

ENCLOSURE F

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| Item No. 11 | Classification: Open | Date: June 28 2007 | MEETING NAME Health & Social Care Board |
| Report title: | | Scrutiny final report: Older Adults Support in Southwark [OASIS] service | |
| Ward(s) or groups affected: | | All wards [Southwark] | |
| From: | | Health & Adult Care Scrutiny Sub-Committee [April 24 2007] and Overview & Scrutiny Committee [April 30 2007] | |

1. **RECOMMENDATIONS**

2. That the Health & Social Care Board considers the final report [Appendix 1] and recommendations arising from scrutiny of the Older Adults Support in Southwark [OASIS] service, and responds to scrutiny with a SMART implementation action plan within two months of the date of this meeting;

Recommendations

1. That Southwark's health and adult care partners be urged to explore possible alternative sources of funding for OASIS if confirmation is made that Supporting People funding is not to continue beyond 2007/08.
2. That further work be undertaken to identify areas of mainstream homecare which may benefit from availability of intensive homecare workers as part of existing multidisciplinary team model; and that close analysis of factors contributing to low staff turnover and high loyalty, including availability of opportunities for training and development, be undertaken.
3. The committee supports the need for a minimum basic level of dementia recognition and response amongst all levels of staff in health and social care including daycare staff, and asks Southwark Health & Social Care to provide information on progress towards its achievement in 6 months time.
4. That comparative evaluation of how effectively the approaches taken by OASIS North and South teams meet client need be undertaken, to ensure continuous improvement.
5. That further work be undertaken to better understand whether client apprehension about anticipated changes to or loss of care continuity on transition from OASIS to generic homecare might be a contributory factor in relation to lack of formal complaints about the OASIS service since inception.

3. **BACKGROUND TO THE REVIEW**

4. Cross-sectoral stakeholder discussion at the sub-committee's Health Scrutiny Welcome Evening on 26 July 2006 resulted in three key topics for review emerging as potential areas of concern for scrutiny attention, including services to older adults in Southwark. The sub-committee subsequently agreed its work programme

and determined that a review of the OASIS initiative [within the Mental Health of Older Adults area] would be undertaken.

5. At the sub-committee's first meeting on 31 July 2006 the sub-committee agreed its scrutiny work programme for the coming year, taking into account key areas of community concern from stakeholder discussion, ongoing scrutiny commitments from 2005/06, and known national and local initiatives with which scrutiny could reasonably be expected to engage.
6. The review of OASIS was light-touch and not a root and branch scrutiny of service provision. By learning more about how this particular initiative was meeting the challenge of offering joined-up, specialised provision to older adults with functional mental health conditions, the sub-committee sought to be better placed to make suggestions for further work including how best practice might be rolled out beyond OASIS into the wider health and social care community.
7. Having agreed its final recommendations on April 24 2007 Southwark's Health & Adult Care Scrutiny Sub-Committee referred its final report and recommendations to Overview & Scrutiny Committee which body ratified these on April 30 2007.

8. Older Adults Support In Southwark [OASIS]

9. OASIS is a specialist support service primarily for older adults [over 65 years of age] with mental health needs who live in the community and who are known to the Community Mental Health Team. It is a partnership initiative between Southwark Health & Social Care, South London & Maudsley NHS Foundation Trust and Supporting People and Support is delivered by Enara Community Care in south Southwark and by Southwark Home Care in the north of Southwark.
10. OASIS aims to:
 - enable older adults to live independently in the community;
 - respond to and/or avert crises that necessitate admission into care and/or hospital; and to
 - facilitate hospital discharge¹;
11. OASIS was originally set up in 2005 as a 12 month pilot in response to a need across the sector for targeted services to meet the needs of older adults with dementia and other functional mental health conditions. This gap was believed to contribute to increased admission into long-term and/or hospital care and greater incidence of carer breakdown. OASIS has since been continued beyond its initial pilot period and has been operating for approximately two years.

12. THE SCRUTINY APPROACH

13. The sub-committee agreed that the review process would involve:
 - Exploring OASIS partnership delivery arrangements, performance and development through the life of the initiative;
 - Speaking directly with service users, their carers and staff supporting the initiative to hear their experience of the initiative;
 - Gathering information from the initiative's key partners about the impact of OASIS on their work and challenges faced in its operation;

¹ OASIS service specification, January 19 2005

- Discussing how lessons from OASIS might inform future work across the wider health and social care community in Southwark;
 - Making recommendations or comments to key partners around this work
14. On 30 January 2007 the review met with services users and their carers, the borough's North and South OASIS support teams and Community Mental Health Team members, to hear from them directly about the impact the initiative has had on the lives of service users and their carers, and in addition to talk with OASIS and CMHT staff about the operation and challenges of the OASIS model.
15. On 13 February 2007 the sub-committee invited representatives from Southwark Health & Social Care, South London & Maudsley NHS Foundation Trust and Southwark Supporting People to:
- Outline the purpose and operation of the OASIS initiative, the roles of each of the partners in the initiative and arrangements for partnership working;
 - Discuss how OASIS has been performing against its objectives and the impact of OASIS on the work of partner organisations in relation to their own objectives;
 - Share perspectives on the Southwark-specific challenges involved in OASIS;
 - Respond to any issues of concern and/or questions derived from the review's discussion with services users, carers and staff; and
 - Participate in round-table discussion with other providers and elected members about areas for possible improvement.
16. In a move towards broadening engagement in scrutiny and to draw in existing expertise to the review, the sub-committee invited local voluntary organisations Southwark Pensioners' Forum and Age Concern Southwark to be involved in the review as non-voting advisors. These advisors took part in review activities alongside members, including meeting with OASIS clients and staff, roundtable discussion at formal meetings and provided input into the final report.
17. **RESOURCE IMPLICATIONS**
18. The review was undertaken within the context of an integrated Health & Social Care service and was mindful of existing partnership and provision. It is anticipated that actions proposed by the sub-committee can be accommodated within existing resources.
19. **COMMUNITY IMPACT STATEMENT**
20. The recommendations made by the sub-committee as set out in this report have potential impact for the borough's current and future population of older people with functional mental health problems. Work to keep people independent and reduce unnecessary hospital admissions has a knock-on effect on carers, families and the wider local community, including the borough's acute trusts and voluntary and statutory health partners.
21. **LEGAL COMMENT**
22. The final scrutiny report at Appendix A remains unchanged since its consideration by Overview & Scrutiny Committee in April 2007 and the Director of Legal and Democratic Services has been provided with a copy for comment.

APPENDICES

Appendix (1) Final scrutiny report of Southwark's Health & Adult Care Scrutiny Sub-Committee. *Older Adults Support in Southwark* [OASIS] 25/4/07

BACKGROUND DOCUMENTS

| Background Papers | Held At | Contact |
|--|---|--|
| Health & Adult Care Scrutiny Sub-Committee minutes and reports | Scrutiny Team Room 3.16, Town Hall Peckham Road London | Lucas Lundgren Scrutiny Project Manager Tel: 020 75257 224 |

AUDIT TRAIL

| | | |
|---|---|--------------------------|
| Lead Officer | Shelley Burke, Head of Overview & Scrutiny | |
| Report Author | Lucas Lundgren, Scrutiny Project Manager | |
| Version | Final | |
| Dated | June 19 2007 | |
| Key Decision? | No | |
| CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / EXECUTIVE MEMBER | | |
| Officer Title | Comments Sought | Comments Included |
| Director of Legal and Democratic Services | Yes | - |
| Director of Client Group Commissioning | HoS provided information and advice throughout the scrutiny review. | |



Health & Adult Care Scrutiny Sub-Committee

**Older Adults Support in
Southwark [OASIS]: learning
from what's working**

January – April 2007

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“The only thing they can’t do for me is give me a week’s sleep !”

[Carer of OASIS client]

Background

6. The Older Adults Support in Southwark (OASIS) was originally established as a pilot project in 2005 to provide specialist home care to individuals with mental health needs, with the emphasis on enabling them to live independently in the community, producing better quality of life, mental well-being, support to carers and cost savings.
7. It targets older adults with dementia and other functional mental health conditions in crisis or potential crisis situations and offers tailored help with a wider variety of needs from personal care, through financial and benefit related issues, to shopping and community and social occasions. Clients receiving support from OASIS may have conditions including: depression; anxiety; schizophrenia; behavioural disturbance, and/or co-existent alcohol abuse issues. The range of interventions employed reflects this range of mental health need and also recognizes that clients often have both physical and mental health needs. Some clients come to OASIS before any diagnosis has been made.
8. OASIS client case studies were provided to directly illustrate a range of service outcomes following various packages of intervention.
9. The initial pilot was extended after its first 18 months of operation and the now ongoing initiative is a partnership between Southwark Health and Social Care, the South London and Maudsley NHS Foundation Trust (SLaM) and Supporting People.
10. Currently, OASIS accepts referrals only from SLaM and the Community Mental Health Teams (CMHTs). There are significant pressures on existing OASIS staff and accordingly difficult decisions about who will benefit most from OASIS care must be taken. Members acknowledged that any increase in available referral routes to the service would result in increased demand on OASIS for which an appropriate increase in financial and other support would be necessary.
11. Currently, the North Team has 22 active clients and 10 people waiting for discharge from OASIS. The South Team has 24 active clients and eight people waiting for discharge.

OASIS organization and staffing

12. There are two OASIS teams, one each for the north and south of the borough, each with a dedicated team leader plus six support workers. Teams are based within existing CMHTs and as such are supported by a multidisciplinary team

encompassing a range of professional expertise including social workers and psychiatrists. Support to service users is delivered by staff from two different agencies: Southwark Homecare in Southwark north; and Enara in Southwark south. OASIS in the South operates 9am – 5pm, while the North operates 7am – 11pm after which out of hours services must be used.

13. 10 Care Coordinators work with the OASIS south Southwark team, and 14-15 with the north Southwark team although in addition all Care Coordinators have non-OASIS case-loads.

Monitoring

14. Both Enara and Southwark Home Care are monitored by the Commission for Social Care Inspection (CSCI) against the National Minimum Standards for Domiciliary Care, which includes monitoring of complaints procedures. These agencies also reportedly undertake their own quality measures including: regular staff supervision; spot checks; service quality reviews including questionnaires to clients or next of kin at least annually; although it should be noted that the review did not speak directly with either agency.

Funding

15. OASIS is jointly funded by Southwark Health & Social Care, Supporting People and SLaM. Members heard that:
 - The Access & Systems Capacity Grant provides £150,000 to OASIS from its MHOA overall resource of around £3million. There are reportedly no plans to end this funding stream;
 - Supporting People currently accounts for approximately 33% of OASIS resources, but for 2007/08 a reduction in Supporting People [SP] allocation will in effect reduce the OASIS allocation. In addition it is not clear whether SP funding will continue beyond 2007/08. If this is the case the sub-committee would urge that partners explore possible alternative sources of funding for OASIS.

Transition support

16. When a person no longer needs intensive support via OASIS they are discharged from OASIS and transferred back to standard community services. Clients remain the responsibility of the CMHTs even when transferred back to standard services and in this way they remain supported.
17. OASIS carries out advocacy and intermediate care work during the process of discharge and/or admission to residential care or acute services and will mediate with the family/carer to make sure that as far as possible there is no remaining unresolved conflict around hospital admission and that the family/carer feels all avenues have been exhausted fully prior to this point

being reached. There was the very strong impression given that compared to other services OASIS is unusual in the extent to which it supports carers and families of clients.

18. OASIS staff undertake a great deal of liaison with families and carers of people who are to be discharged from OASIS back to standard homecare to ensure robust alternative arrangements are in place prior to discharge. There is an overlap period of two weeks during which the OASIS support worker works with the new worker providing information about a client's needs and raising awareness of the needs of older adults with mental health conditions.
19. Although the sub-committee were advised that no complaints had been made about OASIS services since inception, members were concerned that in relation to transition from OASIS to generic homecare a client's apprehension about anticipated changes to or loss of care continuity might be a contributory factor, and would recommend this be explored.

Issues arising from scrutiny

20. The very positive feedback about OASIS that sub-committee members received from staff, carers and users with whom they spoke was refreshing and remains relatively uncommon in scrutiny. However, such positive accounts did appear to bring into focus areas of the standard system of care which were not perceived by clients and carers to be *as responsive* to client need or *as supportive* as OASIS.
21. Staff talked of the very real challenges that the differences between models of care common to standard homecare and OASIS services presented. For example at the point of discharge from OASIS many clients were reportedly fearful about loss of support following this transition, which expressed itself in resistance to discharge from the service.
22. Members comments and recommendations are therefore focused on reflecting on what was apparently good practice and on looking forward to what lessons the wider local health and social care system might learn from the model of care provided by OASIS.

Valuable initiative, but with limited capacity

23. Within the wider health and social care system the coexistence of different levels of support, including the type of flexible, intensive support available through OASIS means client movement between standard homecare/community services and more intensive support is possible, according to individual need.
24. Members heard that OASIS currently has capacity to address the needs of only around 40 clients safely and in addition there is a waiting list in operation. It is understood that the initiative's capacity is ultimately limited by financial resources.

OASIS complements other parts of the local health and social care system

25. It seemed apparent that the benefits of the OASIS initiative are felt by other services across the local health and social care system. Evaluation of OASIS in July 2006 indicated it was playing an important part in helping to avoid unnecessary acute admissions, reducing the length of inpatient stays and was contributing to the Supporting People objectives.

Consistency of support workers: OASIS vs generic homecare

26. OASIS reportedly offers greater consistency of support workers than does standard homecare, i.e. clients are more likely to receive support from a single support worker, rather than from many different individuals. When the review met with OASIS clients and their carers they said how much they valued this

aspect of care offered by OASIS, but that consistency was not the norm once clients were referred back to standard services. Fear of loss of security in this respect appeared to be a major contributory factor in reported client resistance to discharge from OASIS;

27. On this point, Age Concern's advisor to the review noted higher levels of consistency of workers and also reliability when compared to generic homecare. The advisor believed this is partly explained by steady commissioning of this service which enables employment of staff on permanent contracted hours in contrast to generic homecare workers employed on "zero hours" contracts.

Partnership ethos, multidisciplinary working

28. The partnership ethos appears strongly embedded in the way OASIS is structured and run, this expressing itself both as partnership between agencies involved in delivering care and through working in partnership with clients, their families and carers. The importance attached within the OASIS mode of working to the relationship between client and support worker was apparent.
29. OASIS is run by Southwark Health & Social Care in partnership with SLaM and Supporting People and OASIS support workers are based within multidisciplinary teams which was felt to be of real value to both workers and their clients. Reportedly, OASIS teams are known locally to other health professionals, including GPs who will regularly make contact to discuss any concerns arising with clients. Partner agencies from Southwark Health & Social Care, Supporting people, OASIS staff, providers, and managers from both North and Southwark Teams meet bi-monthly to ensure standardisation of care across the borough.

Comparing the "cost" of care

30. Members and advisors to the review believe that such close working relationships in general add immense value to the work done by both the Community Mental Health Teams [CMHTs] , Social Workers and Support Workers. Age Concern's advisor to the review did suggest however that this value added is not taken account of within the cost of services offered and that consequently the real costs of this provision may be higher if such overheads were indeed included, although it was acknowledged that direct management overheads were included in hourly rates quoted.
31. The hourly rate for OASIS and standard home care with Enara and Southwark Home Care is the same. The following table [accurate at 19 March 2007] compares hourly rate, per client hours and client usage for the north and south OASIS teams based on data from 29/1-19/3/07.

| Area in borough: North/South (Provider) | Cost per hour (£) | Average number of hours per user per week | Average cost per user per week (£) | Current highest hours for a user in a week | Cost for the current max user (£) |
|---|-------------------|---|------------------------------------|--|-----------------------------------|
| North (Southwark Home Care) | 16.14 | 6.74 | 108.78 | 21.25 | 342.98 |
| South (Enara) | 14.10 | 3.64 | 51.32 | 14 | 197.4 |

32. The average cost per week per OASIS client is <£260 as compared to around £380-500 p.w for long-term care and £2,660 p.w for hospital admission².

Responding flexibly to client need

33. Age Concern's advisor to the review noted the ability of OASIS support workers to respond flexibly to the needs of their clients, their families and carers. Age Concern Southwark's experience is that such flexibility is of real value, and that most if not all studies of good practice in homecare emphasize its importance. The advisor recognized that unfortunately, most generic domiciliary care workers are not in the position to offer such flexible support as they have increasingly shorter amounts of time in which to carry out their outlined duties.

34. By way of demonstrating the practical implications of this flexibility, situations in which OASIS intervention had succeeded when standard responses to a situation had either failed or been exhausted, were discussed. Each situation was a potential "crossroads" in the client's care. In the first example, OASIS involvement had helped a client maintain independence in his own home and thus avoid being taken into residential care. In the second, the presence of OASIS support workers calmed a client and avoided the need for police involvement. Staff capacity and the flexibility to think laterally about the most appropriate response to a client's need came through strongly during the review and were highly valued by users and carers.

35. Although the stated aim had been to provide an initial 6 weeks of assistance to clients, OASIS currently sets no upper limit on the length of time a client may receive intensive support. Members heard of one client who continued to receive care via OASIS for over two years;

Supporting families and carers

36. A further aspect of this flexibility is provision of flexible support to the families and carers of clients [in support of the client] as part of the OASIS approach,

² Craig, R. Briefing to sub-committee [19 December 2006]

which recognises their role in supporting older people with mental health needs in the community. Carers who spoke with the review appreciated the support available/given to them personally and agreed that support and advice given by OASIS was both accessible when they needed it and provided in a language that they could easily relate to. The way in which OASIS appears to work with carers aligned with the sub-committee's previous recommendations in respect of greater carer acknowledgement and support.

Multidimensional packages of care

37. Because of multi-agency partnership involvement in OASIS, and its particular funding streams, OASIS can offer a multidimensional package of care *encompassing personal care and community support*³ and including assistance with *tenancy and finance issues*. For example, help is provided on tenancy support and to individuals and their carers and relatives with claiming benefits if this help is needed.
38. Through acting as an enabling service, and through partnership working, it appears to contribute to preventing social exclusion of those who are marginalised and/or at greatest risk.

Staff: development, loyalty and low turnover

39. Prior to OASIS being established, members were advised that few providers had staff with specialist training and skills to address the needs of older adults with mental health needs. In addition, lack of training for staff mitigated against re-development of independent living skills and any significant support to carers⁴. On inception of the project, OASIS support staff received specialist training and development from SLaM to prepare them to address high levels of need of older adults with mental health needs. Training of domiciliary care workers in helping them understand and recognise the particular demands and frustrations of dementia continues to be important to the quality of care provided.
40. Dementia can be exacerbated by multiple, combining factors and it is particularly important for staff across the health and social care system including day centre staff to be trained to recognise lower levels of dementia, so that appropriate [and early] intervention and support can be offered.
41. Conversations with staff who spoke to the review appeared to indicate that staff training continued to be important to the ongoing success of the initiative. Reportedly, no distinction is drawn between OASIS support workers and outreach workers in terms of continuing professional development offered to them. On this point, Age Concern Southwark's experience concurred with the sub-committee's conclusion that domicilliary care staff value opportunities for

³ OASIS Service Specification [19 January 2005] page 3

⁴ Craig, R. Briefing [19 December 2006]

training and development highly. In addition, Age Concern believes that providing such opportunities results in lower levels of staff turnover.

42. The sub-committee acknowledges that a complex interaction of factors impact on the ability of a service to provide continuity of care and individual support, which may include: staff access to multidisciplinary support; staff training; terms of employment; personal commitment; and how services are commissioned. Accordingly, it may not be straightforward to replicate models of care operating successfully elsewhere.
43. Members learn that apart from two staff on maternity leave, there had been no staff turnover since inception of the initiative. Staff whom the review met talked with passion about the initiative and appeared to have a high degree of loyalty to the initiative. The sub-committee would recommend close analysis of factors contributing to such low staff turnover/high loyalty.

Monitoring, feedback and complaints

44. The sub-committee heard that a contact number is given as a matter of course in every client's care plan to enable immediate contact to be made if there are any problems with the service.
45. Members heard from OASIS support staff that there is often a high level of unwillingness to disengage with OASIS, linked to fear of loss of the intensive support received, this being especially common in people living alone with no family or social support networks.
46. Reportedly there have been no complaints made about OASIS in the last two years, which members noted was unusual for any organisation. Only one client has ever refused services through OASIS – and this was because after a short trial period the client felt able to manage independently without its support.
47. The lack of formal complaints about the service disquieted the sub-committee, despite members having no misgivings about its operation. Members agreed that further work would be useful to better understand whether client apprehension about anticipated changes to or loss of care continuity on transition from OASIS to generic homecare might be a contributory factor in relation to lack of formal complaints about the service.

Evaluating OASIS: continuing to learn and develop

48. OASIS is subject to ongoing monitoring by Southwark Health & Social Care, SLaM and Supporting People. During the review, members heard that OASIS North and South Teams operate slightly different models of care. The referral pathway to OASIS North Team is reportedly more community-based in that referrals are made by GPs to Community Mental Health Teams and then on to OASIS where appropriate. In the south GP referral is often first made directly to medical services, with subsequent onwards referral to a CMHT and then to OASIS. Underlying the PCT's commissioning strategy is a move towards community-based care. It was also suggested that the North Team was able to offer a more integrated approach than the South Team.

49. Differences in models of care and referral would appear to reflect existing differences between Older Adults Mental Health Service provision/referral pathways in the north and south of the borough. This in turn is in line with work reportedly underway to achieve greater consistency of provision of mental health services across Southwark as a whole. The sub-committee would support comparative evaluation of how effectively the approaches taken by OASIS North and South teams meet client need, as a way of ensuring continuous service improvement.

Our recommendations

The sub-committee:

50. The sub-committee urges Southwark's health and social care partners to explore possible alternative sources of funding for OASIS if confirmation is made that Supporting People funding is not to continue beyond 2007/08.
51. The sub-committee recommends that further work be undertaken to identify areas of mainstream homecare which may benefit from availability of intensive homecare workers as part of existing multidisciplinary team model; and that close analysis of factors contributing to low staff turnover and high loyalty, including availability of opportunities for training and development, be undertaken.
52. The sub-committee supports the need for a minimum basic level of dementia recognition and response amongst all levels of staff in health and social care including daycare staff, and asks Southwark Health & Social Care to provide information on progress towards its achievement in 6 months time.
53. The sub-committee recommends comparative evaluation of how effectively the approaches taken by OASIS North and South teams meet client need be undertaken, to ensure continuous improvement.
54. The sub-committee recommends further work be undertaken to better understand whether client apprehension about anticipated changes to or loss of care continuity on transition from OASIS to generic homecare might be a contributory factor in relation to lack of formal complaints about the OASIS service since inception.

Supporting documents

Meeting agendas, reports and minutes

The Agendas, reports and minutes of all meetings of the sub-committee are available from the Scrutiny Project Manager, Scrutiny Team, Town Hall, Peckham Road, London SE5 8UB [Telephone 0207 525 7224].

References

Alzheimer's Society *Facts about dementia*. Viewed online at:
www.alzheimers.org.uk/Facts_about_dementia/What_isdementia/index.htm [March 1 2007]

Audit Commission *Audit of SLAM's older adult services*

Care Services Improvement Partnership *Everybody's Business - Integrated mental health services for older adults: a service development guide* [November 14 2005] Available to download from <http://www.olderpeoplesmentalhealth.csip.org.uk/everybodys-business/download-documents.html>

Department of Health Health and Social Care Change Agent Team *Developing a whole systems approach to older people's mental health: a checklist for local health and social care systems* (August 2005) Viewed online at www.changeagentteam.org.uk on March 1 2007

Department of Health *National Service Framework for Older People*
http://www.dh.gov.uk/en/Policyandguidance/Healthandsocialcaretopics/Olderpeopleservices/DH_4073597

Department of Health *A recipe for care – not a single ingredient* Professor Ian Philp, National Director for Older People (January 2007)

Department of Health *National Health Service Plan - sections on older people and info around increased partnership working and developing models of intermediate care*

Office of the Deputy Prime Minister (now Department for Communities and Local Government) *What is Supporting People ?* [November 2004]

South London & Maudsley NHS Trust, Southwark Council, Southwark Primary Care Trust, Supporting People *OASIS service specification* [January 19 2005]

South London & Maudsley NHS Trust, Southwark Council, Southwark Primary Care Trust, Supporting People *OASIS Continuum of Care diagram*

South London & Maudsley NHS Trust, Southwark Council, Southwark Primary Care Trust, Supporting People *OASIS Evaluation summary* [July 2006]

Southwark Elders Active Support Outreach and Network Services (Seasons) *Information leaflet*, Issue 2 [October 2005]

Southwark Health & Social Care *Business Plan 2004/05 – 2006/07*

Southwark Supporting People briefing paper *Overview of the Supporting People programme in Southwark and role of OASIS in relation to this* [January 2007]

Southwark Supporting People *Supporting Independence, Supporting People*

Southwark Supporting People *Southwark Supporting People – 5 year strategy 2005/10* pp. 90-99 “Older People with support needs and frail elders”

Southwark Supporting People *Commissioning body terms of reference and structure chart* [June 2006]

South London & Maudsley NHS Trust *Older Adults Support in Southwark (OASIS) Information leaflet* [2006]

Links

Age Concern Southwark www.ageconcern.org.uk

Better Government for Older People www.bgop.org.uk

Care Services Improvement Partnership (CSIP)

<http://www.integratedcarenetwork.gov.uk/index.cfm?pid=107>

key documents link page <http://www.olderpeoplesmentalhealth.csip.org.uk/resources/key-documents.html>

Commission for Social Care Inspection www.csci.org.uk

Department for Communities and Local Government's Supporting People website

www.spkweb.org.uk

National Institute for Mental Health in England: information about work programmes/activity around mental health of older adults www.nimhe.org.uk