



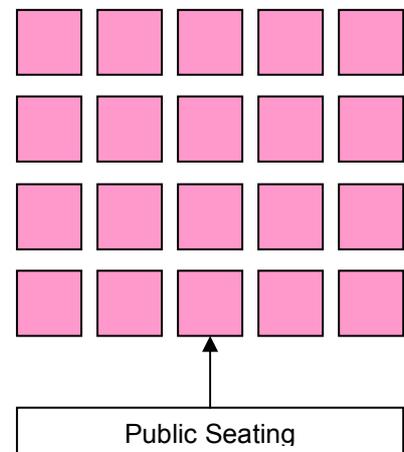
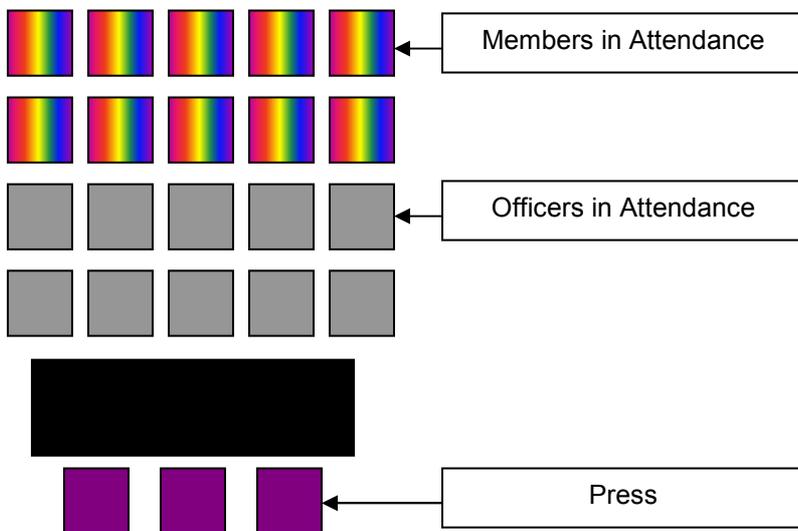
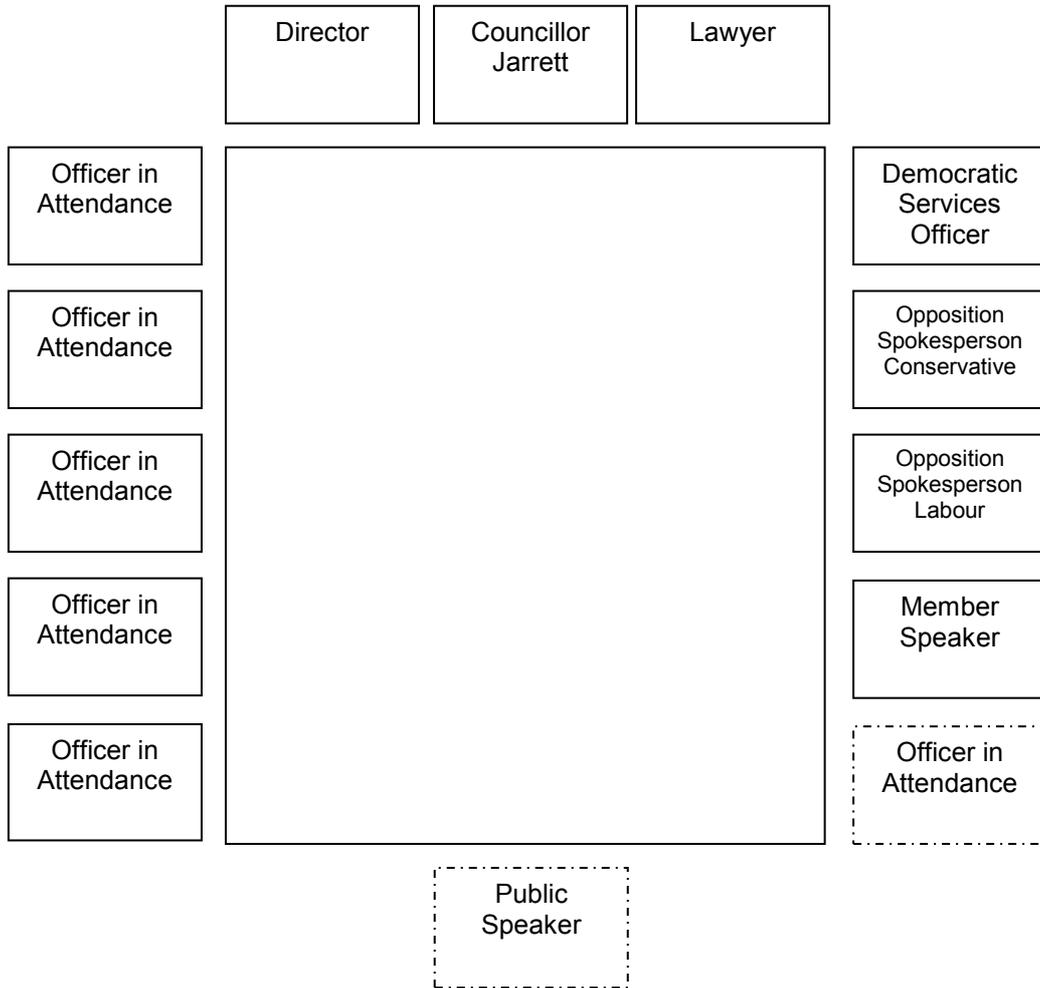
Brighton & Hove
City Council

Cabinet Member Meeting

Title:	Adult Social Care & Health Cabinet Member Meeting
Date:	17 October 2011
Time:	4.00pm
Venue	Committee Room 3, Hove Town Hall
Members:	Councillor: Jarrett (Cabinet Member)
Contact:	Caroline De Marco Democratic Services Officer 01273 291063 caroline.demarco@brighton-hove.gov.uk

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Democratic Services: Meeting Layout



AGENDA

14. PROCEDURAL BUSINESS

- (a) Declarations of Interest by all Members present of any personal interests in matters on the agenda, the nature of any interest and whether the Members regard the interest as prejudicial under the terms of the Code of Conduct.
- (b) Exclusion of Press and Public - To consider whether, in view of the nature of the business to be transacted, or the nature of the proceedings, the press and public should be excluded from the meeting when any of the following items are under consideration.

NOTE: Any item appearing in Part 2 of the Agenda states in its heading either that it is confidential or the category under which the information disclosed in the report is exempt from disclosure and therefore not available to the public.

A list and description of the categories of exempt information is available for public inspection at Brighton and Hove Town Halls.

15. MINUTES OF THE PREVIOUS MEETING

1 - 6

Minutes of the Meeting held on 13 June 2011 (copy attached).

16. CABINET MEMBER'S COMMUNICATIONS

17. ITEMS RESERVED FOR DISCUSSION

- (a) Items reserved by the Cabinet Member
- (b) Items reserved by the Opposition Spokespersons
- (c) Items reserved by Members, with the agreement of the Cabinet Member.

NOTE: Public Questions, Written Questions from Councillors, Petitions, Deputations, Letters from Councillors and Notices of Motion will be reserved automatically.

18. PETITIONS

No petitions have been received by the date of publication.

19. PUBLIC QUESTIONS

(The closing date for receipt of public questions is 12 noon on 10 October 2011)

ADULT SOCIAL CARE & HEALTH CABINET MEMBER MEETING

No public questions have been received by the date of publication.

20. DEPUTATIONS

(The closing date for receipt of deputations is 12 noon on 10 October 2011)

No deputations have been received by the date of publication.

21. LETTERS FROM COUNCILLORS

No letters have been received.

22. WRITTEN QUESTIONS FROM COUNCILLORS

No written questions have been received.

23. NOTICES OF MOTIONS

No Notices of Motion have been received by the date of publication.

24. ACCOMMODATION AND SUPPORT PLAN FOR PEOPLE WITH LEARNING DISABILITIES 7 - 18

Report of Director of Adult Social Services/Lead Commissioner People (copy attached).

Contact Officer: Diana Bernhardt *Tel:* 29-2363

Ward Affected: All Wards

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

The closing date for receipt of public questions and deputations for the next meeting is 12 noon on the fifth working day before the meeting.

Agendas and minutes are published on the council's website www.brighton-hove.gov.uk. Agendas are available to view five working days prior to the meeting date.

Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

For further details and general enquiries about this meeting contact Caroline De Marco, (01273 291063, email caroline.demarco@brighton-hove.gov.uk) or email democratic.services@brighton-hove.gov.uk

Date of Publication - Friday, 7 October 2011

Adult Social Care & Health Cabinet Member Meeting

Agenda Item 15

Brighton & Hove City Council

BRIGHTON & HOVE CITY COUNCIL

ADULT SOCIAL CARE & HEALTH CABINET MEMBER MEETING

4.00pm 13 JUNE 2011

COMMITTEE ROOM 3, HOVE TOWN HALL

MINUTES

Present: Councillor Jarrett (Cabinet Member)

Also in attendance: Councillor Norman, apologies were received from Councillor Pissaridou

Officers present: Jane Simmons, Head of Commissioning & Partnerships; Brian Doughty , Head of Assessment Service; Sandra O'Brien, Senior Lawyer; Anne Silley, Head of Finance – Business Engagement; Jane MacDonald, Joint Commissioner Older People; Michelle Jenkins, Safeguarding Adults Manager; Penny Jennings, Democratic Services Officer.

Numbers of public present: (4)

PART ONE

1. PROCEDURAL BUSINESS

1(a) Declarations of Interests

1.1 There were none.

1(b) Exclusion of Press and Public

1.2 In accordance with section 100A of the Local Government Act 1972 ("the Act"), the Cabinet Member considered whether the press and public should be excluded from the meeting during an item of business on the grounds that it was likely, in view of the business to be transacted or the nature of the proceedings, that if members of the press and public were present during that item, there would be disclosure to them of confidential information (as defined in section 100A(3) of the Act) or exempt information (as defined in section 100I(1) of the Act).

1.3 **RESOLVED** - That the press and public be excluded from the meeting during consideration of Item 13.

2. MINUTES OF THE PREVIOUS MEETING

- 2.1 **RESOLVED** – That the minutes of the Adult Social Care & Health Cabinet Member Meeting held on 14 March 2011 be noted.

3. CABINET MEMBER'S COMMUNICATIONS

- 3.1 The Cabinet Member welcomed all who were present and commended the high quality work which had been achieved to date. A high calibre officer team was in place and he intended to build on the results which had been achieved to date. His guiding principle would be to seek to protect the services provided for vulnerable people in the city who fell within his portfolio.

Appointment of Permanent Head of Assessment Services

- 3.2 The Cabinet Member was happy to report that Mr Brian Doughty's role as Head of Assessment Services had recently been made permanent. He was deputising at the meeting in place of the Director of Adult, Social Care. Councillor Norman also wished to place on record his congratulations.

Carers Card

- 3.3 The Cabinet Member reported that a "Carer's Card" was due to be launched shortly, the card was designed for those who had caring responsibilities for adults. Discounts and other benefits would be available for card holders, these would include money off tickets to performances at the Theatre Royal, Komedia, Brighton Dome, discounted treatments at City College and concessionary rates on health and fitness memberships and other benefits. The official launch would take place at City College on at 10.00am on Wednesday 15 June. All Members were welcome to attend. Councillor Norman reported that unfortunately he would be unable to attend as he was required elsewhere on long standing Council business.

4. ITEMS RESERVED FOR DISCUSSION

- 4.1 **RESOLVED** – That all items be reserved for discussion.

5. PETITIONS

Petition – Safeguarding Carers' Funding

- 5.1 Mr John Kapp presented an e-Petition signed by 9 people as follows:

"We the undersigned call upon the Council to open up the public sector market to "Any Willing Provider" to allow complementary therapy centres to bid to provide National Institute for Clinical Excellence (Nice) – recommended complementary treatments."

- 5.2 The Cabinet Member explained that in a detailed response had been prepared for Mr Kapp in advance of the meeting and invited him to speak to his petition for a period not exceeding three minutes.

- 5.3 Mr Kapp referred to the service provided by a small start up company, a consortium of complementary therapists of which he was a Member. Mr Kapp was advised that it was not appropriate for him to give what in effect amounted to an advertisement for a private commercial enterprise.
- 5.4 It was explained this matter did not fall within the responsibilities of the Council. The Government had been undertaking a further listening exercise regarding the NHS and how health services would be both delivered and commissioned. This would have an impact on the timescales for the Health & Social Care Bill to receive Royal Assent/become an Act of Parliament. The health care budget would in the main, remain the responsibility of the PCT (until April 2013). After that, and unless there were changes as a result of the listening exercise, the newly formed GP Consortium would take on that responsibility from April 2013. The use of Any Willing Provider a model or preferred provider whereby patients could select who provided their care from a list of those willing to offer it, those organisations had to meet certain standards.
- 5.5 Post April 2013, public health would move to being managed by the Local Authority with links back to the PCT and there was a proposal that each local authority area would have a Health and Well being Board which would look at how services were commissioned, that was not in place yet. The PCT had a robust process in place for the consideration of all NICE (National Institute of Clinical Excellence) guidance and this as taken into account when planning its services.
- 5.6 Mr Kapp referred to the fact that the Council might like to consider use of alternative therapies for staff suffering a broad range of health problems. The Cabinet Member explained that this did not fall within his Cabinet responsibilities, but that he would be provided with details as to how he could contact the Council's Human Resources Department direct.
- 5.7 **RESOLVED** – That the petition and the response be noted.

6. PUBLIC QUESTIONS

- 6.1 There were none.

7. DEPUTATIONS

- 7.1 There were none.

8. LETTERS FROM COUNCILLORS

- 8.1 There were none.

9. WRITTEN QUESTIONS FROM COUNCILLORS

- 9.1 There were none.

10. NOTICES OF MOTIONS

- 10.1 There were none.

11. HIGH COST CARE

11.1 The Cabinet Member considered a report of the Director of Adult Social Services/Lead Commissioner People that set out a policy for High Cost Care. This formalised and reinforced good social work practice for all care groups. "Putting People First" advocated choice and control for users and local take up of personal budgets was a key performance indicator. At the same time under financial policy, the council had a fiduciary duty to secure value for money. Adult Social Care Assessment teams, when assessing the needs of service users must take the above into account.

11.2 **RESOLVED** – Having considered the information and the reasons set out in the report, the Cabinet Member accepted the following recommendations:

- (1) That it be noted that the proposals in the report formalise and reinforce good social work practice for all care groups. That the costs of care are set at a level that secures a package of care or care home placement that meets the needs of the individual and also represents value for money.
- (2) That it be noted that a Framework Agreement for people with a Learning Disability with complex needs has been agreed and is being actioned.
- (3) That where there is a decision that an individual is seeking to be supported by public funds and that a home care package would not represent value for money, practitioners should discuss whether this individual could access third party support.

The Cabinet Member noted and confirmed that the recommendations as agreed related to arrangements for all service users, not just the elderly.

12. SAFEGUARDING REPORT

12.1 The Cabinet Member considered a report of the Director of Adult Social Services/Lead Commissioner People which set out the Safeguarding Adults Board Action Plan, for the years 2011-2013, to show the planned work to safeguarding the most vulnerable people in the City. This plan will be updated quarterly, and reported to the Safeguarding Adults Board.

12.2 **RESOLVED** – Having considered the information and the reasons set out in the report, the Cabinet Member accepted the following recommendations:

- (1) That the updated Action Plan for safeguarding adults at risk be noted.
- (2) That this information will be included in the Safeguarding Adults Annual Report for April 2010/11, published in July 2011.

13. PART TWO MINUTES FROM THE PREVIOUS MEETING

13.1 The Cabinet Member noted the Part Two minutes of the meeting held on 14 March 2011.

13.2 **RESOLVED** – That the Part Two minutes be noted.

The meeting concluded at 4.48pm

Signed

Chair

Dated this

day of

Adult Social Care & Health Cabinet Member Meeting

Agenda Item 24

Brighton & Hove City Council

Subject:	Accommodation and Support Plan for People with Learning Disabilities		
Date of Meeting:	17th October 2011		
Report of:	Director of Adult Social Care/Lead Commissioner People		
Contact Officer:	Name:	Diana Bernhardt	Tel: 29-2363
	Email:	Diana.bernhardt@brighton-hove.gov.uk	
Key Decision	Yes	Forward Plan No: ASC 23659	
Ward(s) affected:	All		

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT:

- 1.1 The Joint Strategic Needs Assessment (JSNA) for learning disabilities 2011 highlighted the need for a local accommodation and support plan in order to meet expected increases in need of between 54-135 people over the next 5 years with a greater increase (2%) expected for those with the most complex needs who will need a high level of 24 hour specialist care.
- 1.2 The aim of this report is to present the local plan and budget strategy for accommodation and support services

2. RECOMMENDATIONS:

- 2.1 That the Cabinet member agrees to the report and the 3 year Accommodation and Support plan (Appendix 1) attached.

3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

- 3.1 A Vision for Social Care: Capable Communities and Active Citizens set the framework for the future provision of adult social care. At a local level, there is a social care transformation programme to develop the workforce, increase personalisation and maximise independence through prevention and reablement.
- 3.2 Within learning disabilities, the Valuing People Now White Paper continues to provide the overarching policy context. Its key aims are to enable people to participate in society as fully as possible with a voice regarding decisions about their care.

- 3.3 To achieve this vision within the current financial climate, greater flexibility in service models is needed so that people do not have to move to receive support or to achieve greater independence. Greater flexibility to support people during the day within accommodation services is also needed so that people can gain independent living skills and access voluntary and paid work.
- 3.4 Nevertheless, having the right environment for people to be supported in remains important. The aim of this report is to set out what is needed both in terms of access to mainstream accommodation, supported housing and specialist accommodation for those with the most complex needs. The 3 year plan is attached as Appendix 1.

4. COMMUNITY ENGAGEMENT AND CONSULTATION

- 4.1 The accommodation and support plan draws on information in the JSNA for people with Learning Disabilities that was previously consulted on. In addition the accommodation and support plan for people with learning disabilities attached as Appendix 1 has been developed through engagement of the Learning Disabilities Partnership Board and sub groups. Any changes to specific services may require further consultation with the individuals affected.

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 5.1 The financial implications of the actions included in the plan are still being quantified. However, any costs arising from these proposals would need to be funded from existing resources and included in the budget strategies for future years currently being developed as part of the budget cycle.

Finance Officer Consulted: Michelle Herrington Date: 16/9/11

Legal Implications:

- 5.2 The Local Authority has a statutory duty to assess and provide services to meet the needs of eligible adults in its area. In undertaking these duties the Local Authority must ensure adherence to the Human Rights Act 1998 and in particular Article 8 Right to Privacy and Family Life. In meeting these obligations the Accommodation and Support plan seeks to address local needs in terms of service form and provision, informed by a proper consultation process and service user preference. The Plan also addresses the need to ensure efficient expenditure of public funds by addressing the current mismatch between available services and need.

Lawyer Consulted: Sandra O'Brien Date: 16 September 2011

Equalities Implications:

- 5.3 An equalities impact assessment of the plan has been undertaken and further assessment will be undertaken within the budget strategy process.

Sustainability Implications:

- 5.4 The aim of the plan is to address gaps in local services in order to reduce the need for long distance placements.

Crime & Disorder Implications:

- 5.5 There are no specific crime and disorder implications. Nevertheless, the provision of short term crisis support and improved accessibility of supported housing services will improve support to people with learning disabilities with additional needs such as mental health, substance misuse and offending behaviour.

Risk and Opportunity Management Implications:

- 5.6 This plan provides an opportunity to increase the range of local services to better meet local need through the commissioning of accommodation and support services.

Public Health Implications:

- 5.7 The aim of this plan is to meet the accommodation and support needs of people with learning disabilities. However, many people will have additional health needs which will be better supported within the right environment.

Corporate / Citywide Implications:

- 5.8 This proposal will increase the range of services available locally for people with learning disabilities and so enable them to participate as equal citizens in the city of Brighton & Hove.

6. EVALUATION OF ANY ALTERNATIVE OPTIONS

No alternative options have been considered.

7 REASON FOR REPORT RECOMMENDATIONS

This report is required to present proposals to meet accommodation and support needs of people with learning disabilities.

SUPPORTING DOCUMENTATION

Appendix 1

3 year Learning Disability Accommodation and Support Plan

Documents in Members' Rooms None

Background Documents

Learning Disability Joint Strategic Needs Assessment 2011

Appendix 1

3 Year Learning Disability Accommodation and Support Plan

Why we need an accommodation and support plan

The Joint Strategic Needs Assessment (JSNA) for learning disabilities 2011 highlighted the need for a local accommodation and support plan to address:

- Meeting increases in need of between 54-135 people over the next 5 years with a greater increase (2%) expected for those with the most complex needs who will need a high level of 24 hour specialist care many of whom are young people coming through transitions.
- In Brighton and Hove, 70% of the local social care budget is spend on accommodation services, with the majority (63%) spent on residential care. However, national research shows lower spend and better outcomes in authorities with more supported accommodation, compared to residential care.
- There is a mismatch between what is needed locally and what is available with a significant proportion of historical placements from other authorities. As a result the authority has over 90 different providers and uses less than 50% of local provision.
- There are insufficient supported living options to meet local need, at an appropriate cost. This has led to some over supply of more costly supported living services which creates financial risks for the authority because of ordinary residence claims.
- There is a need to create more specialist accommodation for people with complex needs and challenging behaviour locally, who currently are often placed outside of Sussex at higher cost and with varying quality of care.
- There is a need to review pathways and barriers to people with learning disabilities accessing housing, in particular people who could move on from residential care and for those with the most complex needs.

- There is a need to increase resources to support people into mainstream work and their potential to work by delivering training on basic skills needed for employment, including how to use public transport and independence in the community.

The JSNA also highlighted that there are particular gaps in local services for the following groups. These gaps are the result of the mismatch between what we have and what we need locally some of which could be addressed by changing local services;

- People with mild learning disabilities with additional needs such as substance misuse, offending behaviour and mental health problems (15 -20 people)
- Specialised services for people with challenging behaviour and complex needs (6-10 people p.a.)
- Low cost supported living for people moving on from residential care and those who need lower levels of support (10 -15 people p.a.)
- Services for older people with learning disabilities with dementia (approximately 15 units)

The national and local housing picture

People with learning disabilities live in a range of accommodation types. Many live with their family, some rent and a small proportion own their own home. Others live in some form of supported accommodation. This may be residential care, supported housing, Shared lives or sheltered and extra care housing.

The housing tenure of people with learning disabilities is very different with an average of 1% within the SE Region owning their own home compared to 70% within the general population.

Changes in the Housing Benefit system over the next few years will make it more difficult to develop low level supported living as payments will be limited for those who are not in receipt of middle or high rate Disability Living Allowance.

Whilst many people experience good outcomes, there are some fundamental inequalities compared to the general population;

- Most people with learning disabilities who live in residential care or supported accommodation do not have choice over where and with whom they live and this is most likely to be the case for people with more complex needs. Also, people living in private households are more likely to live in deprived areas.¹
- The individually high cost of their housing needs mean that capital grants from the Housing Communities Agency (HCA) are harder to access, as are affordable options in rental and ownership. Without specific interventions from outside the health and social care system to address these barriers, residential care or living with their family are often the only viable options.²
- Housing is identified as one of the big priorities in Valuing People Now. Work carried out by the national team estimated there was a shortfall in accommodation to be 50 places for every 100,000 people living in Brighton & Hove. This equals to just over 100 places in Brighton and Hove across the range of need for people with learning disabilities.
- In Brighton & Hove housing of all types is in short supply. Brighton & Hove is the 5th most densely populated areas in the region and there are higher than average housing costs and higher than average levels of homelessness. Brighton and Hove has the sixth largest private rented sector in the country, with 28,000 homes (23%) and only 19,000 homes (15%) in the social rented sector. Average house prices are high, meaning affordable housing is limited and there are problems with housing quality and overcrowding.³

Strategic Context

The Learning Disability Commissioning Strategy 2009-2012 contains the following key objectives:

¹ People with Learning Disabilities in England, Eric Emerson & Chris Hatton, 2008

² Raising our Sights, DoH, 2012

³ Housing Strategy 2009-2014

- Increase choice and control through expansion of individualised budgets and increased personalisation in services.
- Increase the range of housing options available to expand supported living and to reduce numbers in residential care and out of area placements.
- Maximise independence and support people to move on
- Extend choice for day activities including supporting people into work
- Improve value for money

Progress achieved since the commissioning strategy;

- Increase in supported living (increase from 91-108 units)
- Increase in individualised budgets (increase from 67-137)
- Support to access housing and accessible information
- Reduced numbers in residential care from 257-239
- Out of area has reduced from 115 to 109

A local vision for accommodation services

This plan is being developed in consultation with the Learning Disabilities Partnership Board whose members drafted the following vision for services;

'We believe that people with learning disabilities and their carers are people first with the right to be treated with dignity and respect and with the potential to actively participate and contribute to society. To realise this vision we will seek to improve the outcomes from universal services and focus on maximising independence and well being in the community. For those with the most complex needs we will commission specialist services more effectively and will redesign services to be more preventative and effective'.

To achieve this vision it is essential to recognise that people with learning disabilities have a wide range of housing needs and therefore need access to wide range of accommodation options. People with the most complex needs also need to be able to access specialist designed 'bespoke' housing to provide the right environment to be supported.

Consultation with family carers and people with learning disabilities

This plan incorporates existing feedback from Person Centred Plans and previous consultation with family carers and people with learning disabilities on housing which identified:

- The desire for people with learning disabilities to choose who they live with
- That most people (over 50% of those who responded) were happy with their current accommodation and did not want to move on.
- That those who wanted to move on needed a speedier process and a greater range of options
- That people wanted housing that was affordable as they wanted to have the opportunity to work
- That people wanted access to self contained and shared accommodation
- Shared accommodation needs to have some self contained space
- People want to live in community settings

Key feedback on the draft plan highlighted:

- People want to know more about housing options available
- People with learning disabilities did not always know they could move on from residential care
- Providers need a firm commitment about resources to invest

Key Objectives to deliver the vision for accommodation services;

- Better commissioning of specialist services
- Reshaping the local market to better meet local need
- Maximising independence through move on, prevention, and building on support in the community

Objective 1- Better Commissioning of specialised placements

To improve the range of specialist services locally and to monitor the cost and quality of services for those with the most complex needs more closely:

Objective 1			
Better Commissioning of specialises placements			
Actions	Timescale	Success Criteria	Target
<p>Create a select list of providers through tendering for a framework agreement for people with complex needs and challenging behaviour</p>	<p>Already commenced and to complete by September 2011</p>	<p>New services available for complex needs and challenging behaviour</p> <p>Network established to share best practice</p> <p>Reduced number of placement breakdowns due to challenging behaviour</p>	<p>6-10 places per annum</p> <p>Good practice network established by December 2011</p>
<p>Review high cost placements to ensure value for money and to identify those who could be better supported locally</p>	<p>March 2011-12</p>	<p>Improve value for money via in depth review of cost and outcomes involving family carers</p> <p>High cost out of area placements identified who could access local services via the framework</p>	<p>All cases renegotiated 2011-14</p> <p>5 cases identified for 2012/13</p>
<p>Create a pathway to design housing for people with complex needs and challenging behaviour</p>	<p>December 2011</p>	<p>Create pathway to access housing that is designed around the needs of the individual</p>	<p>Process established by December 2011</p>

Objective 2- Reshape local accommodation to better meet local need

To maximise the use of local resources and to support providers to change services to better meet local need:

Objective 2			
Reshape local accommodation to better meet local need			
Actions	Timescale	Success Criteria	Target
<p>Develop market development statement on what is needed locally</p> <p>Work with local providers to remodel their services to meet local needs</p>	<p>December 2011</p> <p>2012/14</p>	<p>Reduced numbers of placements outside of Sussex.</p>	<p>At March 2011 109 out of area placements</p> <p>Reduce by 10 p.a. over 3 years</p>
<p>Develop select provider lists through tendering framework agreements for gaps in services that remain</p> <p>Create pathway through services to increase local capacity</p>	<p>2012/14</p>	<p>Reduced gaps in local services</p> <p>Improved value for money</p>	<p>Average unit costs to be within national benchmarks</p> <p>Commission 10-15 low level supported living units p.a.</p>
<p>Remodel accommodation services to support people during the day to develop life skills to maximise independence and to be better prepared to enter employment or voluntary work</p>	<p>2012/13</p>	<p>People learn skills to be better prepared to enter paid and voluntary work</p> <p>People learn skills to live as independently as possible</p>	<p>Review needs of all individual with the involvement of families</p>

Objective 3 – Maximise independence through move on, prevention and support in the community

To increase the numbers of people moving on from residential care and to maximise independence through prevention and community support;

Objective 3			
Maximise independence			
Actions	Timescale	Success Criteria	Target
<p>Through commissioning and remodelling existing services expand the range of options that provide low level support in the community.</p> <p>Review how information on housing is provided through information strategy</p>	2012-13	<p>Increase move on options available locally.</p> <p>Increase range of shared lives and supported living options linked to assistive technology to maximise independence</p>	<p>Commission move on services for 10-15 people p.a.</p> <p>Shared lives remodelling complete 2012</p> <p>Information strategy complete by December 2011</p>
<p>Improve accessibility of mainstream supported living services for people with mild learning disabilities with additional needs</p>	2012-14	<p>Improved outcomes for people with mild learning disabilities with additional support needs</p>	<p>Review single homeless pathway 2011/12</p>
<p>Progress the remodelling of the Community Support Service to provide crisis support</p>	March 2012	<p>Prevent need for support or increase need for support later on</p>	<p>Complete service changes by March 2012</p> <p>50 cases receiving short term crisis support.</p>