Making Informed Choices

Prospectus for the provision of Information, Advice, Advocacy and Support Services

This document provides organisations and partners further context on the background to Making Informed Choices, key findings and needs for achieving this outcome, the Making Informed Choices approach and the vision for the services going forwards.

This prospectus must be read alongside the Service Specification and forms part of the Service Specification.

March 2020.



Introduction

Ambitious for Sutton is the five year corporate plan setting out the strategy and programmes that are set to improve the lives of local people.

The backdrop to this plan is continued reductions in grant funding from central government, expected cost increases and ongoing demand pressures. In order to respond to this challenge, rather than looking at how the council can make savings in individual service areas, we will look at it on the basis of how we might best spend the total resources we have to achieve the outcomes local people want.

The plan provides the opportunity to look at a number of service areas together, rather than by a directorate by directorate basis. The corporate plan sets this out under four priority outcome areas:

- Being Active Citizens Where residents live healthy lifestyles and are economically, socially and physically active. Supporting activity will see the physical environment maintained and improved, investment in our young people to make the best start in life and where residents have access to volunteering activities as well as tackling social isolation.
- Making Informed Choices Where individuals, families and communities are able to access a diverse range of information, advice and guidance to make informed choices for sustained change.
- Living Well Independently Where we build on individual or community resilience and their assets to help people maintain their independence so they can live full, safe and independent lives.

• **Keeping People Safe** - with a joined up approach by all public services to ensure that vulnerable residents are supported and kept safe.

The plan is underpinned by the council working in smarter ways to manage reduced budgets and increasing demand. The aim is to re-design services to increase efficiency and utilise digital opportunities wherever possible and deliver an agreed programme of transformation. The Council will support staff so they have the skills to operate in a smaller but more entrepreneurial environment and bring in new ways to track our performance as delivery will cut across different directorates.

For each of the outcomes, the Council is undertaking a review to identify the current strengths, the areas for improvement and the potential opportunities going forwards.

The aim of this document is to set out to interested organisations further detail on Making Informed Choices and the proposed approach that we are planning on taking forwards to achieve the outcome for local people.

Background

Making Informed Choices refers to where individuals, families and communities are able to access a diverse range of information, advice and guidance to make informed choices for sustained change.

Scope

Making Informed Choices is focused on the resources and services that will enable and support individuals to make informed choices on their health, welfare, financial, lifestyle, accessing care and caring responsibilities.

The scope does not include the processes and mechanisms that focus on how residents can access, apply for and pay for Council services (i.e. applying for Planning Permission, paying Council Tax, reporting missed bins, etc). It also does not include the Council website, Contact Centre or customer experience, as these aspects have been included in the Council's Joint Customer Access Strategy.

Current arrangements

The Council currently commissions and provides a range of services to help residents achieve the outcome of Making Informed Choices. This includes, but is not limited to:

- Provision of Information and Advice (Contract);
- Advocacy (for statutory assessments for children, young people and adults) (Contracts);
- Carers Support Services (for adults and children) (Contracts);
- Healthwatch (Contracts);

- Independent visitor service / mentoring for looked after children (Contract);
- Dementia Peer support (Contracts);
- Participation for children and adults with learning disabilities and autism (Contract);
- Substance Misuse service (Contract));
- Sexual and reproductive Health Services (Contracts);
- Welfare Reform Outreach Team;
- Various web offers (including Local Offer for families with children with SEND, Care Leaver Local Offer, etc);
- Family Information Service;
- Housing Advice.

The Council also has a range of other services, that will provide a range of support to achieve the outcome of Making Informed Choices.

Financial implications

As with many Councils, Sutton Council continues to face unprecedented financial pressures as a result of grant reductions and increased demand for services as a result of demographic pressures.

The Council's Medium Term Financial Plan (MTFP) details the current position and anticipated future for the Council's finances, including demonstrating how

Sutton is proactively responding to the current financial challenges of reducing Government funding and increasing demographic pressures. Details on how much Sutton will receive in 2020/21 was announced in December 2019 as part of the Local Government Finance Settlement.

Further information regarding the Council's Financial position can be found on the Council's <u>Commissioning and Financial Plan for 2020/21 to 2023/24</u>.

National Legislation and Policy

The following aims to provide a brief summary of the Legislation and Policy in scope of Making Informed Choices. The Service Provider(s) will be required to work towards the delivery of these requirements.

Care Act 2014 - This Act sets out the requirement for Local Authorities
to provide information and advice and advocacy (subject to certain
conditions being met) to Social Care Service Users and their families,
as well as to the populations that may be at greatest risk of accessing
Social Care Services in the future.

The Care Act 2014 also sets out further requirements for local authorities in relation to assessing people needs (including Carers) and their eligibility for funded care and support. There is a focus on promoting wellbeing (which is also defined), and duty to prevent, reduce and delay the need for support.

The Act also sets out that in the transition from childhood to adulthood, if a child, or young carer or an adult caring for a child is likely to have needs when they, or the child they care for, turns 18, the local authority must assess them if it considers there is "significant benefit" to the individual in doing so. This is regardless of whether the child or individual currently receives services.

- Health and Social Care Act 2012 This Act sets out a requirement for Local Authorities to commission a Local Healthwatch (LHW) organisation for the involvement of local people in the commissioning, provision and scrutiny of health and social care services.
- The Children Act 1989 This Act created the role of the Independent Visitor to befriend children and young people in care. The Act makes it a legal requirement that children and young people who are looked after by Social Services and who have little or no contact with their birth parents, should be offered the chance to have an adult in their lives who can give them support and advice, and take an interest in their affairs. The Children and Young People's Act 2008 states more specifically that all young people in care have a right to an Independent Visitor.

There is also further Legislation and National Policy that falls within the scope of Making Informed Choices and will need to shape and inform the direction of travel for the Commissioned Provider(s):

- The Equalities Act 2010 legally protects people from discrimination in the workplace and in wider society. The Act Introduced the Public Sector Duty, which replaced the former duties relating to race, disability and gender equality. It means that public bodies have to consider all individuals when carrying out their day-to-day work, in shaping policy, in delivering services and in relation to their own employees. It also requires that public bodies, (or organisations when it is carrying out a public function) have due regard to the need to; eliminate discrimination; advance equality of opportunity and foster good relations between different people when carrying out their activities.
- The Autism Act 2009 This Act sets out a requirement for Local Authorities when commissioning services to take into account the

needs of children, young people and adults on the autistic spectrum, and where appropriate, make reasonable adjustments to meet these needs.

- The Welfare & Work Act 2016 This Act sets out a number of measures which aims to support the Government's commitments to increase employment; slow the growth of the welfare budget to help achieve a more sustainable welfare system; eliminate child poverty and improve the life chances of children; and support the policy of rewarding hard work while increasing fairness with working households.
- Mental Capacity Act (2005) The Mental Capacity Act came into force in 2005 and aims to empower and protect individuals who may not be able to make some decisions for themselves this can be due to an illness, disability, such as a mental health problem, dementia, learning disability. The Act can apply to all sorts of decisions around personal finance, care and treatment and everyday decisions about what to wear and eat. The Act also explains how an Independent Mental Capacity Advocate can help individuals if there is no one else to make important decisions and who lack capacity.
- Children and Families Act 2014 This Act sets out the requirements for Local Authorities to provide a Local Offer of the services and groups available in the area for families and children with Special Educational Needs and Disabilities.

The Act also places a requirement on the Local Authority to assess whether Young Carers in their area have needs for support. This assessment can be at the request of the individual of where a Young Carer has been identified and may potentially have needs. The assessment should consider:

- whether it is appropriate for the Young Carer to provide, or continue to provide, care for the person in question, in the light of the Young Carer's needs for support, other needs and wishes.
- the extent to which the Young Carer is participating in or wishes to participate in education, training or recreation, and the extent to which the young carer works or wishes to work.

Aswell as providing an assessment, the Legislation also requires Local Authorities to take reasonable steps to identify the extent to which there are Young Carers within their area who have needs for support.

- Children and Social Work Act 2017 One of the intended aims of the Act was to improve support for looked after children and care leavers, promote the welfare and safeguarding of children. One of the key requirements in this legislation requires local authorities to publish information about the services it offers to care leavers which may assist them in preparing for adulthood and independent living. These services may include health and wellbeing, education and training, employment, accommodation, and participation in society.
- Health and Social Care Act 2012 Local authorities' statutory responsibilities for public health services are set out in the Health and Social Care Act 2012. The Act conferred new duties on local authorities to improve and protect public health. Local authorities have a duty to take such steps as they consider what's appropriate for improving and protecting the health of the people in their areas. Alongside the mandated functions of the public health grant; are a range of public health services (for example: tobacco control, weight management, behavioural and lifestyle campaigns). The commissioning of these services is discretionary, but should be guided by the Public Health Outcomes Framework, the local joint strategic needs assessment and the joint health and wellbeing

- strategy. The general duty to improve public health includes the provision of facilities for the prevention or treatment of illness.
- The NHS Five Year Forward View sets out how the health service needs to change, arguing for a more engaged relationship with patients, carers and citizens so that we can promote wellbeing and prevent ill-health.

Local Policy

There are a number of Local Policies that are within the scope of Making Informed Choices. The Service Provider(s) will be required to work towards the delivery of these requirements.

Learning Disability Strategy and Carers Strategy

The Joint Learning Disability Strategy sets out a commitment to improving the access to information and advice. This is also included in the Joint Carers Strategy, where there is a commitment to improving access to information and advice to Carers. In both these examples, there is an emphasis on improving access to information online.

Sutton Plan

Within the Borough of Sutton, there is also the Sutton Plan. The Sutton Plan sets out a shared vision for the borough and thoughts on how to tackle some of the big issues facing us. It is a blueprint for how everyone can work together, the basis for new actions and new conversations as we begin to build Sutton's future.

The Sutton Plan partners have agreed to initially focus on five principles – each one aimed at improving the lives of residents across the borough:

- Think Sutton first We'll prioritise the needs of the borough, rather than any single organisation, throughout our work as a partnership.
- Work across sectors We will build and maintain partnerships across all of the borough's sectors, working together towards achieving our shared vision and objectives.
- Get involved early Tackle the causes of problems, not merely react to their symptoms. We will look beyond traditional services for ways to tackle the root causes of social problems and disaffection.
- Build stronger self-sufficient communities We'll help communities work together and in partnership with other local organisations.
- Provide coordinated, seamless services Reduce service duplication and enable as much care and health support as possible to take place at home and in the community.

As part of achieving the Sutton Plan, a number of key areas were agreed upon:

- Young families at risk of disadvantage/Helping Early;
- Making the borough Age Friendly;
- Piloting shared working spaces across the borough;
- The <u>Sutton Fairness Commission</u>.

Sutton Health and Care Plan

The <u>Sutton Health and Care Plan</u> (approved by the Health and Wellbeing Board in June 2019) sets the strategic direction and ambitions of Sutton Council (the Council) and Sutton Clinical Commissioning Group (CCG) to deliver better health and wellbeing outcomes for local residents by working

closely with a wide range of stakeholders, local people and Carers who use services in Sutton.

The plan sets out the aspiration that people of Sutton are supported to start well, live well and age well through a more personalised and joined-up approach to the delivery of health and care services in Sutton.

The plan adopts the Sutton Plan vision, as well as sets out a commitment to follow and embed the Sutton Plan Principles.

The areas of focus identified within the plan are:

- Start well
 - o Improving young people's mental health
 - Supporting parents of children and young with Special Education Needs
- Live well
 - o Supporting adults with learning disabilities
 - o Encouraging adults to make healthy lifestyle choices
 - o Supporting Carers
- Age well
 - Combating loneliness and social isolation among older people and supporting older people when they leave hospital

Making Informed Choices Needs Assessment

The borough of Sutton is projected to change over the next four years, this will require services to be able to change and evolve with the needs and requirements of the residents.

Population of Sutton

- The resident population in Sutton is estimated at approximately 209,608 persons in 2019. 49% of the population is male and 51% female.
- Sutton's population age structure resembles more that of England than London, with higher numbers of middle aged and elderly population.
- The resident population is estimated to increase by approximately 5% (220,978 persons) by 2024. The age group with the highest percentage increase during the same period is estimated to be 75-79 year olds (30.6%, 1,768 persons).
- The electoral ward with the highest proportion of population increase between 2019 and 2024 is estimated to be Sutton North (10.6%, 1,222 persons).
- Sutton has become more ethnically diverse over time. At the last population census (2011) the BAME population was recorded at 21% (40,697 persons). It is estimated that in 2019 the percentage has increased to 27% (56,207 persons) and it is expected to increase further to 29% (62,871 persons) by 2024.

In the delivery of Making Informed Choices, we will need to ensure:

- Accessible information The increasing population means that there is a risk of increased demand on information and advice services over the coming years. Therefore, we need to ensure that we have an effective universal (including digital offer) that will enable and ensure the growing population will be able to access the information and advice they require.
- Increasing diversity With the borough becoming increasingly ethnically diverse, we need to ensure that the information and advice services are able to meet and respond to a more diverse range of needs.
- Increasing older people population The fastest growing population is expected to be in the 75-79 year olds. Therefore, this increases the importance of providing an information and advice service that can provide a high quality service for this age group, particularly in relation to care and Carer needs.
- Location of services The analysis has shown that population growth is expected to be greatest in Sutton North. However, growth is expected across the borough, so we will need to ensure that throughout the borough, people will be able to access the necessary information.

Key Cohorts

People with Learning Disabilities

- It is estimated that 0.5% of the population in Sutton have a learning disability, which is slightly higher than the average for England (0.44%).
- Looking ahead, the population of People with a Learning Disability is expected to increase in England, and in Sutton. With the estimates projecting a 19% increase in the total population in Sutton by 2030 and a 17% increase in Sutton (by 2030) who would meet the threshold for adult social care. The increasing population has been linked to the improved life expectancy of people with learning disabilities.
- There are still low levels of people with learning disabilities employed in meaningful employment.
- Engagement has identified that more needs to be done to ensure that the borough is fully accessible and inclusive, particularly in relation to public transport and meaningful activities.
- The engagement also identified that there was a need to improve the awareness of the local services that were available specifically for people with learning disabilities, as well as those that would be able to provide additional support to enable people with learning disabilities to participate.

For Making Informed Choices, this means that we need to ensure that our information and advice services are fully accessible (i.e. easy read) for people with learning disabilities and their families and would be able to meet the increasing demand for this cohort at all life stages.

Carers

- Carers are defined as Children, Young People and Adults who care, unpaid, for a friend or family member who due to illness, disability, a mental health concern or an addiction cannot cope without their support.
- It is estimated that there are currently c18,000 unpaid Carers in the borough, providing 1-50 hours of unpaid care a week;
- The Adult Carers Preventative Service reported supporting/ in contact with c500 Carers during 2018-2019;
- During 2018-19 over 200 Carers accessed the Dementia Information Cafes, providing peer support to Carers of People with Dementia. These were held monthly in local libraries around the borough.
- The estimated number of Young Carers living in Sutton is unknown.
 Information from our Young Carers Service report that they are in touch with in the region of 400 Young Carers in Sutton;
- Carers are not a homogenous group, with Carers having a range of different roles and responsibilities in caring, who they care for and outside of their caring role;
- The National Carers Survey identified that almost six in ten (57.4%)
 Carers reported that their caring role had caused them some form of financial difficulty, compared to an average of only 50.2 % in London Local Authorities and a national average of 45.6%;
- The National Carers Survey found that 28% of Carers reported that they had as much social contact as they would like, this compares with 35.3% in 2014. This decrease may reflect the changing needs of the

- cared for person, or that a large number of Carers may be caring for more than one person (sandwich Carers and older Carers);
- Engagement has identified that Carers often find it difficult to find out about services, support and what is going on in the borough;
- Carers identified the need for support to understand and navigate through the complex changes and transition of their caring pathway; bereavement, moving in and out of caring, transitions between services.

For Making Informed Choices:

- Accessible information Improve awareness of where to find information to enable and support Carers, in their roles.
- Varied information and advice Carers are not a homogenous group, we need to ensure that the offer is able to reflect this and able to meet the diverse range of needs.

Over 65 Population

- Sutton has good life expectancy rates for both males (84 years old) and females (87 years old).
- It is estimated that there are currently 32,000 people aged 65 or above in the borough, with the population expected to increase by almost 20% by 2024.
- There is the potential to improve the health outcomes of the older population, such as through increasing vaccination rates and reducing hip fractures.

- The Residents' Survey has shown that the over 65 year age group place a high value on health facilities, litter and traffic congestion.
- People over the age of 65 years are lighter users of council services than average, including libraries, arts facilities, parks, playgrounds, sports and swimming facilities

For the Making Informed Choices, this means:

- Increasing demand With the population of the over 65 cohort expected to continue to increase, we need to ensure that the borough has a wide information and advice offer that is able to meet this demand. This will be particularly relevant to keeping people informed about how to keep healthy and how to access support services and social care services.
- Reaching the population The Residents Survey analysis has shown that the over 65 population use some of the key Council facilities less than other population demographics. Therefore, we will need to think differently about how and where we engage this population.

Looked after children and Care Leavers

- On the 31 March 2018, Sutton Council had 215 children in care.
- On the 31 March 2018, Sutton Council had the second highest number of children in care compared to our geographic neighbours (Croydon (783), Kingston-upon-Thames (127), Merton (154), Richmond- Upon-Thames (105).
- While Sutton has seen the number and rates of children in care begin to stabilise, it cannot be assumed that this will be maintained in the future.

- The broad characteristics of children in care have remained similar to previous years; just over half (56%) are male, 44% are female.
- The largest age group (39%) of children in care are aged 10-15 years;
 23% are aged 16 years and over, 19% are aged 5-9 years, 13% are aged 1-4 years and 6% are aged under 1 year.
- In the year ending 31 March 2016 there was a large increase in the number of unaccompanied asylum-seeking children. This subgroup is generally older (aged 16 years +) and boys.
- The majority of children in care are of white ethnicity (75%). 9% were
 of mixed ethnicity and 7% were of Black or Black British ethnicity.
 Since 2014, the proportion of children in care of white ethnicity has
 decreased steadily from 78% to 75%, whilst the proportions of 'Asian
 or Asian British' and 'Other' have increased slightly.
- In December 2017, the Council had 246 children leaving care or care leavers.
- Sutton Council has a responsibility to ensure that children in care can have an independent visitor. This individual is an adult that is independent from the care system, and gives the child or young person the option to talk to someone independent and help develop new interests, skills and hobbies, go on outings or just have a chat. The Council currently meets this duty through the mentoring scheme, whereby in 2018/19 the uptake of the service was by 30 young people (who could access the service continuously for 12 months).
- Following good practice and in line with the OFSTED framework, the Council provides independent advocacy to facilitate the involvement of a Looked After Child/young person and children subject to Child

Protection proceedings to ensure that they are able to have their say in meetings, assessments and reviews. In 2018/19, 136 children accessed this service.

For Making Informed Choices:

- Need to ensure that the Children and Young People are able to access the independent visitor service, and is able to reflect their needs:
- There is a high quality advice offer for Care Leavers, to help them understand their financial options.

Families with Children

- Over a third of the households in Sutton have dependent children, with 7% of the total households in Sutton being single parent households with dependent children.
- GLA population projections estimate that there are 13,849 children under 5 in 2019 (7,139 male and 6,710 female), which represents approximately 7% of the borough population.
- Looking ahead, the borough 0-4 year old population is projected to decrease slightly by 2024 to 13,646, but increase slightly by 2029 to 13,735.
- The population of children under 5 is fairly evenly distributed across wards, but there are some notable exceptions with the highest proportion of 0-4 years is in Wandle Valley ward (9%) followed by Sutton Central, Worcester Park and Sutton South wards with 8%.
- Although at borough level children in Sutton have a better than average start, there are some areas that need addressing as well as

variation across the borough. This is particularly in relation to the health and lifestyle choices of parents during the pregnancy

 With regards to early years education, at the start of reception up to 12% of children will have had no formal early years education, which will have a significant impact on their language and socio-emotional development. This is likely to be a contributing factor to lower than London average school readiness rates amongst children eligible for and receiving free school meals.

For Making Informed Choices:

- Accessibility of services With the variation in population across the wards, we need to ensure that the services are able to meet the demand, particularly in the areas of higher population.
- Increasing awareness of entitlements and services The analysis has identified that at the start of reception up to 12% of children will have had no formal early years education. This could suggest there could be the opportunity to ensure that parents are aware of the services and benefits locally.
- The Council is currently undertaking a Children's Review to identify opportunities to improve the Best Start in Life for Children in the borough. Further information regarding families and the best start in life can be found in the Director of Public Health Report 2019-20.

Key Drivers

The following section of the Prospectus aims to provide further detail on the Key Drivers for information, advice, advocacy and support to make and sustain changes.

Trends in key drivers for information and advice

At a national and local level, Citizens Advice Bureau provides advice and support for people who need help solving their problems and on the issues that matter to them.

In 2017/18, (nationally) the CAB gave advice directly – whether face-to-face, on the phone or through webchat – to 2.6 million people, with 6.3 million problems. Of these contacts, 60% were through face-to-face.

The main reasons that people sought advice from CAB were due to:

- Consumer
- Benefits & tax credits
- Debt
- Housing
- Employment
- Relationships & family

This is in addition to the 25 million visits to the website annually.

Locally, in 2018/19, the ALPS service received 21,179 'Initial Contacts'. These initial contacts were in relation to the following:

Benefits

- Consumer
- Debt
- Employment
- Family
- Health and social care
- Housing
- Other

Deprivation and Poverty

- According to the Index of Multiple Deprivation (IMD) 2015, Sutton ranks 3rd least deprived in London and 215th nationally, with an IMD score of 14.6.
- Deprivation varies greatly across the borough. Data by LSOA shows that IMD scores range from 2.7 (lowest) to 51.3 (highest).
- On average it is estimated that two in ten children in Sutton live in poverty.
- Sutton's prevalence of fuel poverty is 8.6% (7,051 households).
- During the January 2018 school census there were around 1 in 10 pupils in receipt of free school meals in Sutton.

For Making Informed Choices:

 Accessibility - The analysis has shown that there are some areas of the borough that are likely to have a higher number of individuals, families or households living in deprivation. Therefore, we need to ensure that the services are fully accessible to them. Work with partners - Deprivation is complex and can impact individuals and families in many different ways. Therefore, we need to ensure that we and all partners are working together to support these individuals and families in a way that matters to them. This means ensuring that there are seamless and efficient ways to ensure that individuals can access the support and advice when they need.

Problem debt

- The National Audit Office have estimated that there are 8.3m people with Problem Debt in the UK.
- Money Advice Service (MAS) have mapped over-indebtedness, and have estimated that 15.9% of the UK (over 18+) population have over-indebtedness. Within Sutton, it is estimated to be slightly lower, at 14.86%.
- Data published by StepChange based on their service users, has identified that Sutton has the highest proportion of clients with a mortgage, at 23.1% compared with the London average of 15.0%.
- The NAO modelling indicates that the direct effect of problem debt on an individual's likelihood to experience anxiety or depression or to be in state-subsidised housing results in an additional cost to the taxpayer of at least £248 million a year, and to the economy as a whole of around £900 million a year.

For the Making Informed Choices:

 Prevention - The debt analysis has identified there could be a number of owner occupiers that are experiencing problem debt. Therefore, while targeted advice should be provided for at risk / vulnerable groups, we need to ensure that we have a fully accessible service that can support individuals and families in a wide range of circumstances.

Housing

- The majority of households in Sutton are owner-occupied. A third of households are single person households and almost a third are couples with dependent children in Sutton.
- The majority of rentals are through private landlords or letting agencies in Sutton.
- Approximately 15% of households in the borough live in social or local authority housing in Sutton.
- Female households are more likely to be homeless than their male households in Sutton. Female and BME households are overrepresented in temporary households in Sutton. The majority of those in temporary housing and being rehoused are aged 25-59 years in Sutton.

For Making Informed Choices:

• Embedding a proactive approach - Through the approach, there will need to be a focus on reaching out and providing meaningful advice to individuals and families as early as possible.

Employment

- Although the working age population is slightly smaller (63.8%) in Sutton than in the rest of London (67.7%), the percentage of the population who are economically active is higher (83.8%).
- However there are less jobs per person in Sutton (0.65 per person) when compared to London (1.02 per person) and England (0.87 per person).
- The unemployment rate among the ethnic minority population group is higher (6.3%) when compared to the overall unemployment rate (4.5%).
- There is a higher percentage of micro enterprises and local unit business in Sutton compared to London.
- In Sutton there is a significantly higher gap in the employment rate between those with a learning disability and the overall employment rate than in the rest of the capital and in England.

For Making Informed Choices:

• The local employment opportunities may mean that some of our more vulnerable cohorts, such as Carers and People with Learning Disabilities, may find it more challenging to find local employment opportunities to suit their needs and responsibilities. Therefore, we need to ensure that there is the support and advice to guide and enable these individuals and cohorts to make informed choices on their employment options.

Professional Independent Advocacy Services

- The Council has specific duties under legislation to provide Independent Advocacy services to ensure that individuals have a voice and their needs are understood as part of their statutory assessments (concerning their care support, treatment, and or accommodation or other setting).
- The Council has a responsibility to provide independent Mental Health Advocacy (IMHA), Independent Mental Capacity Advocacy and Deprivation of Liberty - Instructed Relevant Person Representative (IMCA/DOLS/RPRs), Independent Care Act Advocacy, Independent Complaints Advocacy (ICAS) and independent advocacy for children and young people in care of the local authority or subject to Child Protection procedures.
- These services are currently delivered as a single contract, with the exception of IMHA. This service is commissioned separately with Wandsworth and Richmond (lead), Merton and Kingston).
- Demand for Independent Professional Advocacy provision in 2018-19 is detailed in the following table:

Advocacy Provision	Current Actual Levels of Demand 2018-19
IMCA	146
RPRs	76
Care Act Advocacy	103
IMHA	74
Out of borough (Care Act/ RPR) neighbouring boroughs Croydon / Kingston / Merton / Richmond / Surrey)	21
NHS Complaints Advocacy	31
Children in care, leaving care and child protection	136
Participation Self Advocacy Groups - Children and young people (registered active members 2019-20)	43 ¹
Participation Self Advocacy Groups - Adults (Active registered members 2019-20)	37 ²

¹ This figure identifies the number of active registered members in 2019/20.

² This figure identifies the number of active registered members in 2019/20.

Demand Summary

The following summarises the indicative demand for the Making Informed Choices Service. These figures are based on the current demand from previous years.

These figures should be used to give an indication of demand only, as there are amendments to the current structure (i.e. inclusion of the information networks, etc), which may alter the demand for the service going forwards.

Tiers of support	Current provision	Indicative Demand (number of individuals based on current targets)
Information networks	There are currently no information networks provided or commissioned.	N/A ³
Universal information	The current service (ALPs) (including the lead partner and delivery partners) had 21,179 initial contacts in 2018/19. The ALPs service provides information and advice at key life stages. This is not broken down between signposting,	4,103 enquiries for welfare benefits; 1,554 enquiries for debt problems; 4000 enquiries for taking on a caring role

	information and advice.	or whose caring role intensified. 4
Targeted	The Council does not currently commission targeted information.	N/A ⁵
Advice (including casework)	The current advice service is delivered through the ALPs contract - see Universal Information.	N/A ⁶
Advocacy	IMCA/RPRS	315 ⁷
	Care Act Advocacy	215
	IMHA	74
	Out of borough (Care Act/ RPR) neighbouring boroughs	21 ⁸

⁴ Please note that these numbers refer to contact, not people. Therefore, the number of people accessing the service is expected to be less than the total number of initial contacts.

³ There is no service currently commissioned or provided that would be able to provide an indication of demand.

⁵ There is no data available. If a form of targeted provision is provided through the existing contracted services, the figures would form part of the Universal Information offer.

⁶ There is no data available to indicate the demand for advice, as the current commissioning arrangements do not require this breakdown. The total amount would be a percentage / number of the total universal information figures. We estimate this to be in the region of 30%-40% of the total number of initial contacts (21,179).

⁷ Represents current target 2019-20 and reflects the impact of the changes under the mental Capacity (Amendment) Act 2019) where Deprivation of Liberty Safeguards will be replaced with Liberty Protection Safeguards (LPS) taken effect in Spring 2020) which widen the scope of where the LPS can be used (such as supported living, shared lives and private and domestic settings) and can apply to people aged 16 and over.

⁸ Out of borough figure only includes current scope (of neighbouring boroughs only) therefore indicative figure may change but would be subject to the agreement by the Commissioned Provider(s)

	Croydon / Kingston / Merton / Richmond / Surrey)	
	NHS Complaints Advocacy	40
	Children in care, leaving care and child protection	136
Support	Adult Carers	In contact with - 576
	Young Carers	In contact with - 400 Active Service users - 70
	LAC / Care Leavers Mentoring	30
	Participation / Group advocacy for children and young people	145 ⁹
	Participation / Group advocacy for Adults	160 ¹⁰

 $^{^9}$ These figures refer to the number of children and young people engaged in a 12 month period. 10 These figures refer to the number of adults engaged through a 12 month period.

Making Informed Choices Approach

There is a clear vision, principles and tiers of support that have been identified as being required to achieve the sub-outcomes and overarching outcome.

Vision

Individuals, families and communities are able to access a diverse range of information, advice and guidance to make informed choices for sustained change.

Sutton Plan Principles - Ways of working

The development of the Making Informed Choices Approach has aimed to stay aligned and support the Sutton Plan Principles (as outlined on Page 6). The Service Provider(s) will need to ensure that through their delivery and ways of working that they remain aligned to and support these principles.

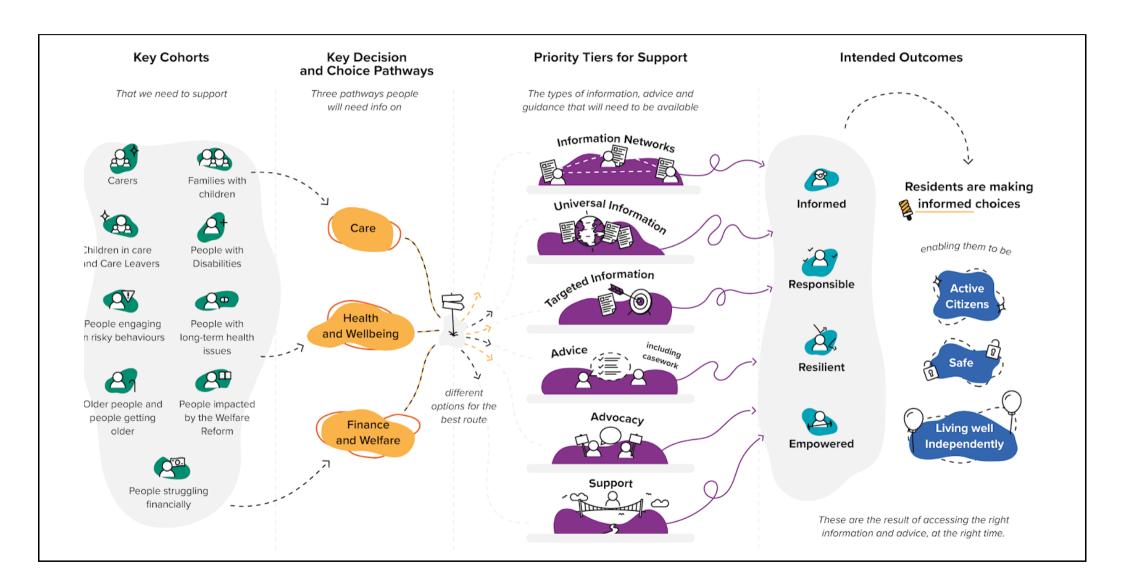
Approach Principles

To guide the development of this approach and through engagement with key stakeholders, the following principles have been identified as being required to be embedded through the approach and delivery of all services:

Accessible - Services will need to be fully accessible to all residents.
 This includes people with disabilities and / or additional needs, but also considering literacy, including digital literacy and internet access.

- Comprehensive The services will need to be able to inform, advise and support a wide range of individuals.
- Resourced The services will need to be effectively resourced to meet the demand. This includes staffing, but also using a range of methods and techniques to reach the desired cohorts. To ensure this is maintained over time, the offer will need to be able to evolve and change to reflect the needs of residents and the changing methods in the delivery of local services.
- Structured The Making Informed Choices Service will need to be clear, with clear pathways for residents to access the right service, at the right time and ensure that individuals are only having to tell their story once.
- Choice While ensuring that there are clear pathways, the services will also need to ensure that residents have a choice. This can be in regards to the services that they access, but also having the opportunity to make an informed choice using the information and advice they have received.

The following diagram summarises the Making Informed Choices Approach.



Key Cohorts

The Key Cohorts were identified through the Making Informed Choices needs assessment. These groups have been identified as there is a legislative requirement to provide information, advice and support and / or there is a local need to support this population.

The Key Cohorts have been identified as:

- Carers (Children, Young People and Adults who cares, unpaid, for a friend or family member who due to illness, disability, a mental health concern or an addiction cannot cope without their support);
- Families with children;
- Children in Care and Care Leavers;
- People with disabilities;
- People engaging in risky behaviours;
- People with long-term health conditions;
- Older People and people that are getting older;
- People impacted by the welfare reform;
- People struggling financially.

As we anticipate the needs of the borough changing over the proposed length of the contract, it is our intention that the Key Cohorts would be reviewed annually to ensure that the approach will be able to meet the needs of residents and achieve the outcome.

Key choice pathways

Following discussions with key stakeholders regarding the Key Cohorts, it became apparent that there was a risk of homogenising groups of people

and reducing the ability to consider the needs of residents more holistically. To reduce these risks, a number of key 'Choice Pathways' were identified. The aim of this is to ensure that we have a clear approach for each of these pathways, that is able to support each of the Key Cohorts.

As we anticipate the needs of the borough changing over the proposed length of the contract, it is our intention that the Key Choice Pathways would be reviewed annually, in line with the Key Cohorts.

Information networks

The aim of the information networks are to help facilitate the exchange of consistent, accurate and relevant information and to aid with the sharing of good practice locally, with professionals and key community representatives.

The engagement has identified that this could be best achieved through:

- Providing the opportunity on a regular basis for professionals to share knowledge and best practice;
- Working with community representatives to increase their knowledge and understanding of local services to improve signposting and identify gaps and opportunities early.

Universal information

The information service will provide residents the information they need on a range of topics or issues. This will provide residents with information for them

to know what their options are and how to do more about their situation. The responsibility for taking any further action rests with the resident.

We anticipate this being the front door for residents and professionals, when they are unsure of where they can go and triaging residents to ensure that they are accessing the right level of service, the first time.

Targeted information

The aim of the targeted information in Making Informed Choices is to help increase the chances of the appropriate cohorts accessing and finding out about the right information, at the right time.

Advice

This includes the diagnosis of the enquiry, giving information, explaining options, identifying further actions the client can take and providing some assistance. The client could take responsibility for any further action or, if needed, the service can take action on behalf of the client and be responsible for follow-up work.

Advocacy

Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain the services they need.

Within this context, this would be achieved through the following:

 Independent Professional advocacy - This is usually issue based, where a paid independent advocate uses their skills and expertise to support a person to express their views on issues which may include, for example, moving home, safeguarding or access to appropriate health and social care. The advocate also provides the person with information about their options and rights to ensure they are able to make an informed decision. This type of advocacy is often instructed i.e. the person has asked for an advocate to support them. Non-instructed advocacy (NIA) is where a professional will request an advocate on behalf of someone because that person is unable to request the support themselves.

- Self Advocacy Groups (Participation) Group Advocacy brings people with similar needs and issues together to support each other through Group Advocacy. These groups give people the opportunity to work together, share their experiences and raise joint concerns on a range of issues.
- Healthwatch The role of Healthwatch (a statutory function) is to gather and collate people's views and feedback about the health and care system and to use this evidence to influence the commissioning, scrutiny and provision of services in their patch.

Support

This includes the support to enable residents to maintain the choices that they have made, including helping to support their wellbeing. This could be through training, peer support, group work, activities, therapeutic support and one to one support, such as mentoring/emotional support help to build confidence.

Intended outcomes

Regardless of the level of support required, the intended outcome of accessing service(s) would be:

- Informed Residents are able to access a diverse range of information and advice, which helps them to identify their options and make the choices required.
- Responsible Residents take responsibility for addressing the issue or concern, by seeking out the right information and advice at the right time.
- **Empowered** Residents are empowered to make the choices themselves, that are based on the correct information and advice and what is right for them.
- **Resilient** The choices and decisions that our residents make are sustained and can be applied to other areas of their lives.

Next steps

The commissioning of the Key Strategic Partner is a key priority for achieving the Making Informed Choices approach.

The commissioning of the Key Strategic Partner is a key priority for achieving the Making Informed Choices approach, as this Provider would be responsible for delivering services to enable the Key Cohorts to achieve the outcomes of being informed, responsible, empowered and resilient. This would include the delivery of services to meet our legislative duties.

Following the launch of the newly commissioned service, it would be our intention to work with the Key Strategic Partner to:

- Embed the Making Informed Choices approach;
- Improve our digital information and advice offer;
- Review the pathways in relation to Health and Wellbeing Choices, Care Choices and Finance and Welfare Choices (to ensure that there are integrated customer journeys for each of the key cohorts);
- Review the Key Cohorts annually to identify as whether there are new or emerging needs that this service will need to meet.