A healthier Wales;
- A more equal Wales;
- A prosperous Wales;
- A Wales of cohesive communities;
- A Wales of vibrant culture and thriving Welsh language; and
- A globally responsive Wales.

	Homelessness Prevented	Homelessness Relieved	Positively Discharged
<b>Carmarthenshire</b>	64.2	42.7	82.6
<b>Ceredigion</b>	70.9	47.8	60.1
<b>Pembrokeshire</b>	73.4	52.5	91.1
<b>Powys</b>	61.3	43.6	75.0
<b>Wales</b>	64.5%	41.3	80.6

The Cabinet Minister for Communities and Children has articulated his expectation that SP services will be used in the prevention of homelessness and expects clear evidence of this. Developing a robust monitoring mechanism to measure the effectiveness and impact of SP commissioned services for the individual, service provider and commissioners is also a priority for the RCC and for the region.



## The Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015

### The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015

The overarching purpose of the Act is to improve the public sector response to Violence against Women, Domestic Abuse and Sexual violence (VAWDASV). It provides a strategic focus and ensures consistent consideration of preventative, protective and supportive mechanisms in the delivery of services. The Act required the appointment of a Ministerial Advisor to work with the Welsh Government to tackle gender-based violence, sexual violence and domestic abuse; the first position of its kind in the UK.

### Regional and Local Priorities

In Mid and West Wales RCC partner organisations have agreed to work together to develop a regional monitoring tool which is person-centred and tracks the distance travelled by people from their perspective. The regional monitoring tool complements the WG Outcomes Framework, a more quantitative measuring tool, and provides the detail to give insight into the experiences and needs of people who access SP services and will measure the impact of SP in relation to prevention.

Local SP teams have met to discuss and agree a common monitoring mechanism to be used regionally. The agreed monitoring system will provide more detailed evidence of people's journeys and will be used to design services to:

***'Provide the right support at the right time and in the right way'.***

#### Case Study 1.

*Client X and her 11 year old son relocated to the area after being forced to escape the domestic abuse, she was being subjected to. Client X and her son spent 4 months in refuge, she was estranged from her other four children. It wasn't safe for her to return to the area and she became homeless. Client X had never been employed or accessed education since leaving school and she had mental health problems, huge debts including rent arrears. Client X had extreme low confidence / self-esteem issues.*

*Since our first contact, Client X has received a range of support including support which has helped with managing accommodation and money, access to confidence building courses and parenting courses. Client X has received support relating to safety of herself and the safety of others including being referred to MARAC and relocated to a safe area. Client X has also received support to access health services and further education (basic skills) courses.*

*Since being referred to us, Client X has made huge strides to improve her life, and she is now in regular contact with all her children, she's debt free and volunteering within the community.*

#### **Recent Update:**

*Since the writing of the story, Client X is now off benefits, working, and about to start an Open University Degree course.*

#### **Prevention: Estimated costs saved through SP preventative measures:**

*Crime: Domestic Abuse – £2,766 per incident to multiple agencies Housing:*

*Homelessness Application - £2,656 per application;*

*Temp Accommodation - £114 per week Health:*

*Mental Health Disorder service provision - £2,148 average cost per person per year*

## Regional and Local Priorities

Meeting the requirements of the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 (VAWDASV) is a priority for the RCC. Local teams have prioritised work to evaluate current services and, in Powys' case, to retender DA services to meet the requirements of the Act. However a proposal to commission domestic abuse services regionally, using an informal arrangement to pool funding streams is being considered by VAWDASV partner organisations. The pooling of funding streams is part of a regional approach to domestic abuse services proposal and includes the establishment of a new governance structure; the formation of a regional board. There is RCC representation at the VAWDASV regional partnership meetings to ensure SP's voice is heard and to help shape decisions that relate to the regional proposal. Indications are that the regional approach will go ahead in mid and west Wales and budgets will be informally pooled. However until further steer and direction is known regarding the development of a regional approach, Supporting People commissioning decisions relating to DA services across Carmarthenshire, Ceredigion and Pembrokeshire are in abeyance.

### The Welfare Reform Act

The Act continues to introduce a wide range of reforms. The Act introduces Universal Credit (UC) which replaces many existing benefits and limits the total amount of benefit a person can claim. It has introduced a new size criteria or 'bedroom tax', Local Housing Allowance rates in the social rented sector and a reduction in the amount of housing benefit that can be claimed for single claimants under the age of 35 years. In April 2016 a four year freeze was imposed on working age benefits which include tax credits and local housing allowance rates. The removal of the temporary accommodation is expected 2017/18. However, from April 2017 some areas of Wales, including Pembrokeshire will receive a 3% uplift in the local housing allowance rate due to the housing allowance targeted affordability fund, aimed to prevent more areas becoming unaffordable for housing benefit claimants.

Generally, the new welfare reforms impact on the way tenants receive benefit, the amount they receive and in many cases has removed the option of having benefits paid direct to landlords. Accordingly, increases in demand on housing, homelessness services and supporting people services, particularly for assistance in managing financial and debt issues, is expected to continue.

#### Welfare Reform Act 2012

Enacted in 2012, the Welfare Reform Act makes changes to the rules concerning a number of benefits offered within the British social security system including:

- Universal Credit;
- Council Tax Support;
- Housing Benefit;
- Benefit Cap; and
- Personal Independence Payment.

## Regional and Local Priorities

In Mid and West Wales the RCC is cognisant of the increased pressures and difficulties faced by vulnerable people as a result of the changes in welfare programmes and links have been made with other tackling poverty programmes to help alleviate poverty and the impact of Welfare Reform.

Connections with Families First, Communities First and Flying Start programmes have been made at both a regional level and in all four local authorities. RCC membership includes representation from officers with links to the Families First programme and Supporting People members attend the Families First Regional Learning Sets.

Work was undertaken in 2017 to test the remodelling of Supporting People by examining the alignment and potential joint commission with other tackling poverty programmes. It is anticipated a planned joint commissioning approach will reduce overlap, duplication and offer better value for money and improved services for vulnerable people.

A pilot service proposal was being developed in Pembrokeshire to enhance provision of housing related support activity for vulnerable families alongside the Team around the Family (TAF) model. Further work has been undertaken in Carmarthenshire to improve communication and increase awareness of tackling poverty programme grants with the aim of strengthening partnership working and reducing any duplication of support activity. Findings will be shared with the RCC and the other local teams to consider and adopt. This work highlighted projects that could benefit from SP funding. This has been funded and are being monitored to provide evidence of housing related support.

Closer links are also being made with programmes that provide support to access work, work placements and access to further training and learning to assist people to move closer toward the world of work and out of the cycle of poverty. Welsh Government and European funded initiatives such as Workways +, Communities 4 Work and the Lift Programme are currently being promoted to SP service providers and social landlords to ensure service users are provided with opportunities to access these programmes.

# Needs Assessment, Supply, Service Gaps and Consultation

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## Population Assessment

The following information has been provided through the Mid and West Wales Population Assessment thematic report. The Population Assessment provides a high level of strategic analysis of care and support needs of citizens and support needs of carers across the region. It provides information on the extent to which those needs are currently being met and identifies where further improvement and development is required to ensure that individuals get the right support and are able to live fulfilled lives. For the purpose of this section of the Plan, Powys has a separate population assessment jointly with Powys Teaching Health Board. Local authorities and health boards must jointly develop area plans to respond to these reports and these will be published in April 2018.

## Core Themes

Population Assessment reports from both Mid and West Wales highlight eight themes of needs. They are:

- Carers;
- Children and Young People;
- Health and Physical Disabilities;
- Learning Disabilities and Autism;
- Mental Health;
- Older People;
- Sensory Impairment; and
- Violence against Women, Domestic Abuse and Sexual Violence.

In addition to the above themes, West Wales identified 'Substance Misuse' as an additional need within the areas of Carmarthenshire, Ceredigion and Pembrokeshire.

## Carers

There are more than 47,000 unpaid carers in West Wales representing 12.5% of residents and 16,154 in Powys representing 12.2% of residents. In Carmarthenshire alone, 1 in every 8 of resident is an unpaid carer – the highest proportion in West Wales and third in Wales.

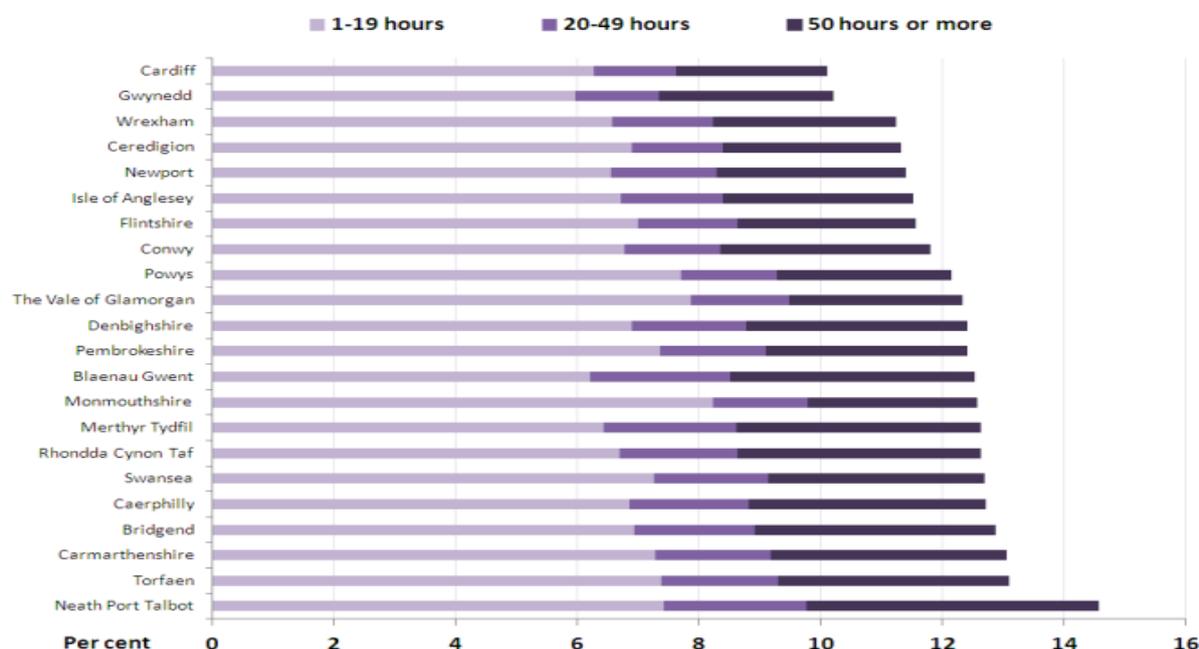
Being an unpaid Carer can negatively impact a Carer's physical and mental health and their financial security. Caring for someone with dementia or mental health needs can have an even greater impact leading to stress and frustration.

Life after caring can also be problematic with Carers having to cope with loss of the cared for person at the same time dealing with a change in financial circumstances as previous entitlement to benefits comes to an end.

For young adult carers taking on significant additional responsibilities can make the transition from childhood into adulthood especially complex and challenging. The difficulties they experience as a result of their caring role can have significant and long term negative impacts on their confidence,

socialisation, their engagement with education and employment and their overall physical and emotional well-being.

### Provision of unpaid care by duration category and unitary authority in Wales, 2011<sup>12</sup>



With regards to housing, the caring role can be compromised by the environment where care is expected to be delivered; the family home or the home of the cared for person. A member of the Carers Forum reported in September 2016 that finding suitable housing is the biggest issue that she and her disabled partner currently face because of the need for housing that is suitable for both of them. Issues identified in relation to housing are:

- Families wanting to take on a caring role are not prioritised for housing;
- Carers are not always recognised as needing a separate bedroom when, for example, their spouse has continence or sleeping issues; Space needed by families with caring roles needs to be recognised in terms of housing standards and overcrowding; and
- Sometimes, an individual's condition means that they need to live in a specific environment. For example a person with autism may need a quiet location for their condition to be manageable.

Service required to meet the housing needs of carers are:

- Adaption of homes that enable the Carer to continue living with their cared for, or if adaptation is not possible to meet their needs in suitable housing in the community; and
- A joined up approach between local housing partners and health and social care to ensure that the recognition of the issues facing Carers is incorporated within strategies and policies.

<sup>12</sup> Provision of unpaid care accessed via: <https://www.ons.gov.uk> (2011)

## Children and Young People (CYP)

In 2016, there are approximately 65,093 children (0-15) living in West Wales and a further 21,264, living in Powys.

The Childhood Health Surveillance in 2016 reported that Carmarthenshire, Pembrokeshire and Powys scored lower than the Welsh average for CYP in need with Ceredigion score being comparable to the Welsh average. In terms of the percentages of CYP living in income deprivation, all areas scored lower than the national average. Although the region's level of deprivation is generally lower than the national average, the link between the levels of deprivation and family structures are evident - with more lone parents found in areas with higher levels of deprivation.

Exposure to Adverse Childhood Experiences (ACES) such as parental separation, domestic violence or individuals with alcohol or substance misuse problems are known to have a long term harmful effect. Preventing ACES can improve health across the whole life course and enhance an individual's well-being. It is recognised that a continued focus on reducing ACES is required.

A shortage of appropriate accommodation and accommodation support for deprived CYP, particularly those who have been looked after, or who have offending behaviour has been identified within Mid and West Wales assessment report as an area of need that is not currently being met.

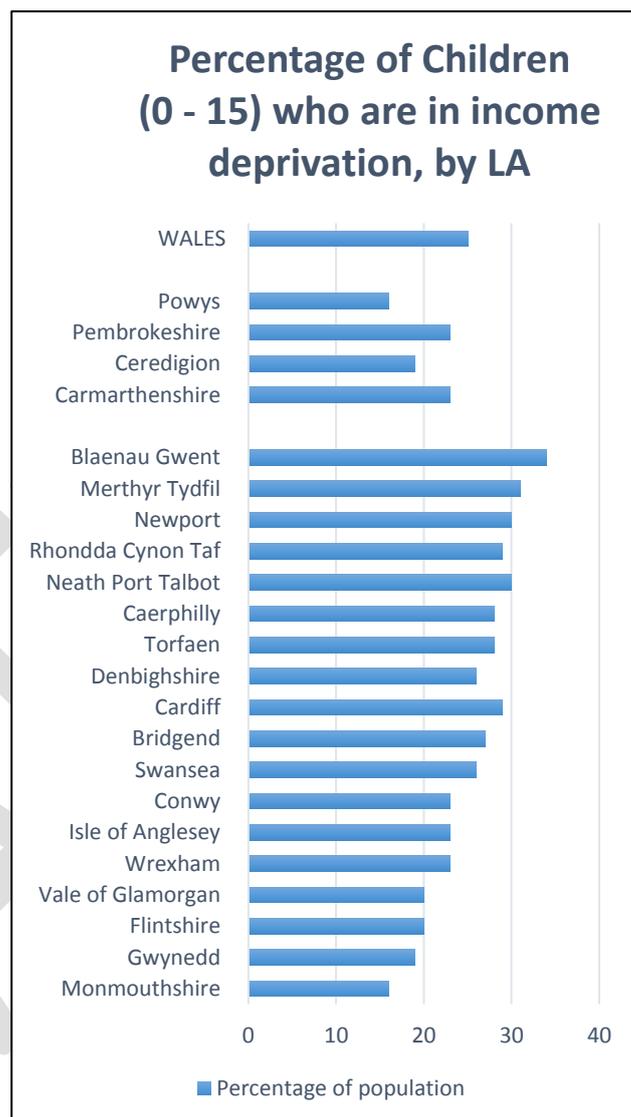
## Health and Physical Disabilities

A range of factors within people's environments have been identified that could increase the likelihood of people developing an ongoing health condition, or aggravate the effects of existing conditions, and against which mitigating actions should be taken. These include unemployment, low wages and poor housing conditions.

Effective promotion of public health, targeted care and support for those with specific needs and more general support for people particularly at risk should combine to optimise the quality of people's lives and their participation within their communities.

## Learning Disability and Autism

Historically, care and support for people with learning disabilities were provided in institutional care home. Over the last 20 years, however, care and support services have moved to communities. Health and social care services along with the third sector collaborate to maximise the independence



and potential of those who use Learning Disability (LD) services. The changes in service provisions mean that there is an ongoing need for additional supported accommodation to enable people with an LD to remain living within their local communities. All three local authorities in West Wales region are working to map the current and future accommodation needs of this service group. There is a continued focus on reducing the number of people in residential care and to promote opportunities for more independent living in the community. Similarly, in Powys or Mid Wales a joint LD services are in place to support the increasing number of population, particularly from older age category, and therefore the increasing demand in the future.

As the region is largely rural there is a concern in relation to transport. People with LD are often dependant on assistance to access transport and local amenities. Additionally, a range of housing options need to be available to meet the needs of this group of people. Service capacity was also identified as a problem and as a need, i.e., educational psychology, learning disabilities nursing and occupational therapists. Consistency in the delivery of services across the sparsely populated rural community was also identified to remain a challenge especially with decreasing resources.

### **Mental Health**

Mental illness can develop from a number of factors including social traumas, illicit drug use and genetic predisposition. Mental health does not discriminate and can affect anyone leading to often debilitating conditions. Improving mental health is becoming a critical issue for people of all ages and its impact is cross cutting, affecting life chances, learning, home life, employment, safety, physical health, independence and life expectancy. Early intervention is crucial and this can take the form of providing information such as literature or referring to community and/or third sector services.

The mental health needs of society have changed significantly over the past decade. Treatment advances have to some extent prompted these changes with delivery of services moving away from a reliance on hospital care and instead providing services in community settings where people can remain supported primarily by families and friends or, when required, by services delivered by health, social care and third sector professionals. Organisations in the region are working in partnership to improve the health and well-being gains for people who are, or have potential to experience mental health problems. A regional model for preventative services is being developed through joint working with a range of partner agencies.

Work is also being undertaken as part of the Transforming Mental Health programme. The programme considers a delivery model which focuses on community based resources and look at the whole person. Based on Trieste Model, it is aimed to break down barriers to accessing services by operating an open door and more service user led policy.

### **Older People**

The population in the Mid and West Wales has a higher proportion of older people than the Welsh average, Powys having the largest percentage within the region. The already high proportion is predicted to increase in the coming years with the increases average of life expectancy. This change in the population profile will have a significant impact on health and social care services.

A number of 'accelerating factors' add to the challenge of providing effective services to older people in the region, from pockets of significant deprivation to large areas of rurality and high levels of migration of older people to certain areas.

The suitability of housing and living accommodation in which we age plays a determining role in ensuring people maintain autonomy and independence. It has been estimated that older people spend 70-90 % of their time at home, which means that an environment that is conducive to supporting well-being is crucial.

To address demands Powys delivers tenure neutral services. Similar to Ceredigion, providers such as Powys CC provide support and alarm services to people in both public and private rented sector and owner occupiers. Locality support is available to older people regardless of tenure.

### **Sensory Impairment**

There is likely to be a greater demand on services to support the needs of people with sensory impairment given that the majority of people who choose to formally register as having a sensory impairment are over the age of 65. Sensory loss in general is more common in older people who may also be living with other conditions such as the effects of stroke, diabetes, and dementia.

People with sensory loss are more likely to suffer with depression, anxiety, loneliness, loss of independence and isolation, and poorer employment prospects and the financial impact these conditions can bring.

The single biggest gap in provision for people with sensory loss is where people are not known to services and includes people residing in care homes.

In Powys, deaf people are experiencing significant difficulties in accessing basic services, such as G.P. appointments, banking services because of delays in providing British Sign Language interpreters. This is an additional barrier to the housing related support need and increases likelihood of social isolation. Powys SP and Hywel Dda Health Board are in on how intervene to increase the presence of BSL interpreters in Mid Wales and improve access to basic services, including housing related support for Deaf people.

### **Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV)**

Survivors of domestic abuse have a range of support needs and are likely to approach a range of services to assist with dealing with their circumstances. Due to the effects of coercive control, it is believed that many current victims are not in touch with any services that could provide an intervention. Some survivors may not recognise that they have been in an abusive relationship so it is important that services being approached have the skill set to recognise indicators that someone is being abused and know how to respond appropriately. In west Wales there are varying levels of support for adults and children across the three authorities. Consideration needs to be given to where there are gaps in service in order to address need.

It is known that people with additional vulnerabilities are more likely to be affected by Domestic Abuse including vulnerabilities such as mental health issues, substance misuse issues, disabilities and older people with support needs.

Within the West Wales assessment report a number of gaps in domestic abuse services have been identified. These include:

- Outreach services for victims who are not yet at a stage where they can engage with services
- Issues with teenagers exhibiting violent and abusive behaviour. Whilst support is available for children, when behaviour crosses over into violence a gap exists
- Specialist support and protection services including refuge and move on accommodation and community support – providers are stating that they are operating at maximum capacity
- Target Hardening options are limited with the removal of the ‘bobby van’ service
- Perpetrator programmes – behaviour change programmes
- No recourse to public funds for EU nationals who have come to the UK to live and work;
- Ensuring a sufficient level of IDVA service to meet demand
- Availability of suitable housing options and housing pathways. There is a lack of supply of suitable, affordable, good quality, single person accommodation and 2 bed accommodation, particularly in Carmarthenshire.

In Mid Wales, needs for provision of wider VAWDASV services to respond to issues such as forced marriage, FGM or sexual harassment and stalking were identified. The extent of the provision needed and the best means of meeting this service will be considered as part of the work being undertaken to develop a local VAWDASV strategy. Vast majority of abuse is unreported so there is no clear data to reflect needs of citizens. In the light of improved service provisions and reporting, it is predicted that reported domestic violence incidents and crimes will continue to rise in accordance over time. It is also expected to see an increase in the risk of FGM and other such issues in the region.

### **Substance Misuse (West Wales)**

West Wales identified needs for care and support for those affected by alcohol and drug misuse. The effects of substance misuse are far reaching impacting on children, young people, adults, whole families and communities.

In the region, those at risk of harm from alcohol misuse come from across the spectrum of society. They include chronic heavy drinkers, adults at home drinking hazardous or harmful levels and children and young adults who suffer from the consequences of parental alcohol misuse. The health impact of misuse of alcohol is considerable; more people die from alcohol related causes than from breast cancer, cervical cancer and MRSA infection combined. Foetal alcohol syndrome is also a risk to the babies of mothers who use alcohol.

At a national level, alcohol misuse is one of the main causes of people becoming homeless. Recent research from Public Health Wales<sup>13</sup> shows that:

- Between 30% and 40% of people become homeless because of alcohol misuse;
- An estimated 60% of the homeless population drink alcohol at hazardous and harmful levels;
- 40% of homeless alcohol users believe a lack of stable housing is the main barrier to their recovery; and
- Drug and alcohol abuse are particularly common causes of death among the homeless population, accounting for just over a third of all deaths.

Under the Housing (Wales) Act 2014, local authorities have a duty to help prevent and relieve homelessness, irrespective of their priority need status and should ensure everyone with substance misuse problems is assisted to address their housing and related needs and aid their recovery.

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<sup>13</sup> Substance misuse and homelessness in Wales accessible via: <http://www.wales.nhs.uk/news/39384>

## Well-being Assessments

As part of the requirements of the Well-being of Future Generations Act, the Public Service Boards in Powys and in Carmarthenshire, Ceredigion and Pembrokeshire have taken the decision to work together to produce their well-being assessments by 31<sup>st</sup> March 2017. This consistent, regional approach includes undertaking a well-being survey directed at residents and an agreed toolkit for direct engagement work through focus groups or in less formal settings across the region.

Across Carmarthenshire, Ceredigion and Pembrokeshire residents said that good health was the single most important factor to their overall happiness, contentment and life satisfaction. Out of a total of 6,443 responses, 3 in 4 (75%) residents said it was important now, and 61% thought it would be important to them in the future. Having enough money for the essentials was held as the second most important factor (66% said now; 52% said in the future), followed thirdly by good relationships.

The following three tables are taken from the results of the West Wales well-being survey using the Average Index Score measurement (AIS), sometimes known as a weighted average score. The AIS is a way of distilling the strength of respondents' opinion down into one number. The values shown in the tables range from a high of +2 denoting 'strongly agree' to a low of -2 denoting 'strongly disagree'. A zero value denotes a 'have no opinion' response.<sup>14</sup>

Residents' responses to questions on social well-being when categorised by type of housing tenure

<b>Social Wellbeing/Housing Tenure</b>	<b>Overall AIS</b>	<b>Owned outright</b>	<b>Owned with a mortgage or loan</b>	<b>Rented from council or housing association</b>	<b>Privately rented</b>	<b>Other (please specify)</b>
Feeling part of a community	1.10	1.17	1.02	1.13	0.99	0.92
Having opportunities to influence local decisions	0.96	0.98	0.99	0.86	0.83	0.74
Feeling safe in my home	1.84	1.83	1.85	1.87	1.84	1.76
Feeling safe in my community	1.77	1.75	1.78	1.83	1.79	1.72
People getting on well with each other	1.50	1.53	1.46	1.53	1.46	1.34

When residents' responses relating to questions on social well-being were cross-tabulated with their responses to questions relating to type of housing tenure, 'feeling safe in my home' was considered the most important factor for respondents living in West Wales with 'feeling safe in my community' being the second most important and 'feeling part of the community' being third. In general people who lived in rental properties (social or private) responded with low scores than people who owned their properties outright or with a mortgage.

<sup>14</sup> Explanation of weighted average scores accessed via: [https://simple.wikipedia.org/wiki/Weighted\\_average](https://simple.wikipedia.org/wiki/Weighted_average)

Table 2. Residents' responses to questions on the current state of their home when categorised by type of housing tenure

<b>Table 2. State of Home/Housing Tenure</b>	<b>Overall AIS</b>	<b>Owned outright</b>	<b>Owned with a mortgage or loan</b>	<b>Rented from council or housing association</b>	<b>Privately rented</b>
My home is in a good state of repair	1.19	1.33	1.13	0.85	0.89
My home is easy to keep warm	0.89	0.99	0.83	0.88	0.58
I can afford to heat my home	1.01	1.12	0.98	0.76	0.70
My home meets the needs of those who live in it now	1.19	1.28	1.19	0.90	0.96
I can live in my home for as long as I want	1.20	1.39	1.20	1.12	0.25
My home will meet my needs in the future	0.73	0.88	0.72	0.59	0.05
I will be able to find suitable housing if I needed to move	0.39	0.50	0.45	-0.03	-0.07

As highlighted in Table 2, respondents who live in social and privately rented homes have lower scores than respondents who own their property when asked questions about the state of their home. This result may indicate that people who live in rental properties, are living in poorer conditions and are more concerned about their ability to heat their homes and about finding alternative accommodation, should they need to move than people who own their properties.

Table 3. Depicts responses to questions about the current state of the home and residents' health status. Respondents with health issues were less likely to agree with the seven statements list below, with the statement 'I will be able to find suitable housing if I needed to move' being of most concern.

<b>Table 3. State of Home/health status</b>	<b>Yes- have a health issue</b>	<b>No – don't have a health issue</b>	<b>Preferred not to say</b>
My home is in a good state of repair	1.08	1.25	0.87
My home is easy to keep warm	0.79	0.95	0.66
I can afford to heat my home	0.82	1.11	0.72
My home meets the needs of those who live in it now	1.04	1.27	0.98
I can live in my home for as long as I want	1.11	1.24	1.06
My home will meet my needs in the future	0.53	0.83	0.43
I will be able to find suitable housing if I needed to move	0.07	0.55	0.18

All respondents to the well-being survey identified 'good health' and 'enough money' for essentials as central to their well-being now and in the future, being rated first and second in importance. The third most important aspect to residents' well-being varied according to their employment status. Those in full time employment said job satisfaction and security were an important factor to their well-being within the next 10-20 years, whilst unemployed and retired respondents said access to care and support would be an important long-term factor.

The Well-being Assessment in Powys highlighted that 1 in 4 adult over 65 lives independently. There are 19,000 lone person households out of a total of 59,100 households and a total of 859 clients are supported by domiciliary care. Many people are now finding it increasingly difficult to perform basic domestic tasks.

The lack of infrastructure and assistive technology has reduced the viability of independent living. Despite this, there has been an increase in the number of adult clients supported in the county. As the elderly population increases, there will be more demand for suitable accommodation options. By 2035, more people are expected to be living alone and the number of people with dementia is also expected to increase. There will be a need to accommodate citizens within their local communities, whether that is in their own home, in sheltered or extra care accommodation, or a nursing home.

The top three key findings that have a direct negative impact on wellbeing in Powys are:

- travelling around Powys;
- suitable accommodation for older people; and
- poverty and deprivation.

Most key findings only impacted on one or two well-being goals.

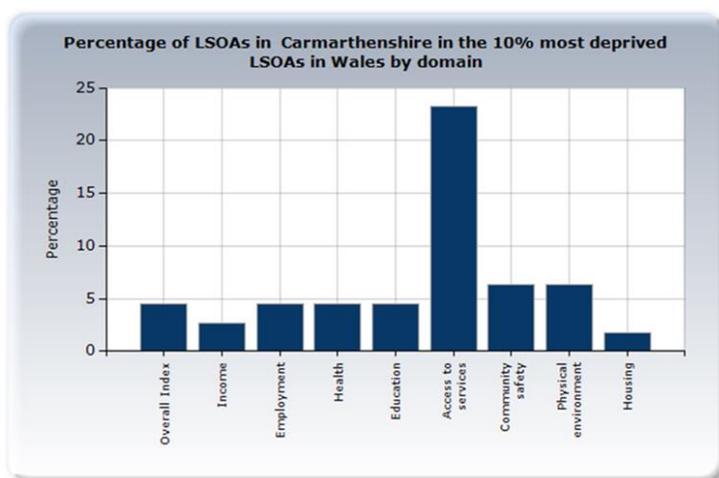
Childcare sufficiency is the only key finding which has a direct positive impact on well-being in Powys.

## Welsh Index of Multiple Deprivation

The Welsh Index of Multiple Deprivation (WIMD) is the Welsh Government’s official measure of relative deprivation for small areas (Lower Super Output Areas/LSOAs) in Wales. It is designed to identify small areas with the highest concentrations of deprivation so that support can be targeted to areas of greatest need. WIMD is a measurement of 8 different constructs (domains) which together make a ‘multiple deprivation’ measure.<sup>15</sup>

### Carmarthenshire:

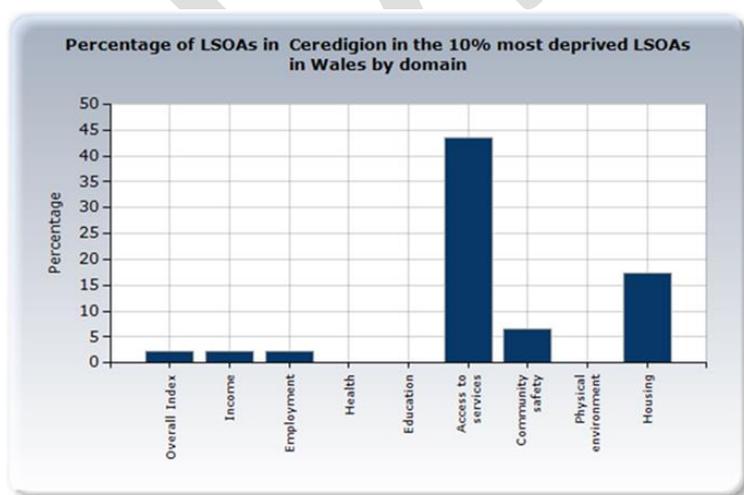
4.5% of areas (LSOAs) in Carmarthenshire are ranked within the top 10% most deprived areas in Wales. This equates to a total of 5 areas, all of which are in and around the town of Llanelli.



As illustrated in the chart, the type of deprivation with the highest ranking in Carmarthenshire is ‘Access to Services’. The purpose of this domain is to capture deprivation as a result of a household’s inability to access a range of essential services considered necessary for day- to-day living. Average travel times to services using both public and private transport have been incorporated into the ‘access to services’ indicator for 2014 WIMD report.

### Ceredigion:

In Ceredigion 2.2% of areas (LSOAs) are ranked within the 10% most deprived areas in Wales. This is a total of 1 area, namely the Cardigan -Teifi area. As illustrated in the chart ‘Access to services’ and housing’ are the types of deprivation with the highest ranking in Ceredigion with above average number of areas, LSOAs in the 10% most deprived in Wales.

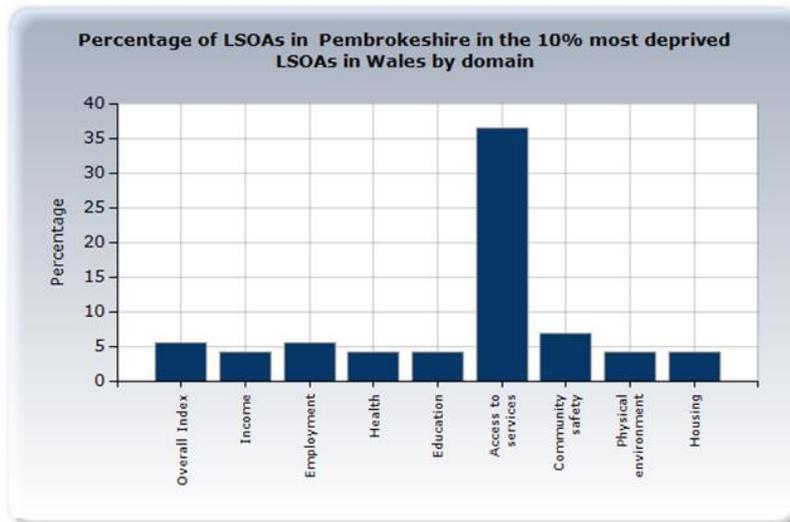


Generally, ‘Access to Services’ deprivation is found to be widespread across rural areas of Wales, with the local authorities of both Powys and Ceredigion having the highest proportion of areas ranked in the 10% most deprived areas, 46.8% and 43.5% respectively.

<sup>15</sup> IMD 2014 Executive Summary Report accessed via: <http://rlp.infobasecymru.net/IAS/themes/people/deprivation/welshindexofmultipledeprivation2014>

### Pembrokeshire:

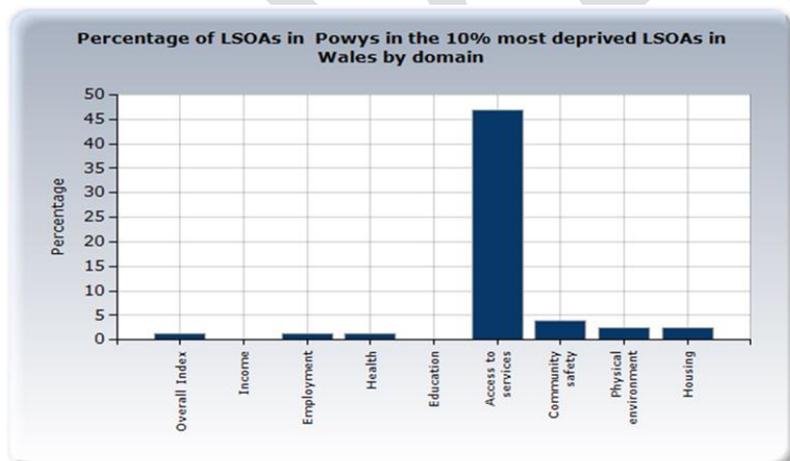
According to the 2014 Welsh Index of Multiple Deprivation, 5.5% of areas (LSOAs) in Pembrokeshire are ranked within the 10% most deprived areas in Wales. This equates to 4 local areas which are; Pembroke Dock Llanion area, followed by Pembroke Monkton area, Haverfordwest Garth area and Milford's Hubberston area.



As illustrated in the chart, the 'Access to Services' type of deprivation is again showing as having a high proportion of areas that fall into the 10% most deprived areas in Wales (36% of LSOAs in Pembrokeshire).

### Powys:

Ystradgynlais is an area of Powys (LSOA) that ranks within the 10% most deprived areas in Wales. Due to the rural nature of Powys, 46.8% of areas are ranked within the 10% most deprived areas in Wales for 'Access to Services'.



In general, rural areas across Wales are more deprived in terms of access to services than the more urban areas and this can be seen clearly in all four local authorities in mid and west Wales. The rurality of the region has major implications for the commissioning of SP services.

## Outcomes Analysis

The Supporting People outcomes framework aims to demonstrate the effectiveness of the Supporting People Programme and collects information that highlights the benefits for people in receipt of housing related support.

The framework consists of 11 areas/well-being outcomes and each service user, when they access support, indicates which outcomes are most relevant to them. Providers collect and report on this information and on the progress services users have made toward the achievement of their particular outcome at six monthly intervals. The following is a list of the well-being outcomes:

### Promoting Personal and Community Safety

- Feeling safe
- Contributing to the safety and well-being of themselves and of others

### Promoting Independence and Control

- Managing accommodation
- Managing relationships
- Feeling part of the community

### Promoting Economic Progress and Financial Control

- Managing money
- Engaging in education/learning
- Engaged in employment/voluntary work

### Promoting Health and Well-being

- Physically healthy
- Mentally healthy
- Leading a healthy and active lifestyle

Service providers routinely report against the Supporting People outcomes framework for service users upon entry, at 6 month intervals and upon exit from the service, providing a picture of 'distance travelled'. Commencing in 2016 further questions relating to the homelessness status of services users were added to the outcomes framework in order to evidence the way in which SP services help prevent or alleviate homelessness.

The following tables depict the outcome areas that are either fully achieved or partially achieved (positive outcome) by service users over three reporting periods. Outcomes information is used to measure, maintain and improve the quality of services that is being provided and to evidence the value of the Supporting People Programme.

### Outcomes reported April 2015 – September 2015, includes: Ceredigion, Pembrokeshire and Powys

MID & WEST - Ceredigion, Pembrokeshire & Powys				
Outcomes Data Apr 2015 - Sept 2015; PERIOD 1	Identified Need	Positive Outcome Achieved	Outcome Fully achieved	% making progress & fully achieving
Feeling Safe	1777	685	405	61%
Contributing to the safety/wellbeing of self and others	1598	641	365	63%
Managing Accommodation	2451	984	433	58%
Managing Relationships	1274	525	193	56%
Feeling Part of the Community	1239	469	230	56%
Managing Money	2015	670	482	57%
Engaging in Education/Learning	527	167	63	44%
Engaging in Employment/Volunteering work	625	182	117	48%
Physically Healthy	1255	539	167	56%
Mentally Healthy	1481	682	153	56%
Leading a Healthy, Active lifestyle	1048	426	146	55%
Total	15290	5970	2785	57%

The outcome area that was most relevant, in terms of identified need is the 'managing accommodation' outcome area, followed by managing money and feeling safe. This result is not surprising given that the Supporting People grant is intended to help people who are in need of housing related support.

The 'feeling safe' outcome area and 'contributing to the safety/well-being of self and others areas have the highest percentage of people making progress or fully achieving an outcome.

The areas with the lowest number of people making progress or fully achieving an outcome are 'engaging in education/learning and 'engaging in employment and volunteering work'.

### Outcomes reported October 2015 – April 2016: inclusive of all 4 local authorities

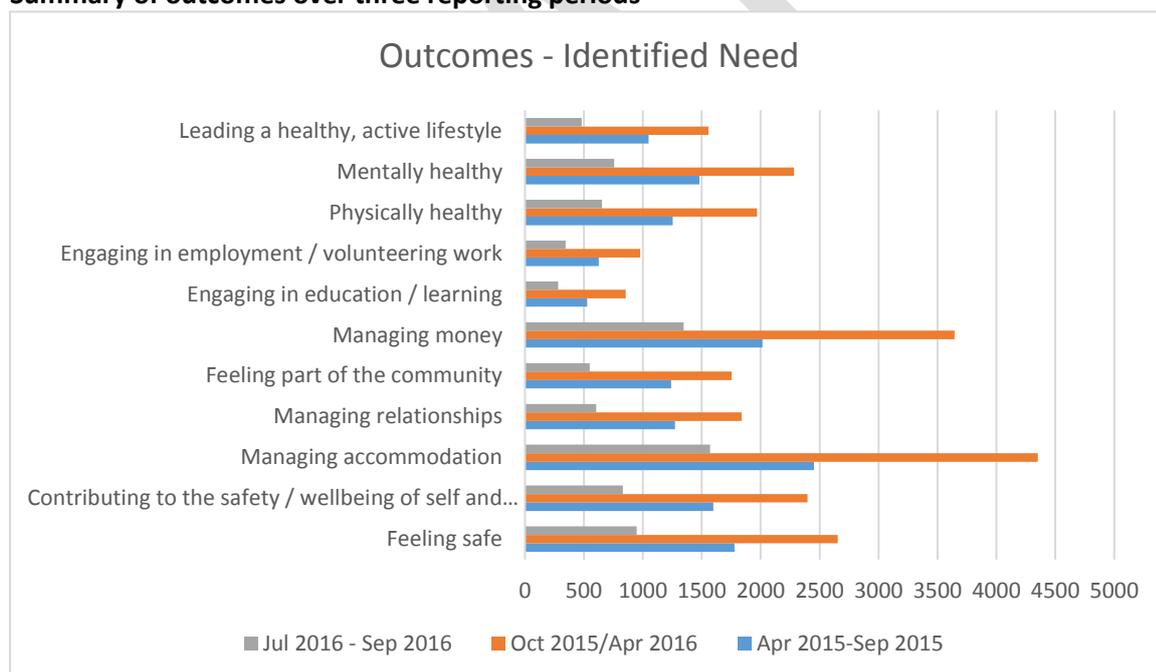
MID & WEST WALES				
Outcomes Data October 2015 - March 2016; PERIOD 2	Identified Need	Positive Outcome Achieved	Outcome Fully achieved	% making progress & fully achieving
Feeling Safe	2654	1066	620	64%
Contributing to the safety/wellbeing of self and others	2397	990	493	62%
Managing Accommodation	4351	1774	1075	65%
Managing Relationships	1837	807	318	61%
Feeling Part of the Community	1752	708	332	59%
Managing Money	3645	1206	910	58%
Engaging in Education/Learning	856	293	143	51%
Engaging in Employment/Volunteering work	978	330	202	54%
Physically Healthy	1950	768	289	54%
Mentally Healthy	2284	1064	326	61%
Leading a Healthy, Active lifestyle	1558	721	231	61%
Total	24262	9727	4939	60%

The 'managing accommodation' outcome area is again the most relevant area in terms of identified need.

**Outcomes Reporting July 2016 – September 2016, inclusive of all 4 local authorities:** (please note this is a three month reporting period to assist with the alignment of Supporting People with the other tackling poverty programmes)

MID & WEST				
Outcome Data April 2016 - July 2016; PERIOD 1	Identified Need	Positive Outcome Achieved	Outcome Fully achieved	% making progress & fully achieving
Feeling Safe	948	309	220	56%
Contributing to the safety/wellbeing of self and others	831	300	183	58%
Managing Accommodation	1571	447	419	55%
Managing Relationships	603	246	103	58%
Feeling Part of the Community	550	234	100	61%
Managing Money	1347	400	353	56%
Engaging in Education/Learning	283	101	49	53%
Engaging in Employment/Volunteering work	344	118	71	55%
Physically Healthy	654	267	108	57%
Mentally Healthy	756	307	121	57%
Leading a Healthy, Active lifestyle	482	216	87	63%
Total	8369	2945	1814	57%

### Summary of outcomes over three reporting periods



Over three reporting periods, 'Managing Accommodation' and 'Managing Money' were identified as the most important needs in Mid and West Wales. Demands in these area are anticipated to increase even more when Universal Credit is introduced in 2018. Mid and West Wales made relatively positive progress and completed outcomes across all areas, except 'Engaging in education/learning' which scored just below 50%. This area of well-being outcome was also identified as the least relevant need among service users.

## Outcomes Reporting on Homelessness Status: April – July 2016

The table below shows the homelessness status of service users at the beginning of their support and at the end of support for the collection period April to July 2016. This is the first time providers and local authorities across Wales have been asked to report on the homelessness status of their service users.

Homelessness Status	Carmarthenshire		Ceredigion		Pembrokeshire		Powys		Mid & West	
	On Entry	On Exit	On Entry	On Exit	On Entry	On Exit	On Entry	On Exit	On Entry	On Exit
Homeless	71	15	116	21	91	5	40	7	318	48
At Threat of Homelessness within 56 days	26	5	37	8	25	3	21	3	109	19
In Interim Accommodation	31	36	32	18	54	14	8	5	125	73
Need Support to Remain in Own Home	125	50	263	38	238	31	222	9	848	128
Maintaining Stable Accommodation Independently (6 months+)		199		72		124		28		423
<b>Totals</b>	<b>253</b>	<b>305</b>	<b>448</b>	<b>157</b>	<b>408</b>	<b>177</b>	<b>291</b>	<b>52</b>	<b>1400</b>	<b>691</b>

Information collected on the homelessness status of service users across the region show:

‘On Entry’ into the service:

- 30.5% of people were either homeless or at threat of homelessness when their support began
- 9% of people who were in interim accommodation needed support to remain in own home
- 60.5% required support to remain in their own homes

‘On Exiting’ the service, when support ended:

- 10% of people were either homeless, or at threat of homelessness
- 29% of people were either in interim accommodation or still needing support to remain in their own homes
- 61% of people were maintaining stable accommodation, expected to last at least 6 months

Going forward this information on homelessness will be collected routinely and will be used to inform future service design in Mid and West Wales.

## Consultation Evidence

In order to produce this Regional Strategic Plan the RCC task and finish group consulted with local Supporting People teams, RCC members and Providers and Landlords of the Supporting People Programme. Service users have been consulted by way of service providers and landlords.

The six main strands covered in the consultation were:

1. Co-production with RCC members - the RCC task and finish group actively participated in the development of the regional plan and on identifying and agreeing on the priorities and work plan;
2. Carrying out work at the early stages with local authority lead officers and partners to gauge expectations of what the regional priorities should be over the next 3 years;
3. Presenting plan at the December RCC meeting to gain members’ input and agreement on the priorities and actions going forward;
4. Circulating draft plan to RCC members, each Supporting People team, Providers and Landlords, by way of RCC representatives, inviting feedback and comments;
5. Providers to circulate contents of plan to users of SP services via their existing engagement networks; and
6. Final copy of plan to be circulated electronically to the RCC for approval.

# Efficiencies in Service Delivery

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## Regional and Local Priorities:

The RCC is committed to ensuring the SP programme grant is used to commission housing related support as efficiently and effectively as possible through achieving the objectives underpinning each of the following strategic priorities:

**Driving service improvements** – a strong focus on achieving Value for Money based on quality, cost and relevancy now and in the long term.

Across the region a planned programme of strategic reviews is underway to determine relevance, measure impact and to assess whether existing services are meeting the needs of the people and the priorities set by the RCC and Local SP Planning Groups. Further work is to be undertaken with service providers and partners to explore ways of maximising impact, to provide quality services and to support the same number or more people with the same or fewer funds.

A regional prioritisation toolkit has been developed to aid SP teams when reviewing services. The toolkit includes a prioritisation matrix template, which is applied to both existing services and new project proposals, and a prioritisation flowchart; an initial assessment tool that gives a general view of the direction a service should take prior to using the more in depth prioritisation matrix. Both prioritisation tools have been shared with RDC colleagues and RCCs in other regions and continues to be in use by local authority teams.

Opportunities for improved efficiencies within the SP teams to reduce administrative burden and duplication of work have been identified with discussions now underway to implement efficiencies in a number of specific work areas by performing required tasks on a regional basis. The specific areas of work are:

- Regional coordination of outcomes reporting;
- Development of a regional policy on management charges to achieve consistency in application; and
- Regional / sub-regional agreement to the use of a consistent referral gateway.

**Joint Commissioning** - Extend the locality based model of support across the region. An emphasis will be placed on services delivering across borders.

**Partnership Working and Prevention** - Align budgets to commission services both across counties and jointly with partner organisations. There will be a strong emphasis on linking with partners to identify opportunities for collaborative commissioning. Links will be made with existing structures such as Tackling Poverty Programmes, Substance Misuse Area Planning Board, Regional Partnership Board and the Children & Youth Safeguarding & Unifying the Region partnership (CYSUR).

**Engagement and Service User Involvement** - In mid and west Wales engagement with service users is primarily through the use of existing local networks and fora. A range of service user engagements methods are used by local SP teams and service providers to make sure service users are involved and help shape commissioning decisions. Whilst there is a plethora of service user involvement

methods currently being used some of the most commonly used methods by providers are listed below:

- Service user forums;
- Peer mentoring and support groups;
- Monthly drop-in days and informal coffee mornings;
- Task groups to assist in the design and re-design of services;
- Service users involvement in the scrutiny of key policies and procedures;
- Service user attendance at TPAS training sessions looking at how to scrutinise effectively;
- Involvement in recruitment panels; and
- Informal and social activities where people can discuss and input their ideas in a relaxed setting.

The Mid and West Wales service user involvement framework is being revisited to identify and encourage service user engagement on a regional level. Membership of the RCC includes a place for service users, but to date, there has been no service user representation on the committee.

Whilst existing local networks will continue to be used to engage with service users during 2018, an RCC involvement group was formed with the aim of identifying services users who are willing/interested in representing all service users on the Regional Collaborative Committee. This means being a full member of the RCC having equal say and voting rights in the decision making. It is anticipated service user(s) will also be integral member(s) of the working groups of the RCC, as and when these groups are formed.

A proposal for the RCC to host a regional involvement event to re-launch service user engagement in Mid and West Wales has recently been made to the RCC. The purpose of the event is to communicate the work of the RCC and to enable services users to become involved. This may take the form of an RCC service user sub-committee being formed to feed into the RCC. A member of the sub-committee will then be the service user representative on the RCC and thus be the link between the RCC and the service user sub-committee. Ultimately, the particular method and level of service user involvement will be determined with the people who use SP services. This event took place in March 2017. The success of the event has facilitated local events to start taking place. A targeted service user engagement event was undertaken in Pembrokeshire in 2017 focussing on ex-offenders with a similar event taking place in Carmarthenshire in early 2018.

The overall aim of regional involvement is to:

***Improve the level of involvement and inclusion in the decision making process regarding the SP Programme in Mid and West Wales.***

It is expected that through delivering the priorities identified within this Strategic Plan that resources will be used more efficiently, homelessness and escalation of need will be prevented, service providers will have greater capacity to meet local needs and the people who use SP services will be involved in the design and delivery of services ensuring that people receive the right support, at the right time, and in the right place.

# Equality Impact Assessment/Integrated Impact Assessment

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The impact of changes to the delivery of floating support services, to a locality based model has been assessed by stakeholders in Carmarthenshire and Powys including services users, all of whom have fed into the Equality Impact Assessment (EIA).

An engagement event was recently held with providers in Pembrokeshire who gave feedback into the design of the Locality Model pilot - rural pilot completed with urban finishing end of January. Currently, the Pembrokeshire SP team is consulting with all stakeholders to ensure any potential negative impacts on people with protected characteristics are considered and measures are put in place to mitigate them.

Each local authority in Mid and West Wales will undertake an accurate assessment of the impact of their local strategic plans on vulnerable people in their area and each team will ensure measures are put in place to prevent or mitigate against any potential negative impact.

The EIA cover the following areas:

## **Equality and Diversity**

**Age** – The LSPs will deliver a mixture of support services to those aged 16+ including those services specifically designed to meet the housing related support needs of the young and those of the elderly. The majority of services can be accessed by any adult of any age with a support need. In Powys and Carmarthenshire, these will be delivered in part or as a whole by locality-based services. In addition, each local authority in the region has developed an action plan for housing and supporting young people at risk, with Supporting People working in collaboration with Children’s Services and Homelessness Services along with the key support agencies and stakeholders working with young people.

**Disability** – The LSPs will deliver a range of support services, all of which may be accessed by those with a disability. It will take account of the specialist support needed to back up the local services need for people with learning disabilities, people with mental health issues, people with sensory disabilities, and people with autistic spectrum disorder and people with dementia. A specific recommendation has been made through the work of the regional domestic abuse modernisation pilot to ensure that those with disabilities are able to access refuge / direct access accommodation as this is an area of concern in inequality of access.

**Marriage and Civil Partnership** – It is an expectation that no SP-funded projects will discriminate on the basis of marriage or civil partnership status.

**Pregnancy and Maternity** – The LSPs identify specific projects for those affected by domestic abuse and vulnerable families, both client groups where a comparatively large proportion will be mothers or expectant mothers.

**Ethnicity** – The LSPs is aimed at all vulnerable people irrespective of ethnicity including the gypsy traveller community. Issues being raised for future consideration include support to members of the Polish community. People from a wide range of ethnic groups are present in the region, but rarely in

concentrations which make it appropriate to provide them with specific services. We must therefore ensure that all services are aware of the needs of different minority ethnic groups and how to meet these needs. We must also consider ways to design services which make it more likely that people from minority ethnic communities will feel comfortable to access them. However, the expected intake of refugees fleeing the crisis in Syria is likely to increase the need for support and research will be undertaken to see if specific services will need to be commissioned to meet new demand.

**Gender** – The LSPs are aimed at all vulnerable people irrespective of gender. The majority of services commissioned are available to both sexes subject to appropriate risk assessments. Some services are sex specific, such as the women’s and men’s domestic abuse support services, where these specific needs have been identified. Alternative provision is made via both generic and family specific floating support services. There are indications that men who are separated from their families are particularly at risk from poor accommodation options as a consequence of the benefit changes.

**Gender Reassignment, Religion and Belief, and Sexual Orientation** – the LSPs will positively impact upon all vulnerable people irrespective of these protected characteristics. The LSPs aim to contribute to the health and well-being of service users regardless of any equality issues.

### **Sustainable Development**

**Economy and Employment** – The services identified within the LSPs will promote education, training and employment according to demand. Delivery of the LSP will result in greater numbers of people living independently, accessing employment and contributing to the economy.

### **The Welsh Language**

Providing the right support to people means providing it in the right language. Service users are given the choice to receive support through the medium of Welsh or English. First language Welsh speakers are entitled to receive support in their language of choice, whether it is Welsh or English.

### **Health and Well-being**

There will be development of housing related support to help each local authority implement the requirements of the Social Services and Well-being Wales Act, with a particular role to play for early intervention and prevention.

- The LSPs will contribute towards the breakdown of barriers and promotion of social inclusion.
- The LSPs will promote greater equality of opportunity for disadvantaged groups including those living in poverty.
- Delivery of the LSPs will result in improved levels of health and well-being given the contractual requirement of service providers to promote and develop links with health services and involvement in leisure opportunities.

## **Case Study 2.**

*Client X was born in Birmingham. He was taken into care at two years of age due to family issues. He remained in the care system and eventually moved to a residential care home in 1992 where he remained for 20 years.*

*When he reached 50 years of age Client X was supported by Advocacy service to explore the possibility of residential care and into supported living. Following two placements in supported living he now has moved to a temporary address, where he is working towards further independence with less support and wishes eventually to live in a flat as sole tenant with minimal support.*

*Receives support in following:*

- *Security of property and support to manage visitors as he is still developing skills in social interaction and appropriate boundaries.*
- *Support to manage the property, including maintenance, repairs and safety issues.*
- *Financial support is essential as for most of his life he has not had to deal with any financial affairs so requires support in all areas of financial management.*
- *Developing independent living skills such as cooking meals, support to manage laundry and household cleaning. Support with shopping, making appointments and using public transport.*
- *Support to develop social relationships that will promote his well-being and enable him to progress with plans to live more independently.*

*Client X has been able to increase his community presence without support and is increasingly aware of the needs and feelings of other people in his social circle.*

*In the last three years Client X has progressed from residential care to being able to manage a tenancy, increase his social network and now feels that he is a valuable member of the community, whereas prior to support he felt that he was not valued as a person and had limited contact with the community.*

*The support has enabled him to set up a manageable budget plan which ensures that he is able to pay household bills on time and also have a personal budget for food shopping and leisure activities.*

*Support has also enabled him to widen his social network and feel more a part of society. He regularly visits places on foot and gets daily exercise in doing so. He now attends dental and doctor's appointments to maintain his health with minimal support. He is also learning how to access public transport safely.*

**Prevention: Estimated costs saved through SP preventive measures:**

**Crime: Offending £39,472 per person per year**

**Social Services: Residential Care - £1,374 average cost per person per week**

# Priorities for Development

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The Supporting People Programme is a wide ranging programme which cuts across many local and regional service boards. When developing the Regional Strategic Plan, Mid and West Wales RCC considers the region's geographic and ethnographic characteristics, key national, regional and local legislations and policies, assessments, i.e. population and well-being assessments and WIMD, outcomes report analysis, and ultimately the Local Planning Priorities.

Through the work of the RCC task and finish group and the consultation process, four strategic themes have been identified as priority areas for the region over next three years. The four priorities identified are:

- 1. Driving service improvement – quality and value for money;**
- 2. Joint commissioning;**
- 3. Partnership working and prevention; and**
- 4. Engagement and service user involvement.**

The RCC also reflects back on the previous year's priorities, whether the priorities are still relevant and the progress made against them. To reflect the changes and progress in the priorities over the years, the Regional Commissioning Plan 2016/19 is attached in Appendix 2 of this document.

The following section highlights the development of the Regional Commissioning Plan 2017/2020, priorities, and progress made by all areas and the region as a whole.

# Priorities for Development: Action Plan

Strategic Theme 1.				
Driving Service Improvement – Quality and Value for Money				
Objective	Action	Outcome Focused Targets (continually being developed)	Milestones & Target Dates	Responsible Person
1 Strategic approach to commissioning services that are value for money and relevant now and in the long term	<ul style="list-style-type: none"> <li>Regional programme of strategic reviews to be carried out thematically. Time table of reviews to be established. RCC to have sight of timetable.</li> </ul>	Thematic reviews to be undertaken regionally to align services that meet the needs of people now and in the future and to achieve efficiencies. Time table of reviews to be established.	Timetable was shared with RCC in <b>March 2017</b>	SP Teams/ RDC
	<ul style="list-style-type: none"> <li>A common prioritisation toolkit has been developed to assess strategic relevance and prioritisation of services. Toolkit has been shared with colleagues in other regions as considered good practice (<b>February 2016</b>). Use of prioritisation toolkit to continue.</li> </ul>	All new service ideas to be taken through the local/regional prioritisation matrix prior to being commissioned. Focus is on services that prevent homelessness and escalation to more intense forms of support. Evidence to be provided to the RCC.	Evidence is provided at each quarterly RCC meeting <b>Ongoing</b>	SP Teams
2 Alignment with other Tackling Poverty Grant Programmes (TPP)	<ul style="list-style-type: none"> <li>Establish links with Families First Regional Learning Sets and local TPP teams to map activities and projects across themes to identify 'common ground' for future planning and joint working / joint commissioning both locally and regionally.</li> </ul>	Improved coordination and integration of services. Reduced duplication of service and funding streams. Maximise resources.	Commenced <b>June 2016</b> <b>Ongoing</b>	SP Teams/ RDC
		Activities to be mapped by local authority teams and once completed, details to be amalgamated regionally to provide a picture of TPP service provision across mid and west Wales.	Mapping to be completed <b>Date to be determined</b>	
	<ul style="list-style-type: none"> <li>Develop pathways between and within services and programmes</li> </ul>	SP teams to monitor cross referrals and report to RDC/RCC working group.		SP teams

<p><b>3 SP teams to work together to reduce administrative burden, duplication of effort and improve efficiencies</b></p>	<p>ensuring that service users can access to the right support at the right time.</p> <ul style="list-style-type: none"> <li>• Explore innovative service ideas with Tackling Poverty partners to test, pilot ideas and learn. Learning to be shared with regional partners to inform and avoid replication.</li> <li>• A bi-county mapping exercise of SP staff, functions, costs and administrative activities to be carried out in Carmarthenshire &amp; Pembrokeshire.</li> <li>• Regional system of monitoring and capturing outcomes utilising a common online data collection tool, SNAP. In use across the region since <b>April 2016</b>.</li> <li>• Decision on regional coordination to be made by April 2017.</li> </ul>	<p>Deliver value for money on quality and cost. More integrated services meeting the holistic needs of service users. Pembrokeshire SP and Families First teams propose to jointly undertake a pilot which, utilising the Team around the Family model, will potentially better integrate the services.</p> <p>Maximise use of limited administrative resources. A report on the feasibility of joining Pembrokeshire and Carmarthenshire commissioning teams is due <b>March 2017</b>. If approved SP in Pembrokeshire and Carmarthenshire will become one team.</p> <p>Regional consistency; enabling comparison to be made in the achievement of outcomes; better quality information on which to make informed decisions.</p> <p>Outcomes data to be used in the development of local and regional strategic plans.</p> <p>Outcomes reporting to be co-ordinated on a bi-county or regional basis. Agreement on regional reporting to be made by <b>April 2017</b>.</p>	<p>Pembrokeshire SP team to take the lead in this area through their proposed pilot. RCC was updated regularly of progress. Commenced in April 2017 Ongoing</p> <p><b>March 2017</b></p> <p>Commenced <b>April 2016</b> Ongoing</p> <p>Bi county coordination of outcomes reporting commencing <b>December 2016</b>. Decision for regional co-ordination was agreed Snap template amendment to record outcomes from Carmarthenshire, Ceredigion and Pembrokeshire Rolled out in January</p>	<p>Pembs SP Team</p> <p>Carms / Pembs SP Teams</p> <p>SP Teams / RDC</p> <p>SP Teams</p> <p>RCC Working Group / RDC</p>
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<p><b>4 Development of a common referral pathway which acts as a gateway into SP services.</b></p>	<ul style="list-style-type: none"> <li>Regional consistency in application of Management Charges. RCC working group to develop regional policy on management charges in consultation with stakeholders.</li> <li>Regional/sub-regional referral gateway for SP services to be considered and agreed by the RCC. Requirements of the gateway is that it is flexible, easy for people to access, able to take self-referrals and is preventative. Design of potential gateway to include a process of measuring impact (pre and post implementation).</li> </ul>	<p>Increased consistency and clarity for all stakeholders. RDC to work with RCC task and finish group to develop options paper for RCC to consider and agree way forward. Improved process of financial monitoring.</p> <p>Better coordinated services which are flexible and accessible for people who are in need. Access the support they need when they need it. Paper to be presented to the RCC for discussion and agreement.</p> <p>Links to be established with Information, Advice and Assistance services and other partners and stakeholders to explore connections and cross referrals.</p>	<p>Commenced in March 2017 Ongoing Final agreement required from service providers</p> <p>Paper was presented at the <b>June 2017</b> RCC meeting <b>Ongoing</b></p> <p>March 2017</p>	<p>RCC Task and Finish Group/RDC</p> <p>Carms SP team</p>
<p><b>5 Develop a robust monitoring mechanism to measure the effectiveness of commissioned services. The monitoring tool will be person centred and will evidence the individual's journey and impact of the support.</b></p>	<ul style="list-style-type: none"> <li>Workshop to be arranged detailing good examples and options. RCC to consider and agree next steps to take forward.</li> <li>Engage with service users via the scheduled 'Regional Involvement' Event and existing local fora to ensure the outcomes measured is what is important to people.</li> <li>Undertake pilot to test person-centred monitoring tool and establish timescale and process of implementation.</li> </ul>	<p>Streamlined referral process which improves the experience of the individual being referred. Service users to be involved in the way their journey will be recorded.</p> <p>More robust evidence base from which to gain a greater understanding of the impact of SP services, people's journey and the outcomes that people want to achieve. A tool for the individual service user to use for their own development and progression. Better quality of data to inform decision making.</p> <p>Detailed actions/milestones to be determined</p>	<p>Service users involvement workshop delivered in March 2017</p> <p>Initial Involvement event was held in <b>March 2017</b></p> <p><b>To be determined (TBD)</b></p>	<p>RCC working group / RDC</p> <p>Support Providers/ RDC involvement group</p> <p>Identification of a Lead to be determined</p>

**Strategic Theme 2.**

**Joint Commissioning**

Objective	Actions	Outcomes focused Targets	Target Date	Responsible Person
<p><b>1 Extend the locality based model of support across the region; sharing the learning and findings.</b></p>	<ul style="list-style-type: none"> <li>Continued implementation and monitoring of the locality based generic support in Powys and Carmarthenshire.</li> <li>A six month locality pilot project to be undertaken in Pembrokeshire. Evaluation findings from the Pembrokeshire pilot to inform future service delivery.</li> <li>Establish a RCC working group to measure the impact of the locality model by way of benchmarking locality provision against previous client based delivery model.</li> <li>A review of floating support services to be undertaken in Ceredigion with a view to move toward a more generic support delivery model.</li> </ul>	<p>A more flexible, responsive delivery model able to respond to the needs of vulnerable people. Prevent problems from becoming critical and escalating to more intense services.</p> <p>Implementation and evaluation of the locality delivery pilot to commence April 2017. Findings to be shared regionally.</p> <p>Pre and post implementation of the locality model to be assessed to provide robust evidence of change /improvement in capacity, effectiveness and value for money.</p> <p>Review of floating support services to commence April 2017. Findings and experiences gained in other local authorities to be used to inform design of future provision.</p>	<p>Ongoing</p> <p>Pilot commenced in April 2017</p> <p>Initial assessment completed by Oct 2017 Full evaluation still to be completed</p> <p>April 2017</p>	<p>Local SP Teams</p> <p>Pembs Team</p> <p>RCC working group led by Powys/Carms SP tead officers</p> <p>Ceredigion SP Team</p>
<p><b>2 Extend the locality based model to all client groups including victims of domestic abuse, sensory impairments, LD, ex-offenders</b></p>	<ul style="list-style-type: none"> <li>Examine, test and review the delivery of specialist services (not currently included in the locality model) to understand the generic/specialist element of support.</li> </ul>	<p>Powys and Carmarthenshire to review and re-design LD services to better meet individual need. Greater understanding of the specialist elements of support. In Powys service models for LD services are being tested to develop a flexible mix of generic/specialist floating support.</p>	<p>Reviews of Carmarthenshire LD services completed Support packages reviewed and agreed and new model of delivery implemented In Carmarthenshire, new service specialist delivery</p>	<p>Powys &amp; Carms Teams</p>

<p><b>3 Work with partners to deliver coordinated cross border and rural housing related support</b></p>	<ul style="list-style-type: none"> <li>• Map current service provision, people and providers, in border areas across each local authority to identify need and supply.</li> <li>• Commissioning teams to work with partnership agencies and people who use SP service to test and review different models of service delivery in cross border and rural areas e.g. mobile libraries in Powys.</li> </ul>	<p>Findings to be shared with RCC and partner agencies.</p> <p>A more co-ordinated, flexible response service in rural and border areas. Better coordinated provision and potential to expand delivering to more isolated areas.</p> <p>Maximise resources and increase value for money.</p> <p>Gain efficiencies through economies of scale by delivering across borders.</p> <p>Increase access.</p> <p>Based on findings to share the learning with the view to implement cross border and rural delivery model(s).</p>	<p>model to be implemented from April 2018</p> <p>Not started; new date to be determined</p> <p>TBD</p>	<p>RDC</p> <p>Powys team/ RDC to lead</p>
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**Strategic Theme 3.**

**Partnership Working and Prevention**

Objective	Actions	Outcomes focussed Targets	Dates	Responsible Person
<p><b>1 Align budgets to commission services both across counties and jointly with partner organisations. There will be a strong emphasis on linking with partners to identify opportunities for collaborative commissioning.</b></p>	<ul style="list-style-type: none"> <li>• Review current contracting information across the four local authorities to establish existing contract end dates and current work areas for joint working and joint commissioning.</li> <li>• Scoping exercise of local SP priorities and partner agencies' priorities to identify commonalities and cross partner commissioning opportunities (<b>Appendix 1.</b>)</li> </ul>	<p>Reduce duplication of effort and services.</p> <p>Better coordinated more integrated services which respond to the changing needs of people.</p> <p>Mapping of existing contract end dates completed <b>November 2016.</b></p> <p>To achieve better alignment, more co-ordinated services.</p> <p>Identify gaps in service.</p> <p>Align resources to jointly commission and procure services.</p>	<p>Review completed October 2016.</p> <p>Ongoing meeting cycle to progress work.</p> <p>Commenced December 2016</p> <p>Joint commissioning of services to commence in April 2018</p>	<p>RDC / working group</p> <p>RCC working group/RDC</p>

<p><b>2 RCC to endorse the trial and testing of new, innovative models of delivery with providers and services users to transform SP services. Trials to be funded jointly.</b></p>	<ul style="list-style-type: none"> <li>• Forge links with partners in statutory services and partnership boards in health, substance misuse and community safety to map funding streams by client groups. Initial focus will be on young people services, young offenders, people with alcohol &amp; substance misuse issues) to understand who is delivering what to whom.</li> <li>• Joint commissioning to commence with a review of supported accommodation alcohol and substance misuse SP services on a sub-regional basis.</li> <li>• RCC to consider and agree a range of research pilot projects to trial creative, flexible delivery models which are preventative and enable providers to better respond to demand. Findings from pilots to be disseminated to partner organisations.</li> <li>• Pilot project which explores a flexible delivery model combining elements of care and SP support to older people and people with learning disabilities.</li> </ul>	<p>Improve liaison, coordination and integration of services to meet the holistic needs of individuals. More effective multi-agency collaboration. Reduction in duplication of provision and funding. To explore the potential of jointly commissioning and procuring of services. Improved coordination and integration of services.</p> <p>Work on a bi-county (possibly tri county) basis to align accommodation based services for people with substance misuse issues. Increased awareness and learning of effectiveness of different service models.</p> <p>Flexible innovative services better able to respond to demand. Pre and post pilot measure to be taken. Learning and best practice shared with partners across the region and wider.</p> <p>Pilot project being developed by Provider and Powys SP team. Aims to develop a flexible combination of care support and floating support to meet the changing needs of people using two funding streams. To share the learning and best practice across the region and wider.</p>	<p>Commenced December 2016 Ongoing</p> <p>Work to commence January 2017 with aim to commission on a sub-regional basis April 2018.</p> <p>To be determined</p> <p>January 2018</p>	<p>RCC working group/RDC</p> <p>Pembs/Carms SP Teams Ceredigion SP Team</p> <p>TBD</p> <p>Powys SP Team &amp; Provider(s)</p>
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<p><b>3 Working with regional stakeholders to develop future direction and prevention of domestic abuse, sexual violence and other forms of gender based sexual violence</b></p>	<ul style="list-style-type: none"> <li>• Pilot project which transforms the services for people with mental health issues using a multi-agency partnership approach (social care statutory services, 3rd sector, housing and possibly health).</li> <li>• Continued RCC involvement with the Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV) partnership to jointly shape decisions relating to the proposed regional approach to commissioning DA services.</li> <li>• Remodelling services for Victims of Domestic Abuse provision is in abeyance in West Wales due to a proposed regional funding model which would facilitate the commissioning of services through an informal pooling of DA budgets. In Powys reviews of DA services are underway to meet the aims of the Act.</li> </ul>	<p>Redesign existing mental health service to understand how specialist support interrelates with locality (floating support) services.</p> <p>Innovative pilot projects to be collated and other examples of collaborative working to be promoted at a Regional Best Practice Event.</p> <p>Meet the requirements of VAWDASV legislation More coordinated and integrated service provision. Achieve value for money.</p> <p>In Abeyance in West Wales.</p> <p>Implementation of Powys' Domestic Abuse strategy to meet the aims and requirements of the Act.</p>	<p>Commenced November 2016 Ongoing</p> <p>TBD</p> <p>April 2017 Ongoing</p> <p>In Abeyance</p> <p>Re-tendering Completed 31<sup>st</sup> March 2017 Regional strategy to be published in February 2018 New services to be commissioned in April 2018</p>	<p>Powys SP Team &amp; Provider(s) RDC</p> <p>RCC Representative</p> <p>TBD</p> <p>Powys SP team</p>
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**Strategic Theme 4. Engagement and Service User Involvement**

Objectives	Actions	Outcome focussed Target	Target Date	Responsible Person
<p><b>1 Engage with service users to inform future planning and commissioning decisions.</b></p>	<ul style="list-style-type: none"> <li>• Formation of a RCC regional involvement group to develop a key set of involvement principles</li> </ul>	<p>To facilitate service user involvement which ultimately will lead to better quality support for people who use SP services.</p>	<p>Commenced September 2016 Ongoing</p>	<p>RDC/Service Providers</p>

<p><b>2 Community engagement through existing networks and fora.</b></p> <p><b>3 Continued effective engagement with Service Providers, Service Users and other Stakeholders to drive service development.</b></p>	<p>for regional involvement. <b>Completed November 2016.</b></p> <ul style="list-style-type: none"> <li>Continued engagement with services users through existing networks. Regional Service User Involvement Framework revisited.</li> <li>Service User involvement and participation at the RCC. Involvement may take the form a service user sub-committee.</li> </ul>	<p>Better quality decisions that reflects the views of the people who use the services.</p> <p>Regional Involvement Event to relaunch Service User Involvement Framework and to engage with service users.</p> <p>Increased commitment and ownership which leads to increased chance of success. Furthering independence and development of skills and confidence of service users participating in the process.</p> <p>Help achieve quality services which best meet the needs of those using the service. Service users have a right to be involved in the decisions that affect them</p>	<p>Event took place in March 2017 Sub regional events planned for 2018</p> <p>TBD</p>	<p>RDC/Service Providers</p> <p>TBD</p>
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## Mid and West RCC Spend Plan 2018 - 19

Regional Collaborative Committee:			Mid & West															
SPPG Annual Allocation:			17,295,601.00															
Client Spend Category (The category to which the service is primarily focused)	Previous year Total units from spend plan	Previous year Total cost from spend plan	Service Type												Local Authority contribution	Other Income	Total Units (exc LA cont)	Total (exc LA cont)
			Fixed Site (Accommodation Based)						Floating (Community Based)									
			Client Units	Less than 6 Months	Client Units	6 to 24 Months	Client Units	24 Months plus	Client Units	Less than 6 Months	Client Units	6 to 24 Months	Client Units	24 Months plus				
Numbers	£	Numbers	£	Numbers	£	Numbers	£	Numbers	£	Numbers	£	Numbers	£	£	£	Numbers	£	
Women experiencing Domestic Abuse	250	1,621,603.02	43	701,866.02	20	130,952.00	0	0.00	0	0.00	203	788,785.00	0	0.00	0.00		266	1,621,603.02
Men experiencing Domestic Abuse	6	55,522.00	4	29,947.00	0	0.00	0	0.00	0	0.00	2	25,575.00	0	0.00	0.00		6	55,522.00
People with Learning Disabilities	435	5,536,040.86	0	0.00	6	65,772.00	412	5,487,671.83	0	0.00	27	140,000.00	0	0.00	0.00		445	5,693,443.83
People with Mental health Issues	332	1,643,076.74	0	0.00	38	295,089.11	28	226,918.43	10	42,747.92	134	445,859.35	113	456,505.73	0.00		323	1,466,920.54
People with Substance Misuse Issues (Alcohol)	38	231,152.00	6	145,768.00	2	20,000.00	0	0.00	0	0.00	35	65,384.00	0	0.00	0.00		43	231,152.00
People with Substance Misuse Issues (Drugs and Volatile substances)	46	326,413.00	0	0.00	7	138,677.60	0	0.00	0	0.00	44	138,433.00	0	0.00	0.00		51	277,110.60
People with Criminal Offending History	205	863,079.59	11	74,282.00	39	377,288.00	0	0.00	55	119,966.00	100	291,544.00	0	0.00	0.00		205	863,080.00
People with Refugee Status	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0.00		0	0.00
People with Physical and/or Sensory Disabilities	47	133,418.27	0	0.00	0	0.00	2	21,392.16	0	0.00	28	77,489.00	17	45,601.00	0.00		47	144,482.16
People with Developmental Disorders (i.e. Autism)	4	11,768.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4	11,768.00	0.00		4	11,768.00
People with Chronic Illnesses (including HIV, Aids)	44	80,844.60	0	0.00	0	0.00	0	0.00	12	34,568.00	26	43,300.00	3	7,355.00	0.00		41	85,223.00
Young People who are Care Leavers	12	169,733.39	0	0.00	12	169,733.00	0	0.00	0	0.00	0	0.00	0	0.00	0.00		12	169,733.00
Young People with Support Needs (16-24)	234	1,552,415.32	24	147,688.87	96	1,179,630.00	0	0.00	32	97,167.95	82	163,479.00	17	52,139.00	0.00		251	1,640,104.82
Single parent Families with Support needs	8	23,536.00	0	0.00	0	0.00	0	0.00	3	9,650.00	5	13,886.00	0	0.00	0.00		8	23,536.00
Families with Support Needs	82	298,010.20	14	80,591.00	5	52,000.00	0	0.00	3	9,046.00	112	285,356.00	0	0.00	0.00		134	426,993.00
Single people with Support Needs not listed above (25-54)	6	16,181.00	0	0.00	0	0.00	0	0.00	3	6,634.00	2	5,987.00	1	3,560.00	0.00		6	16,181.00
People over 55 years of age with Support needs (this category must be exclusive of alarm services).	1548	758,209.90	0	0.00	42	43,859.00	1447	587,225.64	0	0.00	19	21,459.00	286	167,316.00	0.00		1794	819,659.64
Generic Floating support to prevent homelessness (tenancy support services which cover a range of user needs but which must be exclusive of fixed site support)	1225	2,812,292.00	0	0.00	0	0.00	0	0.00	422	585,265.71	613	1,993,349.61	1,885	449,475.03	0.00		2,920	3,028,090.35
Alarm Services (including in sheltered/extra)	3,613	533,101.98	0	0.00	0	0.00	1,445	106,099.00	0	0.00	0	0.00	2,276	426,868.00	0.00		3,721	532,967.00
Expenditure which does not directly link to the spend plan categories above. (Explanation required in accompanying email).	231	629,202.95	28	30,889.95	0	0.00	0	0.00	0	0.00	1	10,000.00	201	147,141.00	0.00		230	188,030.95
<b>TOTALS</b>	<b>8,366</b>	<b>17,295,600.82</b>	<b>130</b>	<b>1,211,032.84</b>	<b>267</b>	<b>2,472,800.71</b>	<b>3,334</b>	<b>6,429,307.06</b>	<b>540</b>	<b>905,045.58</b>	<b>1,433</b>	<b>4,509,685.96</b>	<b>4,803</b>	<b>1,767,728.76</b>	<b>0.00</b>	<b>0.00</b>	<b>10,507</b>	<b>17,295,600.91</b>

## Appendix 1

### LOCAL PLANNING PRIORITIES for 2017 to 2020

CA = Carmarthenshire

CE = Ceredigion

PE = Pembrokeshire

PO = Powys

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
CA	1. Evaluation of the 'Shared Lives' Project	Learning Disabilities	Evaluation of the Shared Lives service delivered by Adult Placement colleagues in Carmarthenshire. Findings will be used to inform future commissioning position.	Oct 2016	
	2. Implementation of Locality based Floating Support for vulnerable adults including extending model to specialist services (Phase 2)	Victims of Domestic Abuse People with Sensory Impairments People with Criminal Offending history	Continue with the implementation of the newly commissioned locality based floating support service.  Evaluate speciality services, namely Domestic Abuse, People with Sensory Impairments and People with a history of Criminal Offending to understand the specialist/generic elements of support and inform the remodelling of these services.	Oct 2016	<ul style="list-style-type: none"> <li>• SP Team evaluated existing services and options paper was presented to SPPG in July 2017;</li> <li>• Completed the new model for the delivery of DA services and agreed with Pembrokeshire to re-tender services on a bi-country basis following the publication of the regional VAWDASW strategy in January 2018;</li> <li>• Held consultarion meetings with existing providers and arranged Market Management events with service providers and users;</li> <li>• Joint service specification to be agreed to replace the old and as part of the procurement process once regional VAWDASW strategy is published;</li> <li>• Completed Buisness Case for re-tender of services; and</li> <li>• Completed Equality Impact Assessment.</li> </ul>

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
	3. Joint commissioning with Pembrokeshire SP team, particularly in the area of supported accommodation services	People with Criminal Offending history People with Alcohol and Substance Misuse issues Young People Services including short term supported accommodation	Alignment of supported accommodation services with a view to jointly commission services.	Apr 2018	<p><b>Re-offender</b></p> <ul style="list-style-type: none"> <li>Completed and presented proposal paper detailing new model for the delivery of re-offender services to SPPG in December</li> <li>Currently uses data from Housing, CRC, service reviews and SP outcomes to inform proposed new model</li> <li>Established links with National Probation Service and CRC by attending Integrated Offender Management steering group meetings</li> <li>Completed Contract Review meetings</li> <li>Held engagement event in Pembrokeshire, next engagement event is arranged in January 2018</li> </ul> <p><b>Young People</b></p> <ul style="list-style-type: none"> <li>Held tender exercise of the proposed area-based 'supported lodging plus' and intensive floating support service model</li> <li>Completed the new service specification and required tender documentation (currently with translation services)</li> <li>New pilot to commence in April 2018</li> <li>Established a working group to consider the impact of the service model on existing services and to determine future commissioning options</li> </ul> <p><b>Substance Abuse</b></p> <ul style="list-style-type: none"> <li>Presented Option Paper in SPPG meeting in December</li> </ul>

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
					<ul style="list-style-type: none"> <li>Reviewed existing supported housing project and is continuing to discuss options for remodelling of substance misuse services with partners</li> <li>Reviewed substance misuse services and demand to inform future commissioning decision</li> </ul>
	4. Single SP Referral Gateway	All client groups	<p>Development of a Single Gateway into SP. Gateway is to include evidence of eligibility. Further considerations are:</p> <ol style="list-style-type: none"> <li>Use SPURS online gateway</li> <li>Use Dewis and/or other online gateways</li> <li>Use Pathway officers (staffed gateway)</li> <li>Local and /or regional gateway</li> <li>Linked in with Community connectors/hubs.</li> </ol>	Commence Apr 2017	Gateway to be piloted as from 1 <sup>st</sup> February 2018
CE	1. Locality Based Generic provision Vulnerable Adults (Generic)	Vulnerable Adults – all client groups	<p>Consideration to be given to commission housing related support services in Ceredigion based on the Locality model. Evidence from other SP teams in the region has shown the locality model (based on geographical footprint) to be a more efficient and effective service model which delivers services people need, when they need it to live successfully.</p>	Early 2017	Ongoing

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
	2. Progressing older people services with support needs	Older People	Transition to tenure neutral services for older people. Progress is reported to the RCC at quarterly meetings.	Ongoing	Ongoing
	3. Prevention and early intervention approach to people who are homeless or at risk of homelessness in line with the Housing Wales Act 2014	All client groups	Review of homelessness services to inform future commissioning.		Ongoing and to be completed in early 2018
	4. People affected by Domestic Abuse	People affected by Domestic Abuse	Evaluation of domestic abuse services for fixed and floating support. Ascertain strategic relevance of current services.		Ongoing and is to be completed in mid 2018
PE	1. Alignment and Potential Joint Commissioning within the Tackling Poverty Agenda	All client groups	<p>An analysis of service provision of the Tackling Poverty grants to identify overlap and duplication of activities and achieve greater integration of services. The aim of the alignment is to ensure resources are used efficiently and effectively.</p> <p>There is the potential to pool resources and jointly commission services.</p>		<ul style="list-style-type: none"> <li>The 6 month pilot service commenced in February .</li> </ul> <p><b>The Pilot</b></p> <ul style="list-style-type: none"> <li>A support worker (SW) from Gwalia has been allocated in the Flying Start Centre in Pembroke Dock every Wednesday, no increase in cost and supporting hours attached ;</li> <li>Working collaboratively with the TAF team, SW delivered a total of 31 days across the 6 month period, supporting 29 customers.</li> </ul>

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
					<ul style="list-style-type: none"> <li>In comparison to the previous working practice, the new model could potentially support increased customer numbers, if the worker was based in the centre more regularly.</li> <li>The co-location and joint delivery of services correctly identify and improve services which in the long run is more cost effective.</li> </ul>
	2. Piloting a Locality Based model of Housing Related Support (prevention of homelessness) linked with the Community based Preventions model	All client groups	To deliver community based housing related floating support based on geographical areas. This will enable local people to access the kind of support they feel they need, in their own community at any particular time. It is anticipated through remodelling services, people will receive a more person-centred, efficient and effective service.	2017	<ul style="list-style-type: none"> <li>The Rural Pilot was delivered from 01 April to 27 October 2017, Monday through Friday, supporting 21 customers in total.</li> <li>A significant amount of time was targeted at the promotion and awareness of SPP within the community and potential stakeholders during the project conception.</li> <li>Referrals - 43% self referral or walk-in support and 57% referrals from stakeholders.</li> <li>Feedback from service provider – there was limited knowledge around SP of third sector organisations.</li> </ul>
	3. Joint commissioning with Carmarthenshire SP team, particularly in the area of supported accommodation services	People with Alcohol and Substance Misuse Issues People with a Criminal Offending history Young People Services	Alignment of supported accommodation services with a view to jointly commission services.  It aims to engage throughout with SUs, SPs and other stakeholders to ensure ownership and the best choice for the people of Pembrokeshire.		<ul style="list-style-type: none"> <li>SP Teams reviewed contracting information to establish contract end dates and work areas, identified services for joint commissioning; and identified connections between programmes to achieve better alignment of resources.</li> <li>Outcomes of joint commissioning approach include reduced duplication of effort and services, better communication,</li> </ul>

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
		including short accommodation services			<p>coordination, and integration of services which means better use of resources.</p> <ul style="list-style-type: none"> <li>• Discussion with partner organisations is ongoing</li> <li>• Contract information across four LAs in Mid and West Wales was collated. The mapping exercise highlighted opportunities for joint working and joint commissioning, including services in supported accommodation for people with alcohol and substance misuse issues and criminal offending history.</li> </ul>
PO	1. Re-tender Domestic Abuse housing related support	Men and Women experiencing Domestic Abuse	Implementation of Powys' Domestic Abuse strategy recently developed to meet the aims, objectives and requirements of the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015.	Complete by March 2018	<p>Powys developed and agreed to remodel service provisions. Proposals for service development, decommissioning and remodelling have been discussed agreed at the SPMB. In terms of service development, SP has undertaken/achieved the ff:</p>
	2. Reconfigure current homelessness and older people services. Emphasis will be placed on Prevention and Early Intervention	All client Groups Older People Services	Reconfigure, commission and procure locality-based provision, supported by specialist housing related support. This will be evidence based with support agencies providing the right support at the right time to meet demand. Increased capacity to extend support to more localities is expected.		<ul style="list-style-type: none"> <li>• Established collaborative locality-based housing related support in 7 localities; by September 2017, a total of 3,331 people were supported ;</li> <li>• Established demand led housing related support in new localities where it is needed; experimental hub has been set up in the Library in Llanfyllin;</li> <li>• Reviewed and established service development and remodelling specialist services to support locality and to meet</li> </ul>
	3. Review of supported living services	Learning Disabilities	To continue the process of review for supported living services for people with learning disabilities. The recent		

	Local Planning Priorities	Client Group	Brief Description	Timeline if known	2018 update
			retendering of provision is likely not to produce the savings necessary for costs to stay within reduced budget allocation. Therefore the current research & development methodology will be used to assess the capability of current model to meet the needs of people, to improve effectiveness for people at less cost.		<p>demand as required – priorities have been focused on mental health, domestic abuse, sensory disability, young people and learning disability; review is ongoing for people with LAs;</p> <ul style="list-style-type: none"> <li>• Improved the capability of response to mental health issues, through the experimentation with MH and supported housing agencies;</li> </ul>
	4. Continue a process of testing and reviewing delivery models to inform a new model of housing related support for people with Learning Disabilities	Learning Disabilities	SP team will test the developed approach, locality model and specialist housing related support, in collaboration with one/two provider agencies and colleagues in Adult Social Care Services. Findings will inform the development of any new model of housing related support.		<ul style="list-style-type: none"> <li>• Improved the capability of response to deaf and blind people through the experimentation with Sense Cymru;</li> <li>• Improved the capability of response young people through experimentation with Youth and Children Services;</li> <li>• Established the supported housing system as a method for solving problems – no findings as yet;</li> <li>• Worked with Gwalia Care and Support to implement the Powys element of the regional innovation project for support in rural areas and to scope the potential for change across the Mid and West Region; and</li> <li>• Produced detailed data analysis for the development of the local commissioning plan to provide further evidence on needs, supply and service gaps and the dynamic relationship between them.</li> </ul>
	5. Improved Partnership Working across the region		Working with members of the RCC, colleagues in Supporting People teams and 3 <sup>rd</sup> sector colleagues to carry out the priorities set out in the Regional Commissioning Plan, including the delivery of cross – boundary housing related support, particularly in such areas as Bro Dyfi and the upper Swansea valley.	Ongoing	

## Appendix 2: Mid and West Wales Regional Strategic Plan 2016/19

2016/19 Regional Priorities	Progress Update against each priority area
<p><b>1. To meet the challenges of budgetary pressures on the delivery of the SP programme by undertaking a regional collaborative approach</b></p> <ul style="list-style-type: none"> <li>• Taking a strategic approach to managing budgetary pressures now, and in future years, so that any reductions will have the least amount of impact for service users. A regional strategy will be developed to manage future budgetary reductions</li> <li>• Better quality information and evidence on which to base commissioning decisions</li> <li>• Deliver value for money</li> </ul>	<p><b>Status – working towards</b></p> <ul style="list-style-type: none"> <li>• During the latter part of 2016, SP officers agreed to the development of a regional programme of strategic reviews to assess which services are most relevant and have the greatest impact whilst decommissioning or remodelling services that do not. A timetable of reviews is in development with implementation commencing the early part of 2017. The strategic reviews timetable will be presented to the RCC for agreement and input</li> <li>• A regional toolkit is in use to aid in the prioritisation of services</li> </ul>
<p><b>2. Developing Cross Border working initiatives and joint standards in mid and west Wales</b></p> <ul style="list-style-type: none"> <li>• Continue rollout of the locality based model of support across the region recognising the model will be tailored to meet the needs of individual communities</li> <li>• Developing a model for cross border service delivery</li> </ul>	<p><b>Status – working towards</b></p> <ul style="list-style-type: none"> <li>• The locality model is now at various stages of development in all four local authority areas and will continue to be developed throughout 2017. Work is underway to appreciate the generic/specialist elements of floating support with the view to remodel specialist services if needed</li> <li>• The development of cross border service delivery models will continue throughout 2017</li> </ul>
<p><b>3. To improve the strategic planning process of SP Programmes across mid and west Wales</b></p> <ul style="list-style-type: none"> <li>• The mid and west Wales RCC to map local authority priorities and commissioning strategies, to identify regional opportunities, and add clarity to the regional position of strategic commissioning</li> <li>• Identify common priorities and opportunities for joint commissioning of services across counties and with partners organisations.</li> </ul>	<p><b>Status – working towards</b></p> <ul style="list-style-type: none"> <li>• Mapping exercise has been completed and opportunities for working together to jointly commission services and potentially aligning budgets have been identified</li> <li>• Carmarthenshire and Pembrokeshire are aligning supported accommodation project contracts with the view to jointly commission these services in the future on a bi county or tri county (with Ceredigion) basis.</li> <li>• The RCC continues to work with its community safety partners to develop a regional response to Target Hardening. At the end of the 2015/16 financial year capital funding was made available to purchase target hardening equipment on behalf of the region to help prevent homelessness and allow victims of domestic abuse to remain/return to their own home. A supply of target hardening equipment, namely mobile alarms, have now been purchased and allocated to service providers for their clients' use.</li> </ul>

<ul style="list-style-type: none"> <li>• Scope the feasibility of joint (virtual) commissioning teams at a regional or sub regional level</li> </ul>	<ul style="list-style-type: none"> <li>• Scoping of administrative functions, which was started in 2016 continues with a report assessing the feasibility of joining Carmarthenshire and Pembrokeshire commissioning teams due to be completed by March 2017</li> <li>• Consistent methodology for collecting outcomes has been implemented across the regional with all four local authorities using the online collection tool SNAP.</li> </ul>
<p><b>4. Preparation for, engagement with and understanding of the impact of upcoming Act/Bills on vulnerable people living in mid and west Wales</b></p>	<p><b>Status – Achieved</b></p> <p>Throughout 2016 RCC quarterly meeting consisted of themed agendas which assisted RCC members in their understanding of the impact of upcoming bills. Themed agendas will continue in 2017</p>
<p><b>5. Progressing Older People Services to deliver services which are Tenure Neutral</b></p>	<p><b>Status – working towards</b></p> <ul style="list-style-type: none"> <li>• Periodic updates are provided to the RCC to inform the progress made to implement the recommendations contained in the Aylward Review 2010. Each local authority continues to move to a position of tenure neutral services for older people although each local authority is at a different stage in the process. In Powys 80% of their services for older people are tenure neutral with only housing associations providing services that are otherwise.</li> <li>• Both Carmarthenshire and Pembrokeshire have reviewed their alarm services for older people. As a result Carmarthenshire has taken the view to fund alarm services solely on the basis of need and Pembrokeshire, as from March 2017, will no longer use SP funding to fund community alarm provision.</li> <li>• Ceredigion has worked with its providers of older persons services to develop and pilot tenure neutral solutions. As an example, Wales and West Housing deliver support to older people living in a range of tenures and provides core support within their sheltered housing. In addition, the Maes Mwldan Extracare service has successfully piloted an initiative to promote access to the facilities and support to older people living in the community.</li> <li>• The move toward generic, locality based services is replacing the provision of services based on a particular client group (e.g. Older People), and is thus in itself a move towards tenure neutrality. As a region there is the commitment to continue to progress the process of providing services that are tenure neutral and going forward only tenure neutral services are being commissioned.</li> </ul>