

Sheffield City Council

Commissioning Strategy for services for people with a learning disability and their families

2015 - 2018



Foreword

I am pleased to introduce you to our Learning Disabilities Commissioning Strategy.

We want to make a positive difference to the lives of people with a learning disability and their families in Sheffield. This strategy describes the changes and improvements we plan to make to care and support services in Sheffield. These changes are based on what people have told us, what we know about the needs of local people with a learning disability and their families, the challenges we face, and the opportunities we have identified to help make things better.

Between September and November 2014 we consulted on our draft strategy. We engaged with people with learning disabilities, their families, carers, care professionals and other stakeholders to help shape our ideas. The feedback has been taken into account in this final version of the strategy, which was approved by the Council's Cabinet in December 2014.

Now we have produced this final strategy, we will develop detailed commissioning plans for specific changes and consult on them. For example, where the commissioning plans recommend changes to specific services, we will consult with users of those services on these changes. We want change across the whole system, and for people of all ages with a learning disability. We will develop these plans with our partners across the Council and in the NHS, including working together with the Children Young People and Families Portfolio.



Cllr Mary Lea

Cabinet Member for Health, Care and Independent Living

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1. Introduction

The needs of people with a learning disability are changing and becoming more diverse. People have higher expectations of an independent life in their community, and want more control over their lives with good quality support built around their individual needs.

At the same time we face significant challenges. Some local services are out of date, expensive, and need to change if we are to meet people's expectations for the future. Other services, including some housing options, are poor quality and need improving. In the past some people have had to leave Sheffield to access the services they need. We need to make sure this no longer happens, that all support is provided locally and that people who live away from Sheffield can return if that is what they want.

The Council faces severe financial pressures. People are anxious about the impact this might have on their own care and support: there is a need to make sure services provide the best value so people can get the most from the available resources. We need a more diverse range of good quality care and support services to meet people's highly individual needs and ensure real choice. We also need culture and practice to change so that support builds on individual, family and community resources and reduces people's dependency on social care services as the only form of support. And we need strong partnerships to make sure the 'whole system' helps people with a learning disability and their families stay independent, healthy and well, and fully included in community life.

This Commissioning Strategy responds to these challenges. It builds on work already in place to improve learning disability services in Sheffield, and proposes significant changes in the way services will be commissioned and provided in the future.

2. Vision

Our vision is that in four years' time:

- All services will provide high quality care and support to people with a learning disability and their families.
- Services will actively promote people's wellbeing, helping them have a good life and be as independent, healthy and well as possible.
- Local support services will be more diverse so all people with a learning disability in Sheffield, whatever their age, background, or level of need, will have more choice in their support.
- Social inclusion will be promoted throughout everything we do. More people with learning disabilities will be doing more within their community. Support will build on resources in the community, tackle barriers to social inclusion and reduce dependence on social care services alone. We will have stimulated creative and innovative ways to make this happen.
- More people with learning disabilities will be in paid work and volunteering opportunities, working alongside the rest of the community.
- There will be major improvements in the support for family carers, improving the support available to carers in their own right, and making life better for people with learning disabilities who live in the family home.
- There will be major improvements in local accommodation and support for people who live away from their families. Housing will be high quality and the support will promote people's independence and wellbeing and will offer dignity and privacy.
- Fewer people with a learning disability will live out of the city, and people who need and want to return will have been helped to do so.
- Sheffield will have moved away from traditional or institutional forms of support and will focus on support which is personalised, flexible and meets people's individual needs.
- Services will help people work together and pool their personal funds so they can share their support and sustain meaningful and rewarding relationships.
- There will be more coordinated information about services and support across all relevant agencies
- The transition for young people with a learning disability to adulthood will be positive
- There will be strong partnerships between the Communities Portfolio, Children, Young People and Families Portfolio, Place Portfolio and NHS partners to make sure support is joined up.
- All services will provide best value for Sheffield people.
- In four years' time people will say they have been fully included and involved in the planning and implementation of changes.

To achieve this vision, some services will need to change. We understand that changes can create anxiety and we will be respectful of this. We will engage with people with learning disabilities, their families and carers throughout the development of plans and make sure their needs continue to be at the forefront of all that we do. We will make sure changes are implemented sensitively and allow people enough time to make successful transitions to new arrangements.

3. The Scope and Context

3.1 Local people with a learning disability and their families

Over 1,550 adults with a learning disability aged 18-64 currently receive adult social care arranged by the Council. People with a learning disability have a wide range of needs, with a range of backgrounds and live within all of our increasingly diverse communities. They include people with lower level needs for support and people with significant additional needs - including people with dementia, physical disabilities, sensory impairments, mental health problems, profound and multiple intellectual disabilities, autism or behaviours that services find challenging. They also include people who need short term support to help them regain their independence, people needing social care for the first time and people receiving longer term ongoing health, housing and social care services. Approximately 40% of all people with a learning disability receiving adult social care live with their family and approximately 60% live away from their family.

This all means local community-based services must be as diverse and flexible as possible, and develop in ways that reflect people's increasingly varied and changing needs.

3.2 Local services for people with a learning disability

This strategy is about the care and support services that can be purchased or provided to meet the needs of adults with a learning disability and their families. The majority of services are currently provided by a range of Independent Sector organisations (voluntary sector, private sector, social enterprises and self-employed people e.g. personal assistants). Services are also provided directly by the Council and by Sheffield Health and Social Care Trust. Some people have 'packages' of a number of different services provided by one or more of these. This strategy covers services in all these sectors. The gross budget for these services is approximately £44 million per year. More information on this is given in [Section 6](#).

It includes a number of services that may be purchased by the Clinical Commissioning Group, including people eligible for NHS Continuing Healthcare. There are strong links with the Council's Regeneration and Development Services in the development of our local housing offer, and strong links with the Children, Young People and Families Portfolio, including the Employment and Skills Service.

Adult social care provided or funded by the Council includes:

- Support for family carers, including short breaks services
- Home support services
- Support for people in the community such as support for day time opportunities, volunteering and employment
- Accommodation and support services such as supported living, residential and nursing care
- Adult Placement Shared Lives services, such as befriending, day support, short breaks services and long term placements
- Direct Payments for people or families who want to make their own arrangements for support. This can include paying for support from personal assistants
- Help for people to manage their Direct Payments – such as money management services
- Advocacy support

The strategy also prioritises development of local services so that people do not need to leave Sheffield to access the support they require. This will help people who live out of the

city to return to Sheffield if that is what they want to do with access to the appropriate levels and types of services.

There have been many changes to services for people with a learning disability and their families over recent years, and other changes to learning disability services are taking place now. All of these changes aim to contribute to the overall vision.

3.3 A whole system approach

The strategy does not include everything that has an impact on adult social care for people with a learning disability. Other key developments, including our implementation of the requirements of the Care Act 2014, the Children and Families Act (2014) and our Integrated Commissioning Programme will have significant impact on wider Learning Disabilities services. For instance, it does not include the development of social work practice or our plans to integrate commissioning for all customers of health and social care.

All organisations and agencies are committed to working in partnership as we develop and implement specific plans over the next three years. This will include joint or integrated commissioning plans with Children's services, housing and HNS partners where this will benefit local people with a learning disability and their families.

4. What Local People Want From Services

4.1 Engaging with people with a learning disability and their families

This strategy is based on detailed consultation with people with a learning disability, their families and other stakeholders. Details of how we carried out the consultation and the detailed feedback are presented in a separate report.

4.2 Key messages for our Commissioning Strategy

The consultation greatly added value to the draft strategy and enriched the evidence base. Feedback was broadly supportive of the direction set out in the strategy. However, additional issues were raised, and there was a need to change the emphasis in places. The feedback has been fully taken into account in this final strategy.

- **Coordination** – the strategy needs be joined up with Assessment and Care Management, Children’s services, Health, Housing, and other partners.
- **Support to carers/families** – there should not be an assumption that people with learning disabilities will remain living in the family home, and there must be planning ahead and support to prevent carer breakdown.
- **Support to live in your own home** – there was broad support for Supported Living and tenancy support models.
- **Support for community involvement** – there was broad support for this aspiration but specific support for people with learning disabilities is needed to help them take advantage of community opportunities and to support social needs, and there needs to be more to do in the evening and at weekends. There are also a number of barriers, including transport, costs, people’s perceptions of safety, and lack of information on opportunities in the community.
- **Doing things together** – there was a strong theme on the importance of people with a learning disability being supported to take part in communal activities, and that many people enjoy and appreciate friendships and shared experiences. People also said they would benefit from support to pool their personal funds so they can benefit from doing things together, and share their support so the available funding can go further.
- **The impact of reductions in available funding** – there were concerns that there will be insufficient resources for people to access more community activities (e.g. if they need support from Personal Assistants to do this).
- **More choice in short breaks services** – people with learning disabilities and their families need more choice and information about good quality affordable short breaks. People whose behaviours services find challenging need better choices of building-based short breaks services.
- **Quality assurance** – people need assurance that all services in all sectors of the market are of high quality.
- **People need time to adjust to new arrangements** – when things change, people need time and support to adjust to new support arrangements. This should not be under-estimated when implementing changes.
- **Barriers to paid work** – many people talked about wanting paid and unpaid work but there are mixed views, and the impact it might have on people’s benefits is seen as a major obstacle.
- **Broad spectrum of need** – it is important to recognise the wide and increasing diversity of need of people with learning disabilities, including people with complex and multiple disabilities and behaviours viewed as challenging.
- **Building-based services** – whilst people support the aspiration for more flexible community based services, many people, in particular people with complex needs,

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benefit from services based around buildings with the right environments and the right specialist support

- **Advocacy** – people said there is a need to make sure our plans for the future include plans for advocacy services.

5. The policy context

This strategy has been developed in line with local and national policies, with a focus on providing high quality care that promotes independence, social inclusion, choice, and provides best value. A summary of the relevant policies is provided below.

The [Care Act 2014](#) reinforces national policy for adults with a learning disability, including the core principles in [Valuing People \(2001\)](#), and [Valuing People Now \(2008\)](#): rights, independence, choice and social inclusion. The Act consolidates existing law, and introduces a number of new duties on local authorities. It emphasises the requirement for services to actively promote improvements in people's wellbeing through the care and support they provide at all stages, from the provision of information and advice to reviewing a care and support plan. It brings new entitlements for carers. It reaffirms the principles of personalisation, legislating for Personal Budgets and requiring local authorities to promote Direct Payments.

Assessments should build on individual, family and community strengths, support access to universal services and aim to prevent, delay or reduce people's dependency on services. The Act brings a duty to stimulate a diverse market of continuously improving, high-quality services, including a range of different service provider organisations to ensure genuine choice. Councils must commission a diverse range of services that provide best value for local people. Transitions for young people with a learning disability into adulthood must be effective. The duty of co-operation will help drive our partnership working.

The 'Winterbourne Concordat' and 'Winterbourne View – time for change' will underpin this strategy. Stronger local community-based services will build on the Concordat's five good practice indicators: co-production, community building, a capabilities based approach, integrated services and personalisation. The requirements for strong joint approaches including pooled budgets, integrated commissioning and genuine partnerships with people with a learning disability and their families, and a 'whole life-course' approach will further strengthen our partnership working.

The [Health and Wellbeing Board](#) and [joint Health and Wellbeing Strategy](#) strengthen whole system working to improve health and wellbeing, tackle inequalities, make sure people get the right support in the right place at the right time, and ensure best value. Implementation of the Commissioning Strategy will also be aligned with implementation of Sheffield's [plan for integrated commissioning of health and social care](#) for people of all ages, which sets out four main areas for integrated working: keeping people well in the community, intermediate care, community equipment, and long term high support.

The Care Act, along with the [Children and Families Act 2014](#) has specific implications for effective progression to adulthood and reinforce our commitment to a 'life-course' approach to supporting people with a learning disability and their families. The new Children's Act also replaces Special Educational Needs statements with a new 'birth to 25' Education, Health and Care Plan, improving cooperation between Councils and the NHS and requiring Councils to publish a 'local offer' of support. It is essential the local 'birth to 25 offer' is aligned with the service offer for all adults with a learning disability.

6. The Social and Economic Context

6.1 Demographic change

The number of adults with a learning disability is increasing and their needs are becoming more complex.

It is good news that more children with major disabilities are surviving into adulthood and more disabled adults are living into older age. However the overall gap in life expectancy between people with a learning disability and the rest of the population has not reduced.

The number of adults (20+) recorded by Sheffield Case Register increased from 1,950 to 2,671 over the ten years between 2003 and 2013 - approximately 4% per year. This is significantly higher than the trends given in the national 'Projecting Adult Needs and Service Information' resource, which estimates increases around 0.5% a year. There is no evidence of specific demographic pressures in Sheffield that might explain the difference: further work is needed to understand the national projections, and the balance between actual population change, and increased identification by local services.

The increase in numbers is principally due to a rise in the number of younger people with a learning disability, in particular children with more severe and complex needs, and children with autism. (Over 50% of 10–20 year olds known to the Case Register have a diagnosis of autism). Our plans therefore need to make sure local services deliver good quality skilled support for people with an increasingly diverse range of needs, both in family and community settings and in accommodation with support away from the family. This requires a joint approach with NHS partners.

The proportion of adults with a learning disability from black and minority ethnic communities (BME) is around the same for as the White British population in ages between 20 and 50, and lower in over 50s. There is evidence of increased prevalence of people with the most complex disabilities within BME communities.

There is also a 'bulge' in the number of people aged 35 to 50. Many of these people are living with family carers, most in older age. As their family carers age, there will be an increase in demand for accommodation with support away from the family. Supporting families to plan in advance for the future living arrangements of their disabled sons and daughters provides significant reassurance, and helps develop plans that optimise people's future independence and social inclusion.

6.2 Change in demand for services

Over the nine years from 2005 to 2014 the number of adults with a learning disability receiving care and support increased by 35% from 1,136 to 1,531 – again around 4% per year. The proportion of adults with a learning disability supported by the Council per head of the overall population increased from below the England average until 2011/12, to above the average from 2012/13. As with the demographic information, further work is needed to understand the balance between the impact of population increases, and the impact of other factors.

- The biggest area of increase was in younger people. Approximately 60% of the increase in numbers was in young people under 25.
- However 16% of 'new starters' were people who had been living with older family carers, and another 14% were due to breakdown in carers' circumstances.
- Approximately 60% of people live away from family, with either community based support, or in supported living, residential and nursing care settings. If current practice and demand stay as they are, we estimate there would be an increase of

around 200 people living in accommodation with support by 2020.

Our understanding of needs and demand informs our priorities.

- The need to make sure services develop to meet the changing needs and expectations of younger adults with a learning disability, at the same time as meeting the changing needs of an ageing population.
- The need for a more diverse and flexible range of local services to meet the increasingly diverse needs of local people.
- The need to make sure family carers have the right support to care for their disabled relatives at home if that is what they want to do.
- The need to improve the quality and achieve best value in accommodation with support for people living away from their families.

6.3 Budget, spend and best value

The total cost of services for adults with a learning disability is £65m. This includes assessment and care management services and other direct costs. Of this, approximately £44 million per year (gross) is currently invested on direct care provision for people with a learning disability.

The Council has faced several years of austerity as a result of Government cuts to its budget, rising prices, and increases in demand for services. Nevertheless, Sheffield's investment in services for people with a learning disability has increased year on year over the last five years. The budget for 2014/15 is around £3.5 million more than 2013/14. Given the Council's financial challenges, this is an unsustainable position.

In comparison with other authorities, the latest available published 'Personal Social Services Expenditure' information (PSSEX1, 2012/13) shows Sheffield's spend per head on adults with a learning disability has moved from below the national, regional and core cities averages in 2008/09 and 2009/10 to above all these averages in 2012/13.

According to the latest benchmarking information, the average cost of residential care in Sheffield for people with learning disabilities is in the highest quartile in England¹. The average cost of nursing care for people with learning disabilities in Sheffield is also higher than in almost any other area. Costs for home support and day services for people with a learning disability are broadly in line with the England averages.

This Commissioning Strategy must be delivered in the context of reducing Council budgets, and we expect any future changes to help us meet our financial challenges. It is important to make sure all services are delivered in an effective and efficient way, and of high quality. The detailed commissioning plans will make sure all services are good quality and affordable. This will also allow us to make accurate financial forecasts and ensure a sustainable range of provision.

¹ <http://www.hscic.gov.uk/catalogue/PUB13085> PSSEX1 Indicator 2.9

7. What Needs to Change

7.1 Social inclusion

We need a major shift in culture and practice towards promoting people's social inclusion, and reducing people's reliance on institutionalised forms of care as their only form of support.

In the consultation there was broad support for the aspiration to increase people's social inclusion and for more people to be supported to access everyday community opportunities. However many respondents said specific support is needed to help people take advantage of community opportunities and to support social needs, and there need to be better evening and weekend opportunities. People also cited a number of barriers, including transport, costs, people's perceptions of safety, and lack of information on opportunities in the community.

We need to highlight key issues and examples of good practice in promoting social inclusion, strengthen the evidence base and generate new innovative approaches. This will include working with Children's Services, Public Health and the CCG to develop 'whole system' approaches.

Alongside this we need culture and practice in Sheffield to change so it is based on high expectations of people's capabilities and their ability to develop new skills (whether they live with, or away from their families), and recognises that unnecessary dependence on services is 'disabling'. This will require major improvements in the quality of community-based services, including robust, preventative and proactive care.

This will involve innovative new approaches including the rapidly developing assistive technologies. It will include building on Sheffield's strengths as a friendly city to make sure the wider community and universal services are welcoming and accessible to local people with a learning disability. The Special Olympics, to be held in Sheffield in 2017, provides a unique opportunity to draw together partners from all sectors in the city to meet this aspiration.

The implementation of the vision for reducing unnecessary dependency and increasing people's social requires active input from Public Health. We will identify options for Public Health to play a lead role in improving people's wellbeing and social inclusion, and in tackling the inequalities people and their families face in many aspects of their lives.

7.2 Improving employment and volunteering opportunities

A key indicator of social and economic inclusion is the proportion of people with a learning disability in paid employment. This is a key priority for local people. In the consultation the terms 'employment', 'work', 'volunteering' or 'jobs' came second only to the general term 'support' and well ahead of the next most repeated terms. Of the survey respondents, 67% agreed with the aim for more people with a learning disability to have the support to do paid or unpaid work if they want to.

However Sheffield's performance has been consistently lower than other areas at under 4% compared with around 6% for the UK, Yorkshire and Humber and similar Local Authority comparator group averages.

Support to access paid employment is provided by the Council's in house Employment Service and Independent Sector providers. However, providers had concerns about inadequate employment support in Sheffield, including a perception that Government schemes and services (e.g. Jobcentre Plus) were not known about and did not benefit people

with learning disabilities. Some people felt day services still operated a 'teaching' model rather than promoting empowerment, and that there was a need for better co-ordination between Jobcentre Plus and learning disability services.

Welfare benefits issues were also seen as a significant barrier to employment, and the desire to retain non-work benefits had a practical impact on people's appetite for paid work.

Many respondents also wanted improved access to wider community based volunteering activities, especially outdoor opportunities e.g. gardening projects and working with animals.

Improving employment support is a clear priority: there is a need to review our overall approach and clarify responsibilities. This will include working with the city's Employment and Skills service, the Public Health team and our NHS colleagues to ensure a co-ordinated approach to employers and employment support providers.

7.3 Support for family carers

Support for people living with their families and to family carers is a high priority. 'Valuing People' and 'Valuing People Now' both placed a strong emphasis on families' vital contribution to the lives of people with learning disabilities, often providing most of the support they need, and being crucial in ensuring that people with learning disabilities can live in the community. The Care Act gives us further opportunities to change and improve the support available to family carers.

The consultation provided wide ranging feedback from family carers. Many agreed with the emphasis on making sure families have access to high quality support to help them continue caring at home, if that is what they want to do.

Families need reliable and timely information and advice, and reliable communication and support from Assessment and Care Management services. Peer support between families is important. Many family carers value short breaks services, but there was mixed feedback about the quality of the available choices. There is a need for short breaks services to meet the increasingly diverse range and backgrounds of people with a learning disability, and to provide a positive experience for younger people. There is interest in flexible alternatives to building based short breaks services but a clear message that for some people, especially those with more complex needs, building based short breaks services are a positive option.

However, many family carers also stressed there should not be an assumption that they should continue to care at home, and that for disabled relatives to move on and live away from their families is often a positive or necessary option.

In particular, families need the reassurance that comes with being supported to plan ahead for the future. Families also need the assurance that there is flexible and responsive support if they are in crisis, to provide the time and resources needed to resolve problems and help them remain together.

7.4 Making sure people can get what they want from Direct Payments

The number of people with a learning disability and their families accessing Direct Payments more than doubled from 367 at the start of 2010/11 to 901 by the end of 2013/14. The principal uses of Direct Payments are for personal assistants, day time opportunities and supported living services. An increasing number of families (including families of children and young people with a learning disability) now also use Direct Payments for flexible alternatives to building based day and short breaks services.

However feedback suggests that whilst Direct Payments are popular, there is a lack of the right kinds of support for people to purchase, and a lack of reliable information about local

services and opportunities. There is also a need for people to be assured about the quality of support provided by personal assistants. Some people are concerned about the administrative burden of managing Direct Payments.

It is a priority to stimulate diverse, innovative support, based on the feedback from people with a learning disability, their families and support planners, to make sure the right services are available for people using Direct Payments, and that people have comprehensive up to date information about services and opportunities available in the city.

7.5 Moving away from traditional 'blocks' of service

We continue to have significant reliance on 'block' arrangements for services in particular for day time opportunities, supported living, short breaks services and residential and nursing care. This includes the arrangements for the Council's 'in-house' services.

These arrangements are not in line with our vision. They mean our investment is tied up in 'pre-purchased' support. This can be expensive, limit choice and reduce the ability of services to adapt to people's changing needs and expectations. We also need to respond to the Care Act's requirements for local authorities to ensure a diverse market of services. The Care Act also makes clear that Direct Payments should not be used to purchase local authority in-house services other than in exceptional or 'one off' circumstances.

We need to reduce our reliance on current block arrangements, and make sure the social care market provides a wider range of services that provide best value and can be accessed through Direct Payments. This will mean specifying the outcomes people want from services, stimulating innovation and development, and having frameworks in place that make sure alternatives to traditional blocks of service provide quality and best value. If people don't want, or are unable to manage a Direct Payment, the Council will arrange services directly using these frameworks, based on people's person centred support plans and Personal Budgets.

7.6 Doing things together: pooling personal funds.

It is clear from the consultation feedback that people want opportunities to make and sustain personal relationships, and value communal activities. People also want to get the most out of their available resources. Many said that one way to achieve this was to pool their personal funds, including their Direct Payments, to purchase shared support if they do not require 'one to one' support to take part in group activities.

As we move away from traditional 'block' arrangements, which often provide shared support, it is a priority to make sure people have both the opportunity and support to pool their personal funding, including their Direct Payments, so they can share their activities and support, and make their personal budgets go further.

7.7 Moving away from traditional or institutional forms of care

Whilst we have many examples of excellent services in Sheffield we also have an over-reliance on some traditional or institutional models of care, where support is arranged around the guidelines or principles of the service, rather than individual need. This is the case in many service areas, both building based and community-based, including some residential and nursing care, supported living, short breaks services and day time opportunities. This is not in line with our vision, and does not meet the changing expectations of local people with a learning disability and their families. This can be seen in the lower uptake by young people with a learning disability of more 'traditional' types of service.

We need to reduce our reliance on traditional or institutional models of care and make sure

all people with a learning disability have access to community-based services that promote independence, wellbeing and social inclusion. An important part of this is to reduce our reliance on residential care, increase the level of supported living and improve the outcomes it delivers. Our new supported living framework sets new, higher standards for supported living based on clear outcomes: enhanced quality of life, health and wellbeing, maximising independence from paid services, a positive experience of support, and staying safe. It is now a priority to build on this and stimulate new, innovative alternatives to more traditional day services and short breaks services.

There was support in the consultation for proposals to increase the level of Adult Placement Shared Lives (APSL). This service is registered by the Care Quality Commission, and trains, approves and supports APSL carers to provide long term care and short breaks in the approved carers' own homes and in the community. It is similar to the fostering model in children's services and is seen by many as an attractive alternative to traditional forms of care. Some Asian family carers saw potential in APSL and were keen to learn more.

However, some people felt it was difficult to match people to approved APSL carers, and arrangements can take a long time to set up. There were questions as to how well APSL could meet the needs of people with complex needs. Some family carers had concerns that APSL arrangements could break down or come to an end when the approved APSL carers themselves became too old to carry on. These issues will be taken into account in the plans to increase the capacity of the APSL service.

7.8 Building based services

There was a clear theme in the consultation around the need for building based services. Many family carers do not want building based support for young people, wanting instead flexible support that meets different aspirations, often arranged through Direct Payments and personal assistants.

Nevertheless there was also a clear message in the consultation that many people, in particular people with more complex needs and behaviours viewed as challenging, benefit from building based services. Many people said building based services provide the specialist physical environments, the specialist support, the reliability and the safety needed by people with more complex needs. There was also a view that it is unrealistic to expect people to be 'perpetual tourists' spending their days going from one community activity to the next. People also considered that building based services provided the opportunity to maintain friendships and personal relationships.

Some family carers also said the current range of building based services did not provide the right environments for their disabled relatives. If such services were the only option, this was a significant barrier. This was particularly clear in the feedback from Asian carers.

As we develop more community-based services, it is a priority to have a clear vision for building based environments that sets out the outcomes good building based services will help deliver. We will need to review the current capital assets in use in line with the vision and take opportunities to improve their effectiveness.

7.9 Improving people's housing and accommodation

Whilst we have much good quality housing for people with a learning disability living in supported living settings, we also have examples of poor quality accommodation that does not meet people's needs. It can be difficult for some people with specific housing needs to access the right accommodation. In some cases this can lead to people needing to leave Sheffield to access the accommodation they need. Some types of accommodation, particularly more institutional models, are now less popular and have vacancies that are

hard to fill, making them unsustainable in the long term.

In the consultation, the need for the right choice of accommodation was highlighted by people with learning disabilities, carers and providers. Respondents also stressed the importance of making sure accommodation was well matched to people's needs and that care should be taken to make sure people living in shared accommodation are able to live well together.

In the consultation it was clear that the accommodation in the city should reflect the increasingly diverse range of people's needs and expectations. People with more complex needs, including people with autism, may require housing that is specifically designed for their unique individual needs.

There was broad support for supported living as a model of choice. There was support for housing network and other tenancy support models. People felt there was a need for more supported living for people with lower level eligible needs. However there was also interest in people with a learning disability being able to access other forms of accommodation with support if it best met their needs – for instance nursing care for people with dementia, or Extra Care Housing.

We need to expand the range of good quality local accommodation and decommission less popular accommodation. We need to build on the lessons set out in 'Winterbourne View – time for change' and take advantage of the recommendations and opportunities in the report. Accommodation services in Sheffield must meet the whole range of people's needs so people do not need to leave Sheffield to access the housing they require. This should help minimise the risk of breakdown in people's support arrangements, reduce the need for hospital placements and help people move on swiftly from hospital to community-based services. We need to improve the way we manage accommodation to make sure people can access the housing options that best meet their needs at the time they need it. We also need to improve the coordination of housing, support and benefits to make sure supported living works smoothly for people.

7.10 Advocacy

Advocacy in its broad sense plays a key role in ensuring people's rights - in decision making processes and in their wider social and economic inclusion. The Care Act sets out specific responsibilities for local authorities to arrange independent advocates to facilitate people's involvement in their assessment, care planning and review, where they have substantial difficulty in this, and where there is no-one appropriate available to support them and represent their views. In a period of change we need a strong emphasis on advocacy to support people to make choices and engage in planning and managing change.

In the consultation people stressed the importance of advocacy, and said there needs to be a clear vision and plan for making sure the right advocacy support is available when people need it. We need to review our investment in advocacy as part of our implementation of this strategy.

8. What we propose to do

8.1 Improved social inclusion

Aim: In all our developments we want to help improve wellbeing through major improvements to the social inclusion of people with a learning disability in community life in Sheffield. We want community and universal services to be as inclusive as possible, and play a major part in promoting people's independence, safety and wellbeing.

How will we achieve this?

- We want to talk to people, their families and the wider community about what this means and how we can help make big improvements.
- We will look at what already works well in Sheffield and what opportunities we can build on for the future.
- We will also look at other places where they have done this successfully, to learn what works well and help shape our more detailed plans.
- We will work with the organisers of the Special Olympics and other partners to make sure the games and city life are fully inclusive of Sheffield people with a learning disability.

What will this mean for people with a learning disability and their families?

- The wider community and public places will be more welcoming, accessible and safe for people with a learning disability and their families.
- People will have more opportunities to spend their time doing things alongside the rest of the community in Sheffield.
- As a result, some people will need less 'service' based support.
- The Special Olympics will provide a lasting legacy of Sheffield as a city that is friendly and inclusive of disabled people.

8.2 Better access to paid employment and volunteering

Aim: We want more people with a learning disability to have paid employment in Sheffield and for the number of people doing so to be as good if not better than similar cities. We also want to improve access to volunteering activities which give people a real opportunity to contribute to the community and help move them closer to paid employment.

How will we achieve this?

- We will review the effectiveness and value for money of our current employment support services, including the Council's in-house services, and develop options for the future. We will do this in partnership with people with a learning disability, the city's Employment and Skills service, Public Health, NHS colleagues, the voluntary sector and the city's employers.
- We will work with colleagues to develop specific proposals for employment support and will consult on these to make sure they reflect what people want and evidence of what works best.
- We will work with others to make sure information and advice about pathways to employment is accessible and up to date.
- We will promote, with the organisers, opportunities for employment and volunteering for people with a learning disability when Sheffield hosts the Special Olympics in 2017.

What will this mean for people with a learning disability and their families?

- People with a learning disability will be engaged in developing our more detailed proposals.
- More people with a learning disability will be in paid employment if that is what they want.
- Some support services will be re-designed based on evidence about what works best.
- People will have good information and advice so they can make informed choices about accessing employment.
- Some services may need to change. People with a learning disability and their families will be involved in developing detailed proposals before any plans for change are finalised, and will be closely involved in any changes that happen.

8.3 Better support for family carers

Aim: We propose to make major changes and improvements to the support available to family carers, so that people are able to live well in the family home and have a good life in their communities, if this is what they would like to do. We want to make our investment in carer support more effective. This will include timely information and advice, emotional and practical support, and short breaks away from the family home.

How will we achieve this?

- We will continue to engage with family carers and carer support services to better understand what family carers want.
- Using this feedback, we will review the effectiveness of the carer support services we fund. Our current carers' contract ends in November 2015 and we will propose changes to the new contract which better provide what family carers say they want.

What will this mean for people with a learning disability and their families?

- Family carers will be better supported as carers in their own right.
- Carer support services will be re-designed based on the feedback from family carers.
- There will be changes to carers' support services from November 2015.

8.4 More choice in day time opportunities

Aim: We want to widen the current offer so there is much more choice in day time opportunities. We want to improve opportunities for people with learning disabilities to engage in social and learning activities which are purposeful, leading to people increasing their access to their wider community. People have told us they want better opportunities to make friends, build social networks and enjoy social activities.

We want community-based day time opportunities that support all people with a learning disability including people with the most complex needs and behaviours viewed as challenging. We want to move away from block arrangements where appropriate, so that more services can be as personalised and flexible as possible and so our money is not tied up with 'pre-purchased' services. As we do this we want to stimulate innovation and flexibility. Alongside this we want a positive vision for good quality building based services. We want day time opportunities to offer best value so that people can get the most out of their Personal Budgets. As part of this we want to support people to do things together by helping them pool their personal funds to arrange innovative activities with shared support.

How will we achieve this?

- We will engage with people with a learning disability and their families to better understand how people want to spend their days, and generate new ideas about how this might be achieved.
- We will work alongside children's services to stimulate innovation and choice in local services by encouraging new ideas. This might include investing in an innovation fund for new day time opportunities.
- We will review the effectiveness and value of the day time opportunities we commission, and develop options for the future.
- We will make sure the improvements are accessible to all people with a learning disability, including those with the most complex needs or behaviours viewed as challenging.
- We will develop a vision for good quality building based services.
- As we develop specific proposals for day time opportunities we will consult on these to make sure they reflect what people want.

What will this mean for people with a learning disability and their families?

- People with learning disabilities will have more choice about how to spend their days and have varied experiences, which meet their needs and aspirations and enrich their lives.
- Some services will be re-designed based on the changing needs of people with learning disabilities.
- There will still be building based services for people to meet and socialise. These will be fit for purpose, and there will be more opportunities for people to spend their time out and about in their community.
- Some services will need to change. New developments will be stimulated. People with a learning disability and their families will be engaged in developing detailed proposals before any plans for change are finalised, and will be closely involved in any changes that happen.

8.5 More choice in short breaks services

Aim: We want to widen the current offer so there is much more choice in short breaks services. This will include different opportunities for a short break, such as activity based breaks or 'sitting' services. We recognise the need to retain some building based services especially for people with complex needs. People have told us they want short breaks services to offer meaningful activities including opportunities to make friends, build social networks and enjoy social activities.

We want short breaks to work better for all people, including people with very complex needs or people whose behaviours services find challenging. We also want short breaks to offer best value so that people can get the most out of their personal funds. We also want reliable services for families who find themselves in crisis situations, such as providing short term intensive support to allow the time and space for crises to be resolved so families can continue caring, if that is what they want to do.

How will we achieve this?

- We will engage with people with a learning disability and their families to develop a vision for good quality building based short breaks services and generate new ideas.
- In partnership with the Clinical Commissioning Group, we will review all short breaks services we commission, develop clear plans for the future, stimulate innovation and real choice, and make sure all services are of the highest quality and offer best value.

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- We will make sure people have good information about what short breaks services are available.

What will this mean for people with a learning disability and their families?

- People with a learning disability will be able to have more varied experiences whilst having a short break, which meet their needs and aspirations and enrich their lives.
- People will have a better choice of good quality short breaks to help family carers care for their disabled relatives at home and prevent family breakdown.
- Building based short breaks services will be high quality and offer enjoyable and purposeful experiences.
- Short breaks services will provide best value, so people will be able to get the most from their Personal Budgets.
- Some services may need to change. People with a learning disability and their families will be engaged in developing detailed proposals before any plans for change are finalised, and will be closely involved in any changes that happen.

8.6 Increasing Adult Placement Shared Lives

Aim: Many people with learning disabilities and their families have support from approved carers registered with the Adult Placement Shared Lives (APSL) service. This includes befriending, day time opportunities, short breaks services and long term placements as an alternative to supported living or residential care. Adult Placement Shared Lives also offers good value for money. We want more people to benefit from Adult Placement Shared Lives.

How will we achieve this?

- We will increase the number of families registered with Adult Placement Shared Lives who provide befriending, day time opportunities and short breaks.
- We will double the number of families registered with Adult Placement Shared Lives who provide long term Shared Lives support.
- We will make these opportunities more accessible, including to people with complex needs and people whose behaviours services find challenging.

What will this mean for people with a learning disability and their families?

- More people with learning disabilities and their families will be able to have support from families registered with Adult Placement Shared Lives.
- As Adult Placement Shared Lives services offer good value for money, people will be able to get more from the available resources.

8.7 A new accommodation commissioning plan for people with a learning disability

Aim: We want to expand the amount and range of good quality accessible community-based accommodation and support that meets the wide range of people's needs.

We want accommodation to enhance wellbeing and reduce social isolation by combining privacy with access to shared space, shared activities and, where people choose, shared care arrangements. We want to set and enforce quality standards. We want good processes to identify people's needs and help them access the right options.

We want to make sure people do not need to leave Sheffield to access the accommodation they need, and help people who live away from Sheffield to return if that is what they want to do. This will include making sure good quality local community-based accommodation services help prevent breakdowns in people's support, and help people move on from hospital placements as soon as they are ready. And we want services to provide the best

value for local people.

How will we achieve this?

- We will implement a new Learning Disabilities Accommodation Commissioning Plan. This will be developed with Children, Young People and Families, Housing and NHS partners. It will set out our vision for accommodation and support, and how we will improve the range, quality and accessibility of housing options available.
- We will stimulate new accommodation through external grants and by supporting private sector investment.
- We will set clear quality standards for accommodation and will make sure these are maintained.
- We will improve the way we manage accommodation and support.
- We may decommission housing that no longer meets people's needs.

What will this mean for people with a learning disability?

- People with a learning disability will have more choice of good quality accommodation and support.
- People will have better access to the housing options they need at the times they need it.
- Accommodation services will facilitate swift, safe discharge from inpatient settings back into the community.
- Accommodation and support will provide best value for money so we are able to support the growing number of people who will need it in the future.
- People will be engaged in developing more detailed proposals before the Commissioning Plan is finalised.

8.8 Improving accommodation and support for people with lower level needs.

Aim: There is insufficient accommodation and support for people with a learning disability who are eligible for adult social care support, but who have lower level needs. This means some people live in settings that are not geared to helping them maximise their wellbeing and achieve their full potential. We want to improve range, choice and achieve best value in accommodation and support for people with a learning disability with lower level eligible needs.

How will we achieve this?

- We will stimulate new housing options to increase the choice and availability of housing for people with a learning disability with lower level eligible needs.
- We will work through the Homes and Communities Agency bidding process to develop new build accommodation, and work with Council Housing and Registered Private Providers of Social Housing to develop new housing networks and other supported accommodation opportunities.
- We will work with people with a learning disability and support providers to develop high quality, innovative, personalised and flexible forms of community-based accommodation services that deliver best value.

What will this mean for people with a learning disability?

- People with a learning disability with lower level eligible needs will have better choices of good quality accommodation and support. This may include new housing networks where a group of people have their own homes within a short distance of one another, so they have companionship and support from a coordinator. People

will also have access to new build supported housing developments.

- Accommodation and support services will provide best value so people can get the most out of the available resources.

8.9 Implementing the new supported living framework

Aim: We want more people who live away from their families to be able to live in supported living settings. We want supported living to be high quality, reduce people's dependency and increase their social inclusion. We want supported living services to provide best value for local people. We want to reduce our reliance on block arrangements for supported living.

How will we achieve this?

- We will implement the new supported living framework for all supported living services in the city. This change is already taking place.
- We will proceed with de-registration of 'block funded' residential care homes to change them to supported living services. When we do this we will tender for the supported living service against the new supported living framework. This change is already taking place and is ongoing.
- We will continue to use the 'Deciding together' protocol so people can continue to work together and pool their personal funds to choose supported living providers, if that is what they want to do.
- We will review the Council's 'in-house' supported living services, and develop options for the future.
- We will improve the way supported living services can be accessed by individuals or groups of people.

What will this mean for people with a learning disability?

- More people will have the benefits of supported living - more control over their daily lives, their own tenancy, access to benefits, and a greater say in their support.
- More people will have services that are geared towards helping them become more independent and take an active part in their local community.
- Supported living services will provide best value so people can get the most out of the available resources.
- Some people's services may need to change. People will have the chance to comment on detailed proposals before any plans for change are finalised, and will be closely involved in any changes that happen.

8.10 Achieving best value in higher cost accommodation and support services

Aim: We want all accommodation and support services to provide best value for local people. This means making sure services are good quality, help people achieve the outcomes they need, whilst also being good value for local people.

How will we achieve this?

- We will review high cost Independent Sector residential care and supported living services funded by the Council and/or through Continuing Healthcare.
- Where necessary we will take action to improve quality and achieve best value.

What will this mean for people with a learning disability?

- People's accommodation and support will be good quality, meet their needs and

help them achieve their goals.

- People's accommodation and support will provide best value so people can get the most out of the available resources.

8.11 Quality

Aim: People expect services to reflect their unique individual needs and be delivered to consistent high standards, regardless of who commissions them i.e. the person with their own personal funds or the Council. The people best placed to challenge are those people who use services, their family carers and their advocates. We want to make sure quality is at the heart of all developments in this strategy.

How will we achieve this?

- We will work closely with people with a learning disability, their families and advocates to make sure their outcomes and aspirations are being met by service providers.
- We will maximise the opportunities to improve quality and capacity in community-based services and build the skills of the local workforce, as set out in 'Winterbourne View – time for change.'
- We will have in place a range of quality assurance measures at the heart of which is feedback from people who use services on their experiences to make sure provision is safe and sustainable.
- We will make sure all service providers, regardless of who commissions the services, work closely with people who use services and family carers to continuously improve their services, and provide flexibility and innovation.

What will this mean for people with a learning disability and their families?

- All local services will meet the needs and aspirations of people with a learning disability and their families and promote their independence, safety and wellbeing.
- Local services will provide high quality community-based support to all people with a learning disability, including people with the most complex needs and behaviours viewed as challenging.

9. Engaging with people throughout the changes

9.1 Working together on future changes

This Commissioning Strategy sets out the need for considerable change and development across Learning Disabilities services in Sheffield. Following the consultation there will be further work to consider the feedback and develop detailed options for changes to specific services. In doing this, we will work in genuine partnership with people with a learning disability and their families in drawing up commissioning plans, in implementing the plans, in making sure services meet our high quality standards, and in scrutinising and holding us to account. Where we propose changes to specific services we will have further detailed engagement and consultation with all the people whose lives will be affected by specific plans to make sure these plans are right.

9.2 Integrated working and partnership

We will work together with a range of partners, including our partners on Sheffield's Health and Wellbeing Board and wider 'universal services' to ensure a whole system approach. This will include

- Children, Young People and Families Portfolio
- Public Health
- Regeneration and Development Services
- Housing and Neighbourhood Services
- The Clinical Commissioning Group (including the Continuing Healthcare assessment teams)
- CCG funded clinical support teams.

In particular we will align our plans with Sheffield's plan for integrated commissioning of health and social care for people of all ages. We will work closely with Children, Young People and Families to make sure the 'local offer' of services to children and adults with a learning disability and their families is consistent, and based on what local people want.

9.3 Advocacy

In working with people with a learning disability throughout the changes we will make sure their needs for advocacy are fully reflected in the Council's overall approach to advocacy and the requirements set out in the Care Act. We will also make sure there are effective arrangements in place at times of specific change so that people are fully involved in planning and implementation of change.