

REPORT TO: Executive Board

DATE: 19th July 2007

REPORTING OFFICER: Strategic Director, Health and Community

SUBJECT: Joint Commissioning Strategy for Adults with Physical and Sensory Disabilities 2007-2011

1.0 PURPOSE OF THE REPORT

1.1 To present to Executive Board a draft PSD Joint Commissioning Strategy for Adults with Physical and/or Sensory Disabilities for adoption.

2.0 RECOMMENDATION

It is recommended that:

- i) This joint strategy be adopted;**
- ii) The Physical and Sensory Disabilities Local Improvement Team (LIT) take responsibility for implementation of the strategy and monitoring of progress.**

3.0 SUPPORTING INFORMATION

3.1 Purpose of the Strategy

This document sets out the overarching strategy for the commissioning, design and delivery of services to people in Halton who are physically disabled (including those with sensory disabilities), their families and carers.

This is the first strategy to be produced for this group of people.

3.1.1 The strategy is written as a practical document to assist Physical and Sensory Disability (PSD) services move towards a more focussed way of commissioning services for adults in the 18-64 age range over a four year period. It is also expressed in a style to satisfy the Commission for Social Care Inspection (CSCI) and is consistent with other similar Commissioning strategies. The document will be used as evidence as part of the CSCI evaluation of the Council's approach to Policy development.

3.1.2 Within the strategy there is a commitment to promoting the social model of disability which emphasises the need to remove the barriers

to access faced by disabled people and gives them the ability to control their own lives.

- 3.1.3 The White Paper Our Health, Our Care, Our Say, promotes the alignment of Health and Social care planning. This strategy has been developed jointly between the Council and PCT, and through working with our partners will maximise capacity and enable more effective services which promote independence to be offered. The strategy has been shared with the PCT and comments received inserted into the document.

3.2 Consultation

The strategy was developed from consultation events involving all stakeholders and evidence from the Housing Needs Survey 2005. These are summarised in Section 3 of the strategy. Managers and practitioners attended a workshop to further develop ideas, which emerged from consultation.

3.3 Action Planning

A half-day action-planning event was held in April chaired by the Operational Director for Adults of Working Age. It was well attended by managers representing PSD care management and assessment services, provider services, commissioning and colleagues from Housing Strategy, PCT and North Cheshire Hospitals. Transportation has also contributed to the action plan.

- 3.3.1 Section 6 - Implementing the Strategy, summarises the agreed actions resulting from the contributions made at this event. The action plan (page 65) has been linked to the CSCI Adult Social Care Outcomes framework. This framework will measure performance in achieving the seven outcomes detailed in the white paper together with two additional measures relating to effective leadership and effective commissioning and use of resources.

4.0 **POLICY IMPLICATIONS**

- 4.1 PSD services have been successful in supporting people to remain in their own homes but the service is under considerable pressure from numbers of people requiring input from Independent Living Services. This strategy will provide the focus needed for managers to prioritise service developments and raise corporate awareness of responsibilities to provide mainstream services that include people with physical and/or sensory disabilities.
- 4.2 The report was presented to the Healthy Halton PPB for scrutiny on 12th June 2007. This is consistent with the approach to all other commissioning strategies produced.

5.0 FINANCIAL IMPLICATIONS

- 5.1 Section 6 of the strategy sets out the spending patterns of PSD services. In general the service has not faced any significant financial pressures.

Whilst the strategy relates to the 18-64 age group visual rehabilitation and independent living services work with those over age 65. The number of referrals from this older group has increased and capacity in these service areas has been possible by utilising specific grants. These grants cease in March 2008 whilst the demand on these services will rise. A financial strategy to support the commissioning strategy is to be developed which will identify areas for dis-investment and re-investment.

6.0 RISK ANALYSIS

As with any change programme we can expect the implementation of the strategy to be met with resistance and objections. This will be managed by ensuring all staff, service users and carers are fully informed of proposals and rationale and by listening to and acting on their suggestions.

7.0 EQUALITY AND DIVERSITY ISSUES

The Commissioning Strategy addresses Equality and Diversity there are no particular implications arising as a result of the proposed action. An Equality Impact Assessment (EIA) will need to accompany this strategy and be subject to review by the next available Directorate Equalities Group.

8.0 REASON(S) FOR DECISION

This strategy provides a focus for the commissioning of services for people with physical and sensory disabilities. The document will facilitate better business planning for current and prospective provider organisations and for the Council it will enhance and assure both quality and value for money in the provision of these services.

9.0 ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

Not applicable.

10.0 IMPLEMENTATION DATE

It is intended to begin implementation of the strategy action plan immediately.

11.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

See page 72 of the strategy.