



# Middlesbrough Council Market Position Statement for **Learning Disability & Autism Services**



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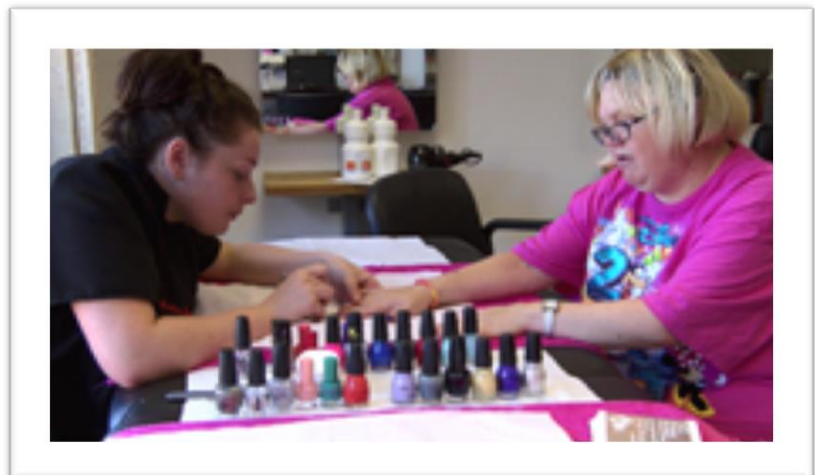
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## What is a Market Position Statement?

Middlesbrough Council's Contracts and Commissioning Unit has produced this document to describe how the Local Authority is shaping the Social Care market and becoming a Market Facilitator.

Middlesbrough Contract & Commissioning Unit would like people with learning disabilities and Autism to have:

**Choice of quality local services providing excellent support, in a timely manner, for local people and their families that promotes and enables independence, safety and wellbeing.**

We see the market position statement as an increasingly important part of our relationship with the care and support sector. Working in partnership ensures there is greater choice of high quality services for people living in the local area now and in the future.

The statement will provide data and intelligence on:

- The local Population
- Details of current services available in the local area
- Evidence of gaps in provision within the local market
- Considerations for the future

It can help Providers and Agencies of Care Services:

- Make decisions about how to invest and provide services in Middlesbrough
- Explore new opportunities and new ways of delivering services in the future

It will enable the Local Authority, with the help and assistance of Providers to plan and shape the future of services.

Middlesbrough Local Authority would like to work with Agencies and Providers of Learning Disability and Autism Services to ensure there is

## Personalisation

There is a National Focus on personalisation, prevention & enablement along with outcome focused interventions.

Services should always start with the person at the centre, living in their local community.

All Providers have a duty of care to each individual person they support. Ensuring services meet the person's individual needs. Making sure systems and processes are in place to provide effective, efficient and high quality care.

Commissioners are responsible for planning for and monitoring services to meet local needs as well as purchasing care to meet people's needs. This equates to personalised services tailored to the needs of each individual person.

## Service Values and Principles:

- Privacy
- Dignity
- Independence
- Choice
- Rights
- Fulfillment
- Equality

## Disability Definition

**Disability** is the consequence of an **impairment** that may be **physical**, cognitive, mental, sensory, emotional, developmental, or some combination of these. A **disability** may be present from birth, or occur during a person's lifetime.

## Market Position Statement

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greater choice of high quality services for people living in the local area now and in the future.

As a Local Authority and a commissioning service, our role is to influence and support the market by sharing relevant information.

This enables existing and new Providers along with Local Businesses to:

- Understand local need, based on the evidence provided
- Understand how local people want to live their lives
- Enable self-help and promote independence
- Understand local markets and monitor quality
- Decide when and how to commission services
- Work effectively with providers, service users and Carers to make sure that the right services are available, in the right place, at the right time.

The Local Authority Core Commissioning Principles include:

- Improved quality of life through improved services which meet people's needs
- Prevention and early intervention which will reduce incidents
- Specialist local services which will reduce numbers of people placed in out of area setting
- A whole life approach
- Physical and Mental Health support along with support for additional needs
- Monitoring of Quality
- Safeguarding and Advocacy



We want to work collaboratively with all stakeholders and partners to meet the requirements of the Care Act and improve the care experience for people with support needs living in Middlesbrough.

## Who is this document for?

Providers are vitally important in supporting the work around wellbeing, as well as helping people to prevent or delay the need for future care and support. Middlesbrough's Local Authority Market Position Statement includes local data for existing and new Independent Private and Third Sector Providers of Learning Disability and Autism Services.

This document can help Providers and Agencies of Social Care Services to make decisions about how to invest and provide Learning Disability and Autism Services in Middlesbrough along with exploring new opportunities and new ways of delivering services in the future.

Funding from Central Government continues to reduce resulting in the need for more creative and innovative approaches to support the most vulnerable people living in our community. The shift from traditional care and support to enablement and reablement along with the people having control of their own personal budget enables greater independence for people who use services, which ultimately results in an improved quality of life. We want Providers to demonstrate innovation, new types of service delivery and co-production particularly in relation to preventative community services.

Middlesbrough's Contract and Commissioning Unit have produced this document to describe how the Local Authority continues to shape the local Social Care market place as a Market Facilitator.

The Unit would like to ensure people with Learning Disability and Autism Services have:

**Choice of quality local services providing excellent support for local people and their families, in a timely manner that promotes and enables independence, safety and wellbeing.**

It enables the Local Authority, with the help and assistance of Learning Disability and Autism Service Providers to plan shape and stimulate the local market addressing local needs and priorities.



As a Local Authority and a commissioning service, the Units role is to influence and support the market by sharing relevant information.

This Market Position Statement provides data and intelligence on:

- The local Population, including people with Learning Disability and Autism Services.
- Details of current services available to people Learning Disability and Autism Services in the local area
- Evidence of gaps in provision within the local market

## Priorities

In Middlesbrough our priority is to securing high quality services for people with care and support needs.

Over the years the Council has moved away from directly providing services and we now rely upon a market of Providers for the vast majority of services.

We recognise how important it is to engage and support Providers so they are aware of the increasing demand for care and support services along with changing expectations about choices in the type and quality of services that people in Middlesbrough want.

**By stimulating the local market we will ensure there is the availability of good quality cost effective provision to meet the needs of local people.**

***“Market Shaping is a key enabler for ensuring people can exercise choice and control over a meaningful range of high quality support options that meet their needs and aspirations”***

Working in partnership ensures there is greater choice of high quality services for people living in the local area now and in the future.

This enables existing and new Providers along with Local Businesses to:

- Understand local need, based on evidence
- Understand how local people want to live their lives
- Enable self-help and promote independence
- Understand local markets and monitor quality
- Decide when and how to commission services
- Work effectively with providers, service users and Carers to make sure that the right services are available, in the right place, at the right time.

Patterns of demand continue to change and this will influence the shape of future markets for care and support. The increase and change in demand offers huge opportunities to Providers who are willing to adapt and change in response.

We know people want flexible and integrated care and support that is well co-ordinated, and enables them to feel in control and safe.

- They want to be active members of supportive communities where there are opportunities that match their interests, skills and abilities.
- They want help at an early stage to avoid a crisis.
- They want choice of support services to fit specific circumstances.

Services must evolve with the person no matter what their age and be person centred as well as individually designed.

The Local Authority want to ensure local effective services are delivered in the right way, at the right time reducing the need for costly crisis intervention including admission to Hospital treatment and assessment beds.

### ***Learning Disability***

- A significant reduced ability to understand new or complex information to learn new skills (impaired intelligence) with-
- A reduced ability to cope independently (Impaired functioning)
- Which started before adulthood with a lasting effect on development and
- Which affects the person for the whole of their life

Brain development is affected, either before birth, during birth or in early childhood.

A diagnosis of a profound and multiple learning disability (PMLD) is used when a person has more than one disability, with the most significant being a learning disability. This includes sensory or physical disability, complex health needs, or mental health difficulties

### ***Autism***

A lifelong neurodevelopmental condition the core features of which are:

- Persistent difficulties in social interaction and communication
- The presence of stereotypic (rigid and repetitive) behaviours
- Resistance to change
- Restricted interests

The way that autism is expressed in individual people differs at different stages of life in response to interventions and with the presence of co-existing conditions such as learning disabilities. Individuals with Autism also commonly experience difficulty with cognitive and behavioural flexibility altered sensory sensitivity sensory processing difficulties and emotional regulation difficulties.

The features of Autism may range from mild to severe and may fluctuate over time or in response to changes in circumstances.

### Accessing Services in Middlesbrough

Middlesbrough Council has revamped the way public services are accessed and purchased. The Local Authority is using digital self-service methods similar to those used on the High Street by advertising and alerting members of the public to Council products available via the internet.

**Middlesbrough Matters** is an on-line directory of services, which operates as an information “one stop shop”. It gives people more choice and control by purchasing services directly from the fully integrated e- market place. The directory is a major source of information as it holds a range of details on local and national support services. It allows new and existing customers the chance to choose Support Services in an easy accessible way. People are able to consult the Directory, view and access different types of support that can meet their needs in a variety of ways such as using digital communication as well as the more traditional methods.

Local citizens are able to “**Pick and Mix**” services to suit their needs using the Middlesbrough Matters Directory!

For Providers of Care and Support services the Directory is a **FREE** marketing tool allowing the advertising of services to a wider diverse market at **NO EXTRA COST**.

Providers are encouraged to “self manage” their own accounts via log in access. The log in allows added functionality such as including Company logos, photos, corporate branding, awards & accreditation which could make the listing more attractive focusing on customer needs and wants (customer centric). The Directory is Care Act Compliant and in line with the Governments Digital Strategy.



The **Provider Portal** is a secure online facility that allows service providers (contracted by Middlesbrough Council) to access information about their service which is held on ContrOCC. This is the Council’s IT system for managing contracts, payments and charging. The Provider Portal allows Providers to upload their activity data directly onto the Council’s database.

The aim of the Portal is to improve communications between the Council and its Providers, making for a more efficient way of working and providing an audit trail for transactions.

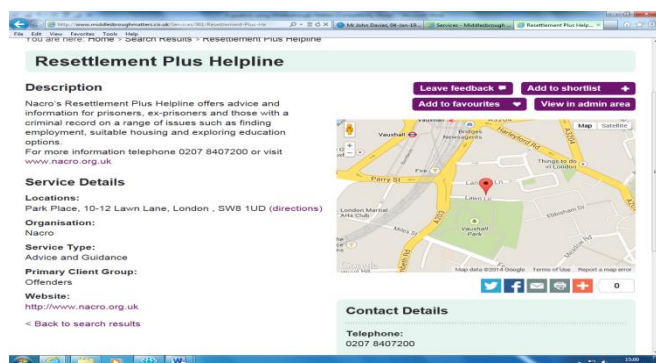


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Examples of how the Provider Portal will achieve this include:

- Providing a place for dialogue between Middlesbrough Council and its contracted service providers.
- Enabling providers to update organisational information and contact details.
- Enabling providers to view contract documents, such as terms and conditions and service specifications.
- Enabling commissioning staff to send quality and service review reports to providers.
- Allowing faster, online invoice processing.
- Enabling providers to view details of Council funded service users using their service, such as the level of service they receive and the associated cost information.
- Enabling more accurate recording of activity, by ensuring that providers can easily update information, supplying actual information on the services they provide and notifying the Council of where this varies from the planned service.



Work is taking place to develop a data warehouse which will provide information in the form of a joint Tees Valley Market Place. This will improve market intelligence across the Tees area as well as establishing a consistent commissioning approach for Health and Social Care.

## Did You Know?

The Care Act (2014) covers 4 main areas:

- To support general well-being
- The prevention of developing or deterioration of need and the provision of the right information
- A duty to support Integration and co-operation
- Ensure a quality service/support market is available

This will be achieved through:

- prevention, making information available and supporting market development
- Clarifying who is entitled to public care and support along with those who pay for their own support
- Changes and clarification to assessments and eligibility
- Personalising care and support planning
- Changes to charging and financial assessments
- Protecting adults from abuse and neglect
- Changing how carers are supported
- Ensuring continuity of care when moving between areas
- Keeping an oversight on the market and responding to provider failure
- Supporting the transition from children to adult support

It will make the care and support system clearer and fairer for people who need it.

## The National Picture

In 2013 Public Health England estimated there were 1068000 people with a learning disability living in England.

This includes:

<b>Children</b>	224930
<b>Adult's</b>	900900 of whom: 177889 eligible for annual health check 206132 known to GP's as having a learning disability

People with learning disabilities and Autism experience health inequalities and often die younger than the general population with some deaths being avoidable.

Health information from Public Health England in relation to the population of people with learning disabilities includes:

- 1 in every 3 is obese compared with 1 in 5 of the general population
- 3 in 4 women do not taken part in cervical screening
- Respiratory disease is 3 times higher than the general population
- Dementia is 4 times higher than the general population
- Schizophrenia is 3 times higher than the general population
- Epilepsy is 20 times more common than the general population

We all have a responsibility to improve and protect our health. Public Health is working on achieving positive outcomes for the population which include:

- Improvements against health inequalities
- Helping people to live healthier lifestyles
- Protecting people's health from major incidents and other threats
- Reducing the numbers of people with preventable ill health and premature deaths

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Autism is a condition that affects how a person communicates with, and relates to, other people, affecting how they make sense of the world around them. A report from the NHS Information Centre (2009) indicated 1% of the population has Autism with prevalence higher in men (1.8%) than in women (0.2%). It is estimated there will be a 63% increase in numbers of people diagnosed with Autism by 2030.



People with Autism share two 'core' features:

- Persistent difficulties with social communication and social interaction. For example, finding it hard to begin or carry on a conversation, not understanding social rules such as how far to stand from somebody else, or finding it difficult to make friends.
- Restricted, repetitive patterns of behaviour, interests, or activities. For example, developing an overwhelming interest in something, following inflexible routines or rituals, making repetitive body movements, may be hypersensitive to certain sounds and sensations such as touch or smell.

The Government, NHS England and the Department of Health are committed to transforming care for people with learning disabilities and Autism. The Joint Improvement Programme and Transforming Care review has made changes to commissioning approaches and intentions.

Clinical Commissioning Groups and Local Authorities must:

- Ensure the right local services are available regardless of who commissions them
- Ensure people with challenging behaviour in inpatient assessment and treatment services are appropriately placed as well as being safe
- Review existing contracts to ensure they include clear individual outcomes and meet the needs of the individual
- Ensure everyone has a named care co-ordinator
- Improve the general health care and physical health of people with learning disabilities and or Autism
- Involve children, young people and adults with challenging behaviour and their families, carers and advocates in planning and commissioning services

This means the reduction of secure inpatient beds along with the prevention of people being admitted to Hospital treatment and assessment beds by improving the quality of community based support services which include preventative and proactive care. There is a strong emphasis on personalised care and support planning, personal budgets and personal health budgets.

The £5.3bn Better Care Fund announced by the Government in 2013, supports the integration of health and social care services, ensuring services work more closely with people, placing their well-being as the focus of health and care services.

# Market Position Statement

## The Local Picture

### Learning Disabilities

Compared with benchmark: ● Better ● Similar ● Worse ● Lower ● Similar ● Higher  
○ Not Compared

Worst/Lowest 25th Percentile | Benchmark Value 75th Percentile Best/Highest

Indicator	Period	Middlesboro		Region	England	England		
		Count	Value	Value	Value	Worst/Lowest	Range	Best/Highest
Learning disability: QOF prevalence (18+)	2013/14	869	0.7%	0.6%	0.5%	0.1%		0.7%
Adults (18 to 64) with learning disability known to Local Authorities per 1,000 population	2013/14	750	8.8	5.7	4.3	0.0		8.8
Children with Moderate Learning Difficulties known to schools	2013/14	711	31.0	19.4	15.6	0.0		50.7
Children with Severe Learning Difficulties known to schools per 1,000 pupils	2013/14	134	5.84	4.67	3.73	0.00		7.67
Children with Profound & Multiple Learning Difficulty known to schools per 1,000 pupils	2013/14	44	1.92	1.24	1.27	-	-	-
Adults with learning disabilities in settled accommodation	2013/14	560	74.7%	80.6%	74.9%	47.6%		94.4%
Adults with learning disabilities in employment	2013/14	35	4.7%	5.5%	6.7%	0.8%		22.5%

### Autism

Indicator	Period	Middlesboro		Region	England	England		
		Count	Value	Value	Value	Worst/Lowest	Range	Best/Highest
Children with Autism known to schools per 1,000 pupils	2013/14	248	10.8	9.8	9.1	1.3		22.1
Pupils with autism spectrum disorder: % of school pupils with autism spectrum disorder	2014	248	1.08%	0.98%	0.91%	0.13%		2.21%

As of 2013 the estimated population for Middlesbrough was recorded as **138,744** which is estimated to increase to **142,359** by 2016.

When compared to national figures Middlesbrough has higher % of children and adults with a learning disability and higher figures of severe learning disabilities than both the Regional and National average.

Age	0 – 13	14 – 17	18 – 34	35 -64	65+
<b>Known to Local Authority</b>	<b>89</b>	<b>123</b>	<b>565</b>	<b>540</b>	<b>76</b>
<b>Complex / Profound</b>	<b>31</b>	<b>34</b>	<b>125</b>	<b>188</b>	<b>38</b>
<b>LD + Autism</b>	<b>15</b>	<b>30</b>	<b>120</b>	<b>37</b>	<b>3</b>

<b>Numbers of people in receipt of CHC</b>	112
<b>Numbers of people in receipt of 117 After Care</b>	81

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The Local Authority continues to work with people who live outside of the Middlesbrough area so they can return home and have their needs met locally. When people are placed in out of area settings work begins (at the point of admission) to plan for a return back to their home area.

Similar work is taking place to prevent people leaving the local area. Partnership working with neighbouring Authorities is ensuring services are available in the Teesside area. Stimulating the local market ensures the availability of choice and cost effective service provision to meet the needs of local people which includes education and day opportunities.

Commissioners continue to support the development of workforce awareness, knowledge and skills in areas such as Autism, people with behaviours that challenge services, positive approaches and people with high risk profiles.

There has been a significant reliance on out of area Education and Residential placements for people with Autism Spectrum Conditions living in the Tees area. The availability of Speech and Language Therapy is recognised as a key factor as to why young people with Autism attend out of area education placements. Communication support for deaf people with Autism continues to be problematic especially in accessing appropriately trained interpreters.

Life expectancy for people with learning disabilities is shorter than those of the general population. People with learning disabilities and or Autism often experience barriers to accessing healthcare services as well as poor levels of care. Annual Health Checks and Health Action Plans are promoted to improve the health of people with learning disabilities and prevent health inequalities including premature or avoidable deaths.

There are currently 8 treatment and assessment beds for people with learning disabilities across the Tees area. Tees, Esk & Wear Foundation Trust has developed an outreach model to ensure robust community services, which focus on prevention and rehabilitation are available for people with difficult to predict behaviours and high risk profiles.

There is clear evidence to show people access short breaks provision via Direct Payments or Personal Budgets. This also includes Health short breaks. People accessing short breaks are moving away from the transitional building base service to more flexible options.



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This includes things such as:

- Bed & Breakfast
- Caravan
- Hotels
- Theatre Breaks

There are currently 10 Changing Places situated in and around Middlesbrough. They are located at:

- Middlesbrough Bus Station
- My Place (Custome House)
- The Gateway (situated near Middlesbrough College)
- Rainbow Leisure Centre
- Neptune Leisure Centre
- Sports Village
- The Orchard (off Lansdowne road)
- Cumberland Resource (Chelmsford Road)
- James Cook University Hospital
- Stewart Park

A Changing Place toilet is larger than a standard accessible toilet and is equipped with:

- Height adjustable changing bench / trolley
- Ceiling track hoist
- Adequate space for a disabled person and up to 2 Carers
- Centrally placed toilet with grab bars
- Privacy screen / curtain
- Wide paper-roll to cover the bench
- Shower
- Slip resistant floor

There are a number of sport and leisure clubs for people with disabilities which take place over a number of weekday nights. These include:

- Boccia Club
- Dorman's Disco
- The Gateway Club
- Friday Night Club
- Young Person's Group

## Representational Advocacy Provision 2014 / 15

(provided by CAB)

Referrals by Type	Numbers
Health	14
Social Care	39
Voluntary Sector	5
Self	9
Carer	9
Other	5
<b>Total</b>	<b>81</b>

Referrals by Service User Group	Numbers
Elderly	5
Physical Disability (under 65)	14
Learning Disability	29
Mental Health	25
Other	8
<b>Total</b>	<b>81</b>

## Independent Mental Capacity Advocacy

Referrals by type	Numbers
Change of Accommodation	9
Serious Medical Treatment	4
Safeguarding Adults	5
DOL's	14
Accommodation Reviews	9
<b>Total</b>	<b>41</b>
Enquiries	

## Independent Mental Health Advocacy

Referrals	Numbers
Complaints	
Referrals (under 65)	98
Referrals (over 65)	44
<b>Total</b>	<b>142</b>
Active cases	

### Did you Know

Advocacy in all its forms seeks to ensure that people are able to speak out, to express their views and defend their rights.

The Mental Health Act 1983 (as amended by the Mental Health Act 2007) makes provision for statutory access to Independent Mental Health Advocate's (IMHA's) for patients subject to certain sections of the Mental Health Act 1983. IMHA's are an important safeguard that will help and support patients to understand and exercise their legal and civil rights.

IMCA is a type of Advocacy introduced by the Mental Capacity Act 2005. The Act gives some people who lack capacity a right to receive support from an IMCA in relation to important decisions about their care

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The **Tees Advocacy Hub** is overseen by Middlesbrough CAB and began operating in June 2014 and offers a service for people living in Middlesbrough, Redcar & Cleveland, Stockton and Hartlepool.

Different types of Advocacy available via the Hub includes:

- **General Advocacy**, where the Advocate will support you with issues relating to housing, health and social care systems (available to people aged 18 and over).

There are 3 types of general advocacy which includes:

- Short term issue based or crisis advocacy
  - Non instructive advocacy
  - Health advocacy (support to attend and understand procedures)
- **Independent Mental Capacity Advocacy** (IMCA available to people aged 16 and over). IMCA is a statutory advocacy service which was introduced by the Mental Capacity Act 2005 (the Act). It allows people who lack capacity a right to receive support in the form of an IMCA.
  - **Independent Mental Health Advocacy** (IMHA available to people aged 16 and over). Independent Mental Health Advocacy was introduced under the Mental Health Act 2007 and there is a legal duty to provide Independent Mental Health Advocates (IMHAs) for all eligible people. An IMHA is an independent advocate who is specially trained to work within the framework of the Mental Health Act 1983 to support people to understand their rights under the Act and participate in decisions about their care and treatment.



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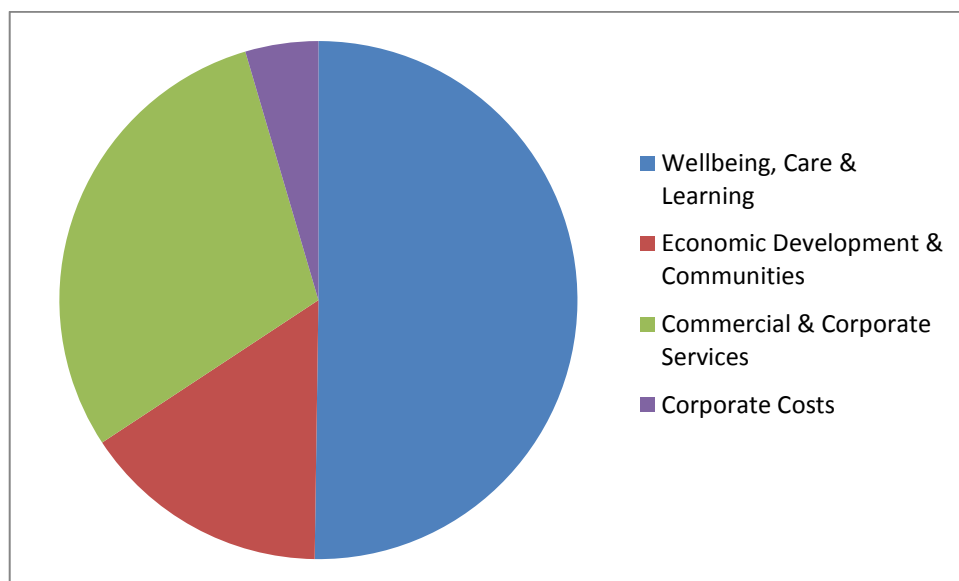
### Current Provision for Adults

	In House	Services / Comments
Day Care	●	Consisting of 3 community based buildings open 5 days per week during core business hours
BME Day Care	●	Consisting of 1 community based building open 3 days per week during core business hours
PMLD Day Care	●	Consisting of 1 community based building open 5 days per week during core business hours and boasts sensory garden & 4-hole wheelchair accessible golf course
Autism Day Care	●	Consisting of 1 community based building open 5 days per week during core business hours with limited availability
Short Breaks	●	1 joint community based building for young people & adults. Ceiling tracks for lifting & hoisting in all rooms
Residential Care	●	1 joint community based with 8 beds for adults. Ceiling track for lifting and hoisting in all rooms.
Nursing Care		No "in house" provision
Domiciliary Care		No "in house" provision
Further Education		No "in house" provision
Employment Training	●	A variety of training courses to assist people with gaining meaningful employment
Assistive Technology	●	A less invasive support provision which promotes independence

	External	Services / Comments
Day Care	●	Consisting of 3 community based building open Monday to Friday during core business hours
BME Day Care	●	Consisting of 1 community based building open Monday to Friday during core business hours
Short Breaks	●	Personal Budgets to assist with purchasing alternative Short Breaks
Residential Care	●	6 Registered Residential Homes with a total of 105 beds
Residential Care (PMLD)	●	1 Registered Residential Home with a total of 42 beds
Residential Care (Complex/Challenging)	●	1 Registered Residential Home (male only) with a total of 5 beds
Residential Care Autism		No local provision
Domiciliary Care	●	Since 2010 there has been an increase in people accessing Domiciliary Care with only 10 Agency providing this support
Supported Living Learning Disabilities	●	50 properties in the area offering supported accommodation
Supported Living Autism	●	1 Autism specific facility for 3 people.
Domiciliary Care Autism	●	11 Autism Specific Community Support Providers for <b>high needs</b> and 11 Autism Specific Community Support Providers for <b>low needs</b>
Further Education	●	3 Further Education buildings
Employment Training		No local provision
Social Club / Activities	●	Currently there are 5 separate Social Clubs for people to access – only open to people with learning disabilities

## The current spend for Adult Social Care

In the financial year 2014/2015, Middlesbrough Council spent £70,579,900 million (gross expenditure) on care and support for Middlesbrough residents.



Wellbeing Care & Learning incorporates Education, Children and Adult services. This area receives approximately half of the Council's total budget with Adult Social Care receiving 29.6% of the Council's total budget.

The Council continues to address ongoing financial challenges whilst ensuring the delivery of statutory front line services.

The table below shows the proposed Net Revenue Budget for the next 2 years:

2015 / 2016 (£m)	2016 / 2017 (£m)	2017 / 2018 (£m)
41,215	40,723	38,056

### Considerations for the Future?

The reduced numbers of Hospital inpatient treatment and assessment beds may create additional pressures within the community infrastructure and could result with some people being placed in out of area inpatient settings.

Specialist community services for complex forensic learning disability patients identified for hospital discharge which will enable them to live safely in the community minimising the risk of readmission.

Progression pathways, which lead to greater independence and opportunities for people with learning disabilities and or Autism.

There is a need for support services in the evenings and at weekends and work is taking place to increase the availability to current community services.

Improved support for older people with a learning disabilities and or Autism, many of whom experience significant health issues and physical frailty.

An innovative Crisis Response / Crisis Prevention Service, which can help other Provider Agencies and prevent placements breaking down. This type of innovative service could provide access to treatment and assessments outside of hospital settings.

Specific Autism Employment opportunities including the setting up of Social Enterprises which could enable people to showcase and sell their products.

Support services which prevent reoffending

Female Only Autism Service, Female Forensic Learning Disability “step down” facility & Female Forensic Supported Living tenancies. Currently females with Forensic Learning Disabilities are sent outside of the Middlesbrough are to established Residential Care Homes.

### Did You KNOW

We are committed to improving care for people with Long Term Health Conditions in order to enable them to have an independent and fulfilling life and to receive the support they need to manage their health.

A new model of care is needed, more focused on prevention, early diagnosis, intervention, and managing long-term conditions to prevent degeneration

Self-care means looking after yourself in a health way. Whether it's brushing your teeth, taking medication when you have a cold or doing some exercise.

If you have a long term condition there are extra things to consider, such as making changes to your diet or different types of medication you can take.

Self-care also means staying active by doing things that area important to you:

- Seeing friends and family
- Doing the garden
- Going on holiday
- Continuing to work

It involves looking at what you can do rather than what you can't do!

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Specialist Autism Advocacy and Advice provision especially for people with profound Autism / Autistic and deaf etc

Improved transition for people going to live in the community. This could include a step down – weekend / week trying out living in the community developing independent living skills and be open to people moving on from:

- Hospital
- Residential care
- Moving on from living with family

With a further move on programme leading to full independence.

Foster family provision for people with learning disabilities.

Middlesbrough are working closely with the Clinical Commissioning Group to pool budgets for Health and Social Care services. This new approach will prevent people from being admitted into acute hospital settings by developing:

- A Single Point of Access
- Supporting people's independence
- Improved support for Carers
- Support for Care Homes

All Provider services to be Care Act compliant and to provide services which are outcome based with associated performance indicators and that link into service standards.



There is an expectation for all Provider staff to receive Competency Based accredited training which is regularly refreshed to ensure training remains up to date.

Education and training for workforces to deliver a three tiered approach using a blended learning which includes e-learning, workplace learning and face to face tuition:

- First tier – awareness
- Second tier – more detailed learning
- Third tier – development of experts and leaders

### **Glossary of acronyms:**

**CAB – Citizens Advice Bureau**

**DP – Direct Payment**

**IMCA – Independent Mental Capacity Advocate**

**IMHA – Independent Mental Health Advocate**

**PB – Personal Budget**

**PMLD – profound and multiple learning disabilities**

**PWLD – people with learning disabilities**

**QOF – Quality & Outcomes Framework**

### **References:**

**Middlesbrough JSNA**

**Public Health Outcomes Framework for England**

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