Market Position Statement for Learning Disability Services – 2016/17

Adult Social Care – August 2016
Adult Social Care – Market Position Statement for Learning Disability Services

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A Market Position Statement (MPS) is a market facing document that sets out information for care/support providers/clients and carers about the Local Authority’s commissioning intentions and what this means for the current and future supply market.

This is an important part of the Local Authority’s relationship with the care and support sector, clients, carers and the wider market. It is a tool to set the overall direction of travel and outcomes to be achieved that allows the market and others to develop new, innovative and different ways of doing things to support people with a learning disability as well as review the suitability of existing services already in the market.

This MPS will be reviewed and published regularly. It sets out the services we have in place at present as well as those areas where change and development is required. It also highlights a number of market opportunities for current and new providers to consider.

This should be read alongside the:

- Commissioning intentions – generally these will be in line with client groups but may also cover service areas. The commissioning intentions will identify key areas of work the Commissioning Authorities are looking at;
- Procurement plan – this will identify any procurement requirements that Adult Social Care is undertaking over the next 3 years, it will be a three year rolling plan that is updated annually.

It aims to support current organisations to review what they are doing in North Tyneside and think about their service provision and if it needs to change to reflect future commissioning intentions.

It is also aimed at new organisations that are not currently delivering services in North Tyneside and who may want to think about entering the market in the future.

We want to make sure current and future services are fit for purpose and meet the needs of people with a learning disability. These services should be person centred and offer and support choice and control to maximise the independence of individuals.

Whilst this MPS is Adult Social Care led, it will include links to health and public health to reflect the joint commissioning environment in North Tyneside. It will also encourage principal stakeholders, ie commissioners from the Local Authority and the NHS, people who use services and their family carers as well as provider organisations to work together to ensure services are of high quality and are affordable and deliver value for money.
This MPS is to be used as the start of a conversation or dialogue between stakeholders to:

- Ensure high quality is built in as a fundamental element of service provision;
- Ensure safeguarding is embedded in service delivery;
- Develop new and innovative services;
- Ensure value for money requirements are met;
- Ensure service users / carers views and desired outcomes are collated, listened to and part of the service delivery model, subject to available resources;
- Consider the wider market of community assets and social capital to support individuals.
There are dramatic changes affecting local government and adult social care services. These are also impacted by changes in the NHS and how health services are commissioned / provided. These changes are affecting how learning disability services are commissioned and delivered as well as the partnerships we have in place to support the work we do.

The main fundamental change driving a lot of the client specific changes is funding and the fact that the Local Authority, Adult Social Care and Learning Disability Services has less funding than it did two or three years ago and this funding will continue to reduce over the next two years.

We still have an over-riding duty to meet individual’s assessed and eligible needs and there is the continuing challenge to do this with less money and the expectation of increasing quality and choice of provision.

Key national drivers for adult social care and specifically for learning disability services include:

- Supporting people with a learning disability to have increased choice and control over how their care needs are met;
- Ensuring that all people with a learning disability are offered a personal budget and where appropriate that a direct payment is in place, we want to support people to benefit from this opportunity and support them to access a range of services from traditional social care services to those that are part of mainstream community provision;
- Supporting people with low / moderate social care needs to access a range of preventative services;
- Support people with a learning disability to have access to the same opportunities as the wider population in relation to housing, social involvement / activities, education, employment, health, transport and family and community life;
- Supporting people by moving from a caring role to enabling and developing independence. A “progression model” of support is favoured to maximise the independence for individuals and support them to achieve short, medium and longer term goals, achievements and outcomes;
- Reviewing those people in “in-patient” treatment / hospital services and identifying opportunities for them to move out of these hospitals into the community (Transforming Care Programme);
- Ensuring quality services are delivered and the staff teams understand their role in delivery a quality service and the links with safeguarding individuals.
Locally, in North Tyneside, the key areas we are looking at relate specifically to:

- Ensuring services are cost effective and offer value for money, where value for money is the balance between cost and quality of service provision;
- Ensuring there is a consistent understanding and delivery of quality, where users have an important say in assessing quality and that they are safeguarded appropriately;
- Supporting people to access a direct payment to meet their assessed and eligible needs, where this is their choice;
- Satisfying desired outcomes for the individuals as best as possible within the resources available;
- Identifying opportunities for health and social care integration (including public health);
- Reviewing the transition arrangements in light of the 0-25 agenda and seeking opportunities as to how services are commissioned;
- How we manage and share information on the increasing numbers of people with a learning disability and take a person centred approach to ensuring how we gather, record and take account of their views;
- Health inequalities for people with a learning disability when compared to the wider population in North Tyneside.
- Developing a local response to the Transforming Care Programme to support people to leave hospital provision and ensure there is a community infrastructure in place to support people in the community and prevent admission into hospital.

One of the biggest changes affecting Adult Social Care over the last decade or so is the Care Act. The key areas affecting Adult Social Care and also learning disability services and people are:

- Integration – how adult social care, children’s services, the NHS, public health and housing integrate better;
- Market shaping – ensuring there is a suitable range of provision in areas to meet eligible needs and the wider needs of the population and that those services are of high quality, including the development of market position statements;
- Eligibility – introduction of a new national eligibility criteria;
- Choice of accommodation – new legal framework in place to ensure individuals can choose which residential care home they wish to live in and responsibility for funding those placements;
- Ordinary residence – New law and practice to support local authorities to determine and agree who they have a responsibility for;
- Provider failure – duties on local authorities to anticipate and support, or step in when providers fail and temporarily meet the needs of individuals;
- Market oversight – Duty on CQC to assess the financial sustainability of providers and to work with local authorities where providers fail.

Further information / updates on the Care Act can be found at www.local.gov.uk
The challenges faced are wider than learning disability services and wider than Adult Social Care, they impact on the whole of the Local Authority and its partners.

**Target Operating Model**

The Council has developed a Target Operating Model (TOM) that looks at how it delivers its services in light of reducing finances and increased demand pressures.

The TOM looks at four main areas across the Council:

- Customer interaction
- Service delivery
- Workforce
- Buildings and assets

The main TOM principles that are linked directly to the work in Adult Social Care are:

- Enabling people to support themselves
- Target resources to people who need it most
- Understand and manage demand
- Identify innovation
- Reduce long term costs through the use of technology
We will apply these principles to the redesign and review of services, where it is safe and practicable to do so. This applies to all council services and also to commissioned services.

Learning Disability Transforming Care Programme

In North Tyneside we are committed to ensure we are able to support people with a learning disability and / or behaviours that challenge to come out of hospital or to prevent the admission in the first place.

To support this we will work closely with the Clinical Commissioning Group and other NHS partners to ensure we have the right support and provision in the right place to ensure this happens.

The underlying principles to this work are:

- Substantial reduction in the number of people placed in inpatient (hospital) settings;
- Better quality of care for people who are in inpatient and community settings;
- Reduction in the length of stay for all people in inpatient settings;
- Better quality of life for people who are in inpatient and community settings.

We will work closely with the North East and Cumbria Learning Disability Network and the Transforming Care Board to ensure, as a locality, we are able to meet the requirements that have been set nationally.

As part of this we will review current service provision and commission new services to meet the needs of this group of individuals. This is described later in this Market Position Statement.
North Tyneside Council currently funds care and support for people that meet the Care Act national eligibility criteria.

Where people have needs that fall outside of this, we would seek to signpost them to organisations / services to meet their needs where they would fund their own care and support.

Adult Social Care is fast becoming a commissioning led organisation and this commissioning role will underpin the services it delivers against those provided by the wider market.

Adult Social Care is no longer a main provider of services and as such the external sector will be used and services commissioned under the Council’s procurement arrangements. All procurements will be undertaken via the North East Procurement Organisation’s portal, this is an electronic process that can be accessed at https://www.qtegov.com and suppliers are all encouraged to be registered to be considered for future work in North Tyneside.

Once the support plan has been completed there are four main options as to how the personal budget can be used:

- Taken as a direct payment, where funds are transferred to individuals / family (where agreed and appropriate) to spend in accordance with the support plan, or
- An Individual Service Fund (ISF) is established where the care provider manages the budget on behalf of the individual(s)
- Adult Social Care will commission a service from an agreed provider, or
- A combination of the above where there can be a mix of direct payment and commissioned services

**NHS Funding**

This MPS is led and supported by Adult Social Care and primarily covers areas where the Local Authority has a lead commissioning responsibility. However there are situations / circumstances where the NHS provides funding to meet the needs of individuals. These will include:

- S117 mental health aftercare arrangements – generally the Local Authority is the lead commissioner for these services and recovers 50% of the service cost from the NHS
Market Opportunity
You need to think about your service offer in relation to social care and health care needs

- **NHS Continuing Healthcare** – these are situations where an individual has an assessed primary healthcare need and this has been agreed with the NHS. Here, the NHS is fully responsible for the cost of meeting that person’s needs, commissioning the service(s) and case management.

- **Shared funding** – these are individuals who do not have a primary healthcare need and are not eligible for continuing healthcare funding but they have health needs over and above what Adult Social Care can provide. Generally the Local Authority is the lead commissioner and recovers an agreed percentage or amount from the NHS.

The lead for health commissioning is the North Tyneside Clinical Commissioning Group.

The Local Authority and the Clinical Commissioning Group are looking at the opportunity of developing pooled budgets and lead commissioning arrangements for learning disability services.

The framework to develop and support this has been agreed in principal by the Learning Disability Integration Board.
Population and Demographics for North Tyneside

National prevalence data on learning disability shows that approx 2% of the population has a form of learning disability with approx 0.5% of those individuals known to Adult Social Care.

For North Tyneside with a population of 197,200 this prevalence rate equates to 3,948 people with a learning disability, although as at 31 March 2016 there were 588 people in receipt of a personal budget / commissioned service, including direct payment / individual service fund arrangements.

Of the 3,948 people with a learning disability:

- **3,037** people aged 18-64 in North Tyneside are predicted to have a learning disability.
• **680** people aged 18-64 in North Tyneside are predicted to have a moderate or severe learning disability.

• **179** People aged 18-64 in North Tyneside are predicted to have a severe learning disability.

### Future Numbers and Demand

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2014</th>
<th>2016</th>
<th>2018</th>
<th>2020</th>
<th>% Inc</th>
</tr>
</thead>
<tbody>
<tr>
<td>People aged 18-64 predicted to have a learning disability</td>
<td>3,037</td>
<td>3,060</td>
<td>3,090</td>
<td>3,116</td>
<td>3,129</td>
<td>+ 3%</td>
</tr>
<tr>
<td>Of which moderate to severe</td>
<td>680</td>
<td>688</td>
<td>697</td>
<td>705</td>
<td>712</td>
<td>+ 4.7%</td>
</tr>
<tr>
<td>Of which severe</td>
<td>179</td>
<td>181</td>
<td>183</td>
<td>185</td>
<td>187</td>
<td>+ 4.9%</td>
</tr>
</tbody>
</table>

Over the next 10 years we will have an increasing number of people with a learning disability in North Tyneside with the largest increase relating to numbers of people with a severe learning disability.

### Transition

Adult Social Care is currently tracking children with a learning disability who are likely to have a costed care package from the age of 16. On average there are 15 -20 children in transition in any one year.

This involves having a social worker linked into the Children with Disabilities team and becoming increasingly involved with the individuals as they near the age of 18. Part of this work is to:

- Identify an indicative personal budget at an early age (age 16) so the individual and parent / carer can understand better their future funding needs and the funding likely to be available from the age of 18
- Consider requirements for a continuing healthcare assessment at an early stage in the transition process.
- Adults and Children’s Commissioning Teams to work more collaboratively across transition to support operational social work teams and identify services and options at an early stage in the process
- Link commissioning into the 0-25 agenda and better understand the profile of individuals in transition and likely timescales for service demand
Older People with a Learning Disability

We have 50 people with a learning disability that are in over 65 years of age and who are in receipt of services.

Most of these services relate to residential care, day support and supported living services.

Of the 50, 11 people are in high cost services (3 in residential care and 8 in supported living services) where the cost of the care is more than £750 per week, these services will need to be reviewed to look at the service delivery model and the individual needs of clients.

Perceptions of Service Users and Family Carers

It is important that the views and comments from service users and family carers are sought about current services that are in place. This will be identified as part of the social worker led annual review by the Community Learning Disability Team.

It is also important for service users and families to have an opportunity to offer their views about any changes to services generally or for new services that are to be developed. It is expected that where new services are to be developed, appropriate representation will be sought from the Care Forum and the User forum to gather people’s view.

People with a learning disability want the same opportunities in life as for the wider population including access to housing and transport, a good social life, a job and having a range of different life skills to be as independent as possible.

Research for the Foundation for People with Learning Disabilities – Thinking Ahead reported that:

- Parents have an extremely high level of anxiety and fear about the future;
- 85% were either “worried” or “very worried” regarding whether their son/daughter would get the support they need;
- Parents have very little trust in “the care system” to help them plan for the future;
- Professionals spend very little time talking with parents about future plans;
- Parents feel it is a battle to secure appropriate care and they often lose it;
- There is a lack of clear and accurate information to help with planning;

Where concerns or issues are raised, the Local Authority will always listed to those concerns and strive for improvement and to remedy them wherever possible.
How We are Spending the Budget on Learning Disability Services

Learning Disability Budget

The gross budget we have for Learning Disability services in 2016/17 is as follows:

![Pie chart showing budget allocations]

<table>
<thead>
<tr>
<th>Service Area</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Miscellaneous</td>
<td>£332,100</td>
<td>1.52%</td>
</tr>
<tr>
<td>Direct Payments</td>
<td>£3,555,511</td>
<td>16.28%</td>
</tr>
<tr>
<td>Adult Family Placements</td>
<td>£700,000</td>
<td>3.21%</td>
</tr>
<tr>
<td>Individual Service Fund</td>
<td>£1,400,000</td>
<td>6.41%</td>
</tr>
<tr>
<td>Residential Care</td>
<td>£3,766,740</td>
<td>17.25%</td>
</tr>
<tr>
<td>Day Care</td>
<td>£1,293,508</td>
<td>5.92%</td>
</tr>
<tr>
<td>Supported Living</td>
<td>£9,202,867</td>
<td>42.15%</td>
</tr>
<tr>
<td>Sub-total Commissioning</td>
<td>£20,250,726</td>
<td></td>
</tr>
<tr>
<td>CLDT</td>
<td>£728,465</td>
<td>3.34%</td>
</tr>
<tr>
<td>In House</td>
<td>£855,937</td>
<td>3.92%</td>
</tr>
<tr>
<td>Sub-total Other</td>
<td>£1,584,402</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>£21,835,128</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

There are a number of areas of income against this budget and this comes from a number of sources, the estimate for this income in 2016/17 is £6,540,000:

- NHS / Clinical Commissioning Group – joint funding, S117 aftercare
- Client contributions

The net total budget is for learning disability services is £15,295,128.
We have seen an overall decrease in the Adult Social Care budget over the last five years and at the same time an increase in the overall numbers of service users receiving services funding (all client groups).

Spend profile data

Analysis of learning disability spend profile over the period 2014/15 shows that we are spending more than £1m per annum with four care providers and over £500k per annum with seven care providers.

<table>
<thead>
<tr>
<th>Spend Profile (per annum)</th>
<th>Number of Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Over £1m</td>
<td>4</td>
</tr>
<tr>
<td>£500k to £1m</td>
<td>3</td>
</tr>
<tr>
<td>£100k to £500k</td>
<td>20</td>
</tr>
</tbody>
</table>

We want to develop a proportionate “supplier relationship management” model whereby we work more collaboratively with these seven organisations with the aim of a better understanding of their business models and service provision, more focus on service delivery and contract management arrangements, a better understanding of service costs and how efficient they are and improving the communication flow, whilst at the same time ensuring services are safe, choice, quality of care and continuity are maintained.

This will allow us to understand that element of the market further and to then consider how this can be considered with other segments of the market.

Transforming Adult Social Care – shaping the future today
VFM profile

We know that we are spending proportionally more on people with a learning disability than other neighbouring local authorities. We also know that the unit cost for services in North Tyneside is high than our comparator group of other North East Local Authorities.

Over 50% of the net Adult Social Care budget is spent on learning disability services. This has increased from 41% in 2013/14.

Source: Health and Social Care Information Centre – www.hscic.gov.uk
Expenditure per 100,000 of the population has fallen but still remains high in comparison to a range of other Local Authorities.

**Budget Pressures**

The main budget pressures facing the learning disability budget are:

- **Standstill pressures** where current spend exceeds budget provision, including changes to overnight support costs and the impact of the introduction of the National Living Wage in April 2016
- **Demand led pressures** – individuals coming through transition from children’s services or being discharged from hospital
- **The Council’s Creating a Brighter Future programme for 2016/17** identifies a number of service changes to learning disability services:
  - Continue with the review of services and support for people living in supported living services, including developing new housing options
  - Review of learning disability day services, including unit costs and service levels
  - Bring together the adult Community Learning Disability Team and the Children with Disabilities Team into a new single Whole Life Disability Team
  - Shared lives – continue to increase the numbers of shared lives carers
  - Residential care – review placements, in borough and out of area

We have invested in learning disability services to ensure that previous quality issues have been addressed and that external inspections have a level assurance about the overall services that are delivered. We now need to address the high cost of services and we are doing this by:

- Review individual services / costs to ensure value for money is being achieved
- Work with the wider market to identify opportunities
- Work with providers, carers and users to achieve overall efficiencies in service delivery, whilst still maintaining service quality

**Market Opportunity**

We want to work in partnership and collaboration with all stakeholders to identify opportunities for efficiencies
Adult Social Care – Market Position Statement for Learning Disability Services

Current Service Provision and Opportunities

There are a range of different services in North Tyneside to meet the needs of people with a learning disability. Most of this is commissioned from external providers but there are a small number of services that are delivered internally by the Council.

The overall range of commissioned services includes:

- Residential care
- Supported living
- Housing provision
- Respite
- Community support
- Internally provided services
- Out of area services, mainly residential but some day services

These services support people with a wide range of learning disabilities and associated needs, including

- Severe and profound
- Learning and physical disability
- Challenging behaviours
- Autism
- Forensic

Residential Care

There are a number of registered residential care services in North Tyneside that support people with a range of different needs.

Through the remainder of 2016/17 we will be reviewing our use of residential care and the model of service delivery so that we are really clear about the focus for these services as compared to supported living or other accommodation based services, ie shared lives.

There is a wide cost range for these services (£380 per week to £2800 per week) and the review will highlight these services and individuals.
A cost model is to be developed around this to look at two elements of service delivery to meet assessed and eligible needs, the cost model will focus on:

- Core cost of residential care, including premises, basic staffing levels (as identified by CQC), general operating costs etc
- Additional care / support costs relating to the specific needs of individuals, this might relate to 1:1 support (over and above the staff included in the core costs), training needs, adaptations to the property or equipment needed to support

We currently have 79 people in registered residential care with 27 people in relatively standard placements costing less than £400 per week. There are a further 26 in placements costing between £400 and £1000 and a further 26 in placements costing more than £1000 per week with the most expensive being just over £2800 per week. The review will focus on those in high cost placements. The average cost is approx £925 per person per week.

The overall projected spend on residential care services is approx £3.8m per annum and accounts for approximately 17% of the learning disability spend gross spend.

The emphasis over recent years has been on supported living services rather than residential care. We have also developed and will continue to develop the Shared Lives offer as an alternative to other accommodation based services. This includes long term as well as respite services.

Of the 79 people in residential care, 23 are in out of area placements. We will seek to identify options to bring people back to North Tyneside and look for alternative care and support solutions to do this. This will include:

- Shared lives / adult family placement service
- Supported living, either via a de-registration process or developing new supported living opportunities

A new Dynamic Purchasing Framework agreement is to be established for residential and nursing care services in North Tyneside. This will ensure that all residential care providers are “accredited” and meet minimum criteria, this work will start through 2016/17.

This will also allow for new residential care services (subject to demand) to be commissioned once the framework agreement is in place.

**Supported Living**

We are currently reviewing all of the Independent Supported Living (ISL) services across North Tyneside to ensure the service levels are right and that services are offering value for money.
The key principles underpinning the ISL services are:

- People living together and accessing shared / core service offer within the house, where this is appropriate
- A flexible and responsive service to meet eligible needs
- Use of assistive technology to promote independence
- Use of and access to a range of community based services

We are currently spending £9.2m on supported living services across North Tyneside (this equates to 42% of the gross budget) and is set to increase as more ISL services are commissioned. The average cost of an ISL service is approx. £65k per annum.

A new specialist health and social care ISL framework is to be put in place in 2016, this will be targeted at those individuals that have complex health and social care needs and will support people coming out of hospital.

The current ISL and community support framework agreements run to 31 March 2017. Work to establish a new ISL and community support framework for five years commencing 1 April 2017 will start for the procurement and contract award to be completed by the end of 2016. This will put in place a new framework agreement for current / existing services as well as for commissioning new services after 1 April 2017.

Housing Provision

Individuals will be supported to live in their own home in the community. It is recognised that in some situations, that shared models of care and support can help to maximise independence, integrate people in their communities and offer the right level of support when needed. What people prefer in terms of their ‘own home’ will differ based on location, type of housing, what they can afford and what is available to access in the market at that point in time. For most people, selecting somewhere to live is the ‘best fit’ of what is needed.

An important factor in the delivery of a high quality, cost effective ISL service is the availability of suitable and appropriate housing across North Tyneside. We want to ensure that the range of housing opportunities links to the following principles.

Properties should:

- Be fit for purposes
- Have affordable rents within housing benefit levels
- Offer sharing opportunities for people who wish to share, where this is appropriate and where the individuals can adapt and get on, while maintaining personal space;
- Offer an opportunity for sharing care and support with others whether they live alone or live with others;
- Primary requirement will be for rented but there may be some opportunity for mixed, ie buy/rent.

We want to work proactively with Care Users / Carers, North Tyneside Homes, Registered Providers, and the Private Sector to develop housing opportunities over the next five years and ensure that people have the ability to influence the location and design of these. This will support the development of good quality, modern housing provision where individuals have their own space and the care and support is delivered in a cost effective and efficient way to maximise individual’s independence and achieve desired outcomes.

It is important that decisions made by developers are made on a good evidence base. This would include ensuring:

- They development is aligned to the values and principles for xxxxxx;
- It is in line with the requirements as set out in the learning disability market position statement;
- There is a demand for this development;

In order to take advantage of this, you need to talk to:

- Adult Social Care Commissioning - via Scott Woodhouse, 0191 6437082, or scott.woodhouse@northtyneside.gov.uk
- Service users - via the Service User Forum, contact would be via Liz Wright at Skills for People, 0191 2818737, or liz.wright@skillsforpeople.org.uk
- Carers - via the Care Forum, contact would be via David Robinson at LD:NE who is chair of the Forum, 0191 2622261, or david.robinson@ldne.org.uk

In order to satisfy the principles above particularly around shared care and support, it is imperative that affordable housing models are put in place that balance people’s preferences for housing with cost effective models of care and support provision. In order to satisfy this requirement, it is intended that there would be a wide range of housing options for people including:

- Single dwellings (self contained units) within an area / location where there are a number of other single dwellings, may be similar or a range or property types, ie bungalow, apartment, house;
- A range of housing within a single site such as self contained or shared apartments with access to communal space;
- A number of 3/4 bed shared properties within the same street or within a couple of streets of each other.
The Enablement Team will work closely with individuals to understand their preferences for housing. Analysis of this indicates that the majority of people with a learning disability currently involved with the Enablement Team say they want to live independently either by themselves or sharing a home with 2-3 friends. Most people with a learning disability want to live as independently as possible and the Local Authority would want to support them to do this. They want a range of different types of properties, including houses, flats or bungalows and for them to be near to transport links, shops, health services and community provision. Many would like a garden or some outdoor space to sit and also to grow things. The most popular areas are:

- Whitley Bay,
- Shiremoor,
- New York,
- Howdon
- North Shields.

Individuals will be supported to live independently in the community in their own homes and this can be singly or sharing with others. Sharing of care and support arrangements across a number of people can be more cost effective.

However, where this is in current traditional shared living services, we know that it can be difficult to fill voids and that sharing and compatibility of individuals needs to be carefully considered.

An important factor in the delivery of a high quality, cost effective ISL service is the availability of a range of suitable and appropriate housing in North Tyneside. The properties must be:

- Fit for purposes
- Have affordable rents within housing benefit levels
- Offer sharing opportunities, where appropriate
- Primary requirement will be for rented but there may be some opportunity for mixed, ie buy/rent
- Be suitable for shared provision

We want to work with Care Users / Carers, North Tyneside Homes, Registered Providers and the Private Sector to develop housing opportunities over the next five years. This will support the development of good quality, modern housing provision where individuals have their own space and the care and support is delivered in a cost effective and efficient way to maximise individual’s independence and achieve desired outcomes.

The housing offer will support people to live independently in the community and can range from individual single person services, through to group / shared living to larger schemes as
identified in the housing MPS. This learning disability MPS sets out this requirement, the provision of the right housing will be subject to:

- Choice
- Affordability, housing and care costs
- Compatibility, where applicable

This will be demand led and consideration will be through a social work led assessment process and how much funding is generated through a personal budget. Generally the cost of a single person service will be more than the funding available through the calculation of an individual’s indicative personal budget.

**Market Opportunity**

New framework agreement to be established

An accommodation and care framework agreement is to be set up in 2016/17 to identify a range of developers to work with the Council on various housing developments

**Respite Services**

A new six bed accommodation based respite service has been commissioned to meet the needs of the most vulnerable and complex individuals.

A number of people who have previously accessed accommodation based respite provision have been encouraged and supported to access a range of non-accommodation based services, very often this is done in small groups or with friendships to ensure costs can be shared across a number of people.

**Market Opportunity**

Develop a range of support services to give main carers a respite break

We want to continue to expand this service offer to give greater choice and control to individuals to be able to use their personal budgets differently and to access a range of different things and at the same time give their carers a respite break

**Community Support and Personalisation**

The current framework agreement runs to March 2017 and work will be underway in 2016/17 to develop a new framework agreement from April 2017. This will cover a range of services from traditional day services to the provision of enabling support for people to access the community.

Spend in this area is currently £1.3m (6%) and covers a
range of services where people access them on varying levels, such as day services, enablement / outreach support.

Current providers of traditional services should look at their service offer in light in new people wanting to access flexible and responsive services with their direct payment.

In learning disability services we have 490 people (90%) on a personal budget. Of these 229 people (42%) are in receipt of a direct payment, this is over half of all people with a direct payment supported by Adult Social Care.

Over the last three years we have seen an increase in spend on direct payments, where individuals are receiving the funds directly and managing their own support plans. Individuals are becoming their own commissioners and providers need to be aware of this shift in emphasis and purchasing power from the Local Authority to individuals. There is an opportunity for providers to review their service model and look at how their service offer is able to meet the needs of individuals in a flexible and responsive way.

Current projected spend for direct payments and individual service funds for people with a learning disability clients in 2016/17 is projected to be £6m, an increase of £2m from 2014/15.

Adult Social Care is currently developing a pool of Personal Assistants to support individuals with a direct payment. This is in response to feedback from Users and Carers about the problems of finding good quality “approved” Personal Assistants to be able to use and access with their direct payment.

In addition to this we want to develop a range of asset based community developments for people with a learning disability as well as the wider group of people that Adult Social Care are involved with.

This does not mean a transfer of responsibility of duty to meet need but is in line with central Government policy to make the most from social capital and help people access support which is delivered by and for the communities they live in.

This can include things like:

- Volunteering
- Peer support
- Access to free or low cost community services
  - Sports and leisure

Market Opportunity
Develop a pool of Personal Assistants that people can easily access

Market Opportunity
Increase the opportunity for people to take a direct payment / individual service fund to access services directly

Market Opportunity
Maximise access to community based assets and social capital
Market Opportunity
See an increased usage and access to Shared Lives Services for both longer term care / support and also to support respite care.

Internally Provided Services

The current internally provided service offer includes:

- Shared lives service
- Enablement service

The current internal service provision costs approximately £855k per year. There has been an on-going focus over the last three years to complete value for money reviews and where appropriate to externalise these services and commission these from external providers. This is in line with our commissioning priority.

The on-going focus for the internal service will be on Shared Lives and Enablement. The Enablement Service will however become more linked to the Community Learning Disability Team and will support the overall assessment process and work more closely with longer term providers to maximise the independence and skills of people in receipt of costed services.

We want to invest in Shared Lives and develop this service further and ensure there is capacity in the service for new referrals. With the closure and re-design of respite provision we have seen an increasing number of people accessing this service for respite.

The Shared Lives Team will therefore seek to recruit new shared lives carers and promote the usage of the services, we are also looking at how this service may further develop for other client group, other than just learning disabilities, including those people with complex and challenging needs.

Out of Area Services

This mainly relates to residential care and day services.

We have 26 people living in 17 residential care homes outside on North Tyneside. The overall cost of these services is £1.6m per year. During the course of this year we will look
at each of these placements to review the reasons they are living there and the associated costs with these services.

**Service Quality**

We use a number of methods to gather data and intelligence to inform us about service quality and value for money.

This can be at an individual provider level as well as at a service level, i.e., residential care, supported living etc.

The sources of information relating to service quality are:

- Contract monitoring
- Quality monitoring visits
- Safeguarding reports
- CQC inspections
- Positive and negative feedback from users, carers etc
- Community Learning Disability Team (Health and Social Care)

The sources of information relating to **service cost** are:

- Spend data
- Activity levels
- Benchmarking – local and regional

Value for money is the balance and relationship between economy, efficiency and effectiveness and takes account of service cost and overall levels of service quality, this is where:

- **Economy** – The price paid for what goes into providing a service. Economy is about minimising the cost of resources for an activity (‘doing things at a low price’).
- **Efficiency** – A measure of productivity – how much you get out in relation to what is put in. Efficiency is primarily associated with the process and delivery i.e. performing tasks with reasonable effort (‘doing things the right way’).
- **Effectiveness** – A measure of impact achieved and can be quantitative or qualitative. Outcomes should be equitable across communities, so effectiveness measures should include aspects of equity. Effectiveness is primarily associated with the outcomes for customers i.e. the extent to which objectives are met (‘doing the right things’).

Value for Money is good when we achieve a balance between all three elements; relatively low costs, high performance and successful outcomes for the public.
Over time we want to see increased service quality and more affordable value for money services being delivered.

We also want to see a correlation between service costs and quality. From recent quality monitoring visits of learning disability supported living services there is a wide variance between service quality and service cost.
The key messages from Service Users and Carers are:

- They want to have a say in how their services are provided and who delivers them and that personalisation offers real choice and control to them
- People really value the services they receive and do not want these services to change unnecessarily
- People want to have access to the things others take for granted, ie house, social life, job, leisure activities
- To have the opportunity to make new friendships and to do things together in the community and how the personal budget can be used to access these services
- They want to have a voice and make sure it is heard
- Have the benefits of a direct payment but without the hassle of dealing with the money
- Parent / carers are concerned about what will happen to their son / daughter when they are no longer around and that services are of high quality and safe
- Greater involvement in commissioning of services and service design and communication about any potential changes to service provision
- More information and guidance about the range of different services that are on offer and how these can be accessed
- Access to suitable housing in the area they want to live and houses that are close to areas for social activities, good transport links
- Support to get a job or on a plan into employment or volunteering opportunities
- Support for the role of the Planning Café to support how personal budgets are used
- More involved and aware of changes to funding in the Local Authority and any impacts of learning disability services
The key messages from Providers are:

- They are keen to get involved and develop alternative services to support people but sometimes need some assurances from Commissioners that this is OK.

- Clarity on how personal health services and personal health budgets will be rolled out in North Tyneside.

- Understand better about what the Commissioners want from services and how they can be better placed to deliver on this.

- Understanding of the impact of the Care Act and how it affects Service Users and the services delivered.

- Certainty about funding arrangements and service levels from commissioners.

- Information on joint commissioning arrangements between Social Care and Health and what it means for them.

- Better information on continuing healthcare and shared funding and how they can help support this for individuals.

- Commissioners to better understand the businesses of the services that are being delivered and to see the challenges Providers are facing.

- Concerns about service costs and cost pressures they are facing, ie living wage, pensions etc.
Summary of Key Market Messages

The key market messages contained within this MPS are that we want to:

- Make sure your organisation is registered on the NEPO portal.
- You need to think about your service offer in relation to social care and health care needs.
- Develop a supplier relationship management approach with the top seven organisations that we spend most money with.
- Older people’s residential services need to be able to respond and meet needs of people with a learning disability who are becoming older and more physically frail.
- We want to work in partnership and collaboration with all stakeholders to identify opportunities for efficiencies.
- See an increased usage and access to Shared Lives Services for both longer term care / support and also to support respite care.
- Review the use of and cost of registered residential care both in North Tyneside and out of area and consider the option for people living in a care home outside of North Tyneside to come back to the borough.
- Develop a range of support services to give main carers a respite break.
- Increase the opportunity for people to take a direct payment / individual service fund to access services directly.
- Increase usage of assistive technology across a range of service areas to reduce the dependency of staff support and create opportunities for individuals to maximise their potential for independence.
- New ISL specialist health and social care framework.
- New ISL and community support framework from 1 April 2017.
- Development of supported living with self contained accommodation and a single staff team to maximise the opportunity of shared care.
- New housing framework agreement to be established.
- Maximise access to community based assets and social capital to ensure that personal budgets can be “stretched” by people accessing a range of non-traditional services to meet their assessed needs.
- Develop a pool of personal Assistants that people can easily access.
- Ensure services are set up with high quality standards and a culture of continuous improvement and an outcomes focus to service delivery and that individuals are supported to access a range of primary and secondary health care services.
- Ensure that reablement provision is embedded in service delivery and is focussed on maximising the abilities of individuals and providing high quality information to feed into an assessment process for longer term community based care and support.
If you need any further information on this Market Position Statement or Learning Disability services in North Tyneside, please contact:

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