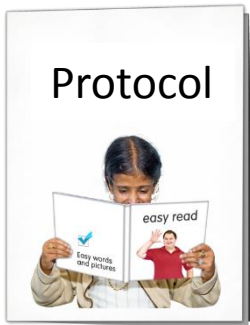


# WORKING TOGETHER TO BUILD BETTER OUTCOMES FOR PEOPLE WITH BEHAVIOUR DEEMED THE MOST CHALLENGING IN THE EASTERN REGION

A working protocol for market relations jointly developed by people, carers and advocates, commissioners and providers

## ACKNOWLEDGEMENTS



This protocol was developed from work undertaken by people and families, self-advocates, providers and commissioners from across Eastern Region over the course of two workshops in April and May of 2014.



The process was facilitated by Groundswell Partnership with support from MacIntyre, In Control, Eastern Region ADASS and the Winterbourne View Joint Improvement Partnership.



We are thankful to everyone who contributed to the process and generously gave their time to develop this protocol and in particular to those people who continued to work with us following the workshops to ensure the write up of protocol accurately reflected the efforts and thoughts of all those who took part in the process. To that end we would like to give special thanks to the following people:

WITH THANKS TO:



Lauren Butler Dimensions



Mike Ranson Consensus



Andrea Clark Ace (Anglia) LTD



Boo Dendy Leading Lives



MacIntyre  
Providing support...your way

Kirsty Peachey MacIntyre



Essex County Council

Jenny Peckham  
Essex County Council



Vicki Rapheal Inclusion East



Jo Hough Inclusion East



Derek Holesworth  
Norfolk Clinical Commissioning  
Group



Elanor Attril  
Hertfordshire County Council



Simon Leftley  
Southend Borough Council



Natasha Burberry  
Eastern Region ADASS

## FOREWORDS



### Simon Leftley

Corporate Director for Adult & Community Services, Southend-On-Sea Borough Council

Delivering good outcomes for people with behaviour deemed to be the most challenging is something we have strived to do for a number of years. The reality is that although some progress has been made very often individuals and their families do not experience services that support them or enable them to live fulfilling lives.

What is clear is that working together is key to achieving that aim. Many people have worked hard to create this protocol and on behalf of Eastern Region ADASS I would like to thank them and to endorse the protocol as a valuable contribution to helping build coproduction.

I would strongly encourage the use of the protocol across the region and encourage statutory bodies to take the lead in bringing people together to adopt the protocol and to use it to build stronger partnerships which value everyone's contribution in helping improve the lives of the people we support.



## FOREWORDS



**Jo Hough**

Co Director, Inclusion East CIC



The development of this protocol has itself been a good example of how co-production should be happening across our region, to improve the lives of people with very high support needs and their families.



It has brought together passionate people who are committed to sharing and developing their ideas of what good support looks like for a wide range of people whose behaviour is described as challenging.



Inclusion East CIC believes that by spending time to listen to everyone, the people who took part in this piece of work have created positive links that will be valuable not just during the time that it has taken to develop this document, but for the long term.

## FOREWORDS



**Jo Hough**

Co Director, Inclusion East CIC

The presence of people with learning disabilities and their families as equal partners at every stage in this process has been essential, to ensure that their views, concerns, lived experiences and high expectations are recognised and accepted by commissioners and providers.



For people with complex needs and their families, and for the commissioners and providers who serve them, this document is a banner under which we can gather, and by sharing it widely with all stakeholder groups, we can show that we are ready to work together with honesty, commitment and open minds to find the best way forward.



## INTRODUCTION



People, carers, families and advocates from across Eastern region have worked together with commissioners and providers to make a live working version of the Market relations protocol, *Stronger Partnership's for better outcomes* developed by *Think Local Act Personal*.



Our shared belief is that this protocol gives us the best foundation possible to focus our collective efforts on improving outcomes for the people in Eastern Region with behaviour deemed the most challenging.



We want to ensure that we can reduce the use of Assessment and Treatment centres and that we can collectively put an end to the poor and inadequate support which we have seen in the past.



This protocol embodies our commitment to work together to ensure we can access the best support possible and help make available a wide range of high quality person centred support which helps people who we love care for and support to lead fulfilling lives and keeps them safe.



The protocol is part of our ongoing commitment to working together to improve outcomes for people across our region.



We urge providers, commissioners, third sector and user led organisations to sign up to this protocol and develop their shared understanding of how each of the areas identified here can be taken forward and identify key actions for making a reality of the pledges described in this protocol.

# KEY PRINCIPLES UNDERLYING THE PROTOCOL

## SHARING RISKS



Pushing boundaries and taking risks is not easy for commissioners or providers. It can be equally difficult for people using services and families to feel confident about doing things differently.



We need to find practical ways to understand and share risks and responsibilities to enable new thinking to develop and reduce the fear of failure.



We need to look after each other and focus on our shared commitment to improve outcomes for people across our region who need better support.



We must all be open to new ideas, willing to share information about likely demand and prepared to spread the financial burden. This is particularly important for developing new innovative developments and in supporting micro-services and small businesses who need more support to grow and flourish.



# KEY PRINCIPLES UNDERLYING THE PROTOCOL

## REDUCING BUREAUCRACY



Processes and paperwork should be proportionate and help us build person centred and inclusive ways of working and ways of sharing information.



Improving market relations should not mean significant additional calls on people's time or brand new arrangements.



We need to be flexible and creative in how we approach procurement and contracting arrangements in order to develop better support and better services for people with behaviour deemed the most challenging.



Processes must be fit for purpose and not exclude people and organisations that might otherwise engage in them.



They must serve what we want to achieve and if they get in the way we must find other methods to achieve our goals.

# KEY PRINCIPLES UNDERLYING THE PROTOCOL

## BUILDING CAPACITY



Commitment to building the skills, competencies and capacity of all key stakeholders and people involved.



A willingness to “learn by doing,” to be self-reflective and to honestly review progress will help ensure that improving market relations is a shared responsibility.



However, it should be compulsory for the statutory organisations involved to set the example for the behaviour expected from all parties through their communication and interaction and to be ultimately held accountable by others for ensuring the protocol informs best practice in all market relations.



Statutory bodies across the region should work with people, with carers and families and with providers to develop a shared understanding of where investment can be best be focussed to help build inclusive ways of working and maximise opportunities for co-production.

# KEY PRINCIPLES UNDERLYING THE PROTOCOL

## BUILDING CAPACITY



Councils and Clinical Commissioning Groups should consider ways of combining what resources they can make available to invest in building the capacity of local people, families and user led organisations to engage in market shaping activity.

## UNDERSTANDING WHAT SUCCESS LOOKS LIKE



The starting point for change in the market place is a higher level of knowledge for all stakeholders about the factors that influence supply and demand.



This means thinking about whole life pathways and developing joined up thinking across adults and children's services that can prevent people at the earliest stage from being at risk of entering Assessment and Treatment Units.



Successful support needs to be tailored to what is important to each individual and our systems for understanding and measuring success need to reflect the personal nature of what it means to each individual.

# KEY PRINCIPLES UNDERLYING THE PROTOCOL

## UNDERSTANDING WHAT SUCCESS LOOKS LIKE



All parties need to commit to identifying, measuring and articulating what works in delivering and commissioning fully personalised care and support.



The success of this protocol will depend on a shared willingness and ability to do this well.



The following slides describe what success would look like for different stakeholders and was developed by people, families, carers and advocates working with commissioners and providers during a two day workshop in Spring 2014 . It describes what collectively people said they want and expect to see if things are working really well for people with behaviour deemed the most challenging across Eastern Region. We will use these success indicators to help us understand how far we are able to develop the market to achieve good outcomes for people in our region.



## PEOPLE, CARERS AND FAMILIES AND ADVOCATES



We are supported and enabled to lead the same lives as others.



We have open and honest communication links with providers and commissioners – and we can talk to them about both the good and the bad.



We are always included from the start.



We are supported to plan in advance for crisis situations and for the bad times.



## PEOPLE, CARERS AND FAMILIES AND ADVOCATES



People understanding that we can get anxious and need to feel safe.



We have the support and understanding when we have mental health issues.



We get the right support with consistent people who know us well.



We get good person centred and joined up support from Children and adults services and we can see them working well together.



## COMMISSIONERS



We have a diverse range of person centred and cost effective services in the market.



The services we commission are flexible and can accommodate people's fluctuating needs.



A person centred culture is embedded in our day to day work.



We get our data right, we know who is out there and we can anticipate needs well.



## COMMISSIONERS



We take a different approach to managing high risk services, working together with providers to resolve issues - no blame culture.



There are no more scandals – we have robust, creative and transparent services and genuine shared responsibility.



We commission a range of bespoke community based intensive support - linked to a need for secure care but preventative in ethos.



We make the investment needed to build person centred approaches and person centred services. We take a whole life approach - not moving the person from team to team and budget to budget.





## PROVIDERS



We have open and transparent communication with everyone built on a foundation of mutual respect.



We share our learning together with other providers and are open to new ideas.



We have positive partnerships and actively seek to include all our key stakeholders in helping us to deliver the best support possible.



We deliver consistent support that works well and delivers the outcomes people want and need.



## PROVIDERS



We review people's support arrangements as things change and do not wait or rely on statutory or contract review to tailor support to people's requirements



We have a variety of ways to ensure we can engage everyone in planning including those who are not verbal.



We actively promote choice and empowerment and positive attitudes to sharing risks.



We deliver consistent support that works well and delivers the outcomes people want and need.



## KEY BEHAVIOURS: THINGS TO THINK ABOUT



This document sets out a number of things to think about for people, carers, families, advocates, commissioners and providers at each stage of the model.



The last 6 slides set out the things we believe are practical and possible to do to right now.



The list is a useful starting point for organisations and networks wanting to make the first step.

# WHAT WE WILL DO WHEN WE ARE SEEKING TO UNDERSTAND THE LOCAL MARKET



## PEOPLE, CARERS AND FAMILIES



Engage in developing real open and flexible support plans with regular reviews that are owned by us and respected by everyone. Fully participate in developing plans and keep a copy of plans developed.



Be proactive and research what is out there. Be creative. Expect accessible easy read plans, good communication and information.



Get information about what is available know what our budget is. Know our rights and ask for explanations when something isn't clear.



Take opportunities to feedback ideas and stories whenever possible. Take opportunities to get involved in a variety of ways that are available.

# WHAT WE WILL DO WHEN WE ARE SEEKING TO UNDERSTAND THE LOCAL MARKET



COMMISSIONERS



Develop a shared vision by listening, having a conversation with the local community, sharing our communication and planning, developing together.



Develop a communication strategy that covers a range of information in a range of different formats including events and face to face meetings.

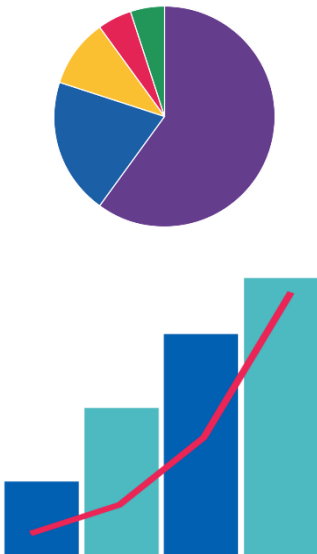


Understand people's needs and make positive partnerships between all key stakeholders. Understand the financial pressures on provider organisations and facilitate open and honest conversations about costs and spend. Make the best possible decisions to balance tensions between cost and quality.

## WHAT WE WILL DO WHEN WE ARE SEEKING TO UNDERSTAND THE LOCAL MARKET



### COMMISSIONERS



Understand the whole market for self and state funders and develop a Market Position Statement including:

- Demographics, trends and population needs
- What is available locally at what cost
- Gaps and opportunities for growth
- Workforce information
- How resources are currently used and how this is likely to change
- What choices people are making



As part of the local delivery of Making it Real, ensure mechanisms are in place to embed co-production in, including:

- Working Together for Change
- Co-production Groups
- Surveys



# WHAT WE WILL DO WHEN WE ARE PLANNING HOW THE MARKET NEEDS TO CHANGE AND DEVELOP



## PEOPLE, CARERS AND FAMILIES



Expect to be valued as an equal partner.  
Ensure that people who are less able are given opportunities to get involved and contribute.



Seek out like minded families and self-advocates so we can have a stronger voice  
Ensure representation at LD Partnership boards and other active groups. Expect co-production, not just engagement or consultation. Expect recognition and financial reward to support self advocates and families to contribute.



Be directly involved in service processes.

# WHAT WE WILL DO WHEN WE ARE PLANNING HOW THE MARKET NEEDS TO CHANGE AND DEVELOP



## PEOPLE, CARERS AND FAMILIES



Get invited to relevant meetings. Request training. For example: Partners in policy making.



Expect the right people to be at meetings.



Provide feedback to commissioners and providers and help them do things better and more creatively. Make challenges where necessary.



## WHAT WE WILL DO WHEN WE ARE PLANNING HOW THE MARKET NEEDS TO CHANGE AND DEVELOP



### COMMISSIONERS



Encourage strong partnerships and work to strengthen good relationships between people carers and families, providers and ourselves. Encourage ongoing three way conversations through provider forums and by using online surveys. Encourage people to be open and provide a safe space for talking to take place.



Develop and utilise existing forums and build on them. Support a wider range of people who use services, families and carers and providers to engage with us in the planning process.



Ensure there is good, across the board ownership of what quality means and how it is measured and assured. Benchmark current quality so we can understand progress. Use the expertise of Inclusion East and experts with experience to help measure outcomes and social impact.

# WHAT WE WILL DO WHEN WE ARE PLANNING HOW THE MARKET NEEDS TO CHANGE AND DEVELOP



COMMISSIONERS



Develop a shared understanding of outcomes with consumers and providers and how this relates to commissioning and contracting. Consider what short, medium and long term outcomes people want and what that looks like for the person. Make every effort to ensure the outcomes are what the person wants. Give people the flexibility to change their outcomes



Explore innovative procurement and contracting arrangements to build capacity and ensure a good range of person centred options are available in the local market. Find creative ways to take a flexible creative approach and not be restricted by unhelpful procurement processes.

# WHAT WE WILL DO WHEN WE ARE PLANNING HOW THE MARKET NEEDS TO CHANGE AND DEVELOP



## PROVIDERS



Understand and uphold the rights of the people we support. Work together with others in our community and share learning.



Manage our own marketing and reach individuals and families, not just rely on commissioners to provide this. Know what we are good at.



Be honest and have the difficult conversations around costs and what can and can't be done.



Share good practice and help shape the market to be something that delivers what people want.

## WHAT WE WILL DO WHEN WE ARE PLANNING HOW THE MARKET NEEDS TO CHANGE AND DEVELOP



### PROVIDERS



Do our own research and share what we do. Be responsive to changes. Be involved in local planning. Take a flexible approach.



Be proactive. Plan to involve everyone. Be creative in making opportunities to engage people and raise awareness. Do more than just take part in forums.



Understand what quality means for the individuals we support and agree how it can be measured and assured. Support the use of experts by experience.



Develop a shared understanding of outcomes with everyone and understand what this means for how we support people & commit to improvement.

# WHAT WE WILL DO WHEN WE ARE INTERVENING IN THE MARKET



## PEOPLE, CARERS AND FAMILIES



Understand how to raise concerns and how they can be resolved. Understand and know who to contact to raise concerns and get feedback that something is being done.



Share the responsibility to use public money appropriately and act with integrity (do the right thing).



Get involved in our councils by services.



Work with commissioners and others to make sure the process of accessing and using support is open and easy to understand.

# WHAT WE WILL DO WHEN WE ARE INTERVENING IN THE MARKET



## PEOPLE, CARERS AND FAMILIES



Be active partners in designing and delivering training for commissioners social workers and provided staff and in checking that it's working.



Make the choices and have the control that is right for us and recognise that risk is part of everyday life. Things do go wrong and we can learn from this together.

## WHAT WE WILL DO WHEN WE ARE INTERVENING IN THE MARKET



COMMISSIONERS



Support people to commission their own services and involve people fully throughout the tendering process including developing specifications, interviewing and selecting providers and conducting service reviews.



Work together with providers and consumers when problems identified to find positive solutions when things are not going well. Encourage providers to offer outreach services. Work from the principle that a safe organisation is a transparent organisation. Act early to ensure support remain sustainable.



Give incentives to promote innovation and support market diversity including encouraging small local businesses, social enterprises and user led organisations.

# WHAT WE WILL DO WHEN WE ARE INTERVENING IN THE MARKET



## COMMISSIONERS



Create a fair and competitive environment and support providers to manage the transition to new funding models. Facilitate three way discussions about cost reduction to address budget pressures. All commissioned places in the locality should be made known to local commissioners.



Enable all stakeholders to understand each other's roles and responsibilities and to share risks. Support providers to understand how new models of care are to be commissioned in line with person centred principles. Change the culture at all levels to embed positive behaviour support.



## WHAT WE WILL DO WHEN WE ARE INTERVENING IN THE MARKET



### PROVIDERS



Proactively work together with people and families, advocates and commissioners to develop creative and new ways of supporting people which are outcomes focused and support people to enhance their informal networks and strengthen bonds with communities.



Demonstrate value for money and added social value in the support we deliver – engage in open and honest three way discussions around cost reduction and be clear what can and can't be done.



Work together with commissioners to develop more creative and person centred tendering processes. Use provider forums to focus on outcomes and joint working.

## WHAT WE WILL DO WHEN WE ARE INTERVENING IN THE MARKET



PROVIDERS



Develop the workforce to make a cultural shift so values and behaviours are as important as skills and training and staff see their roles as hugely valuable, positive and something to be proud of.

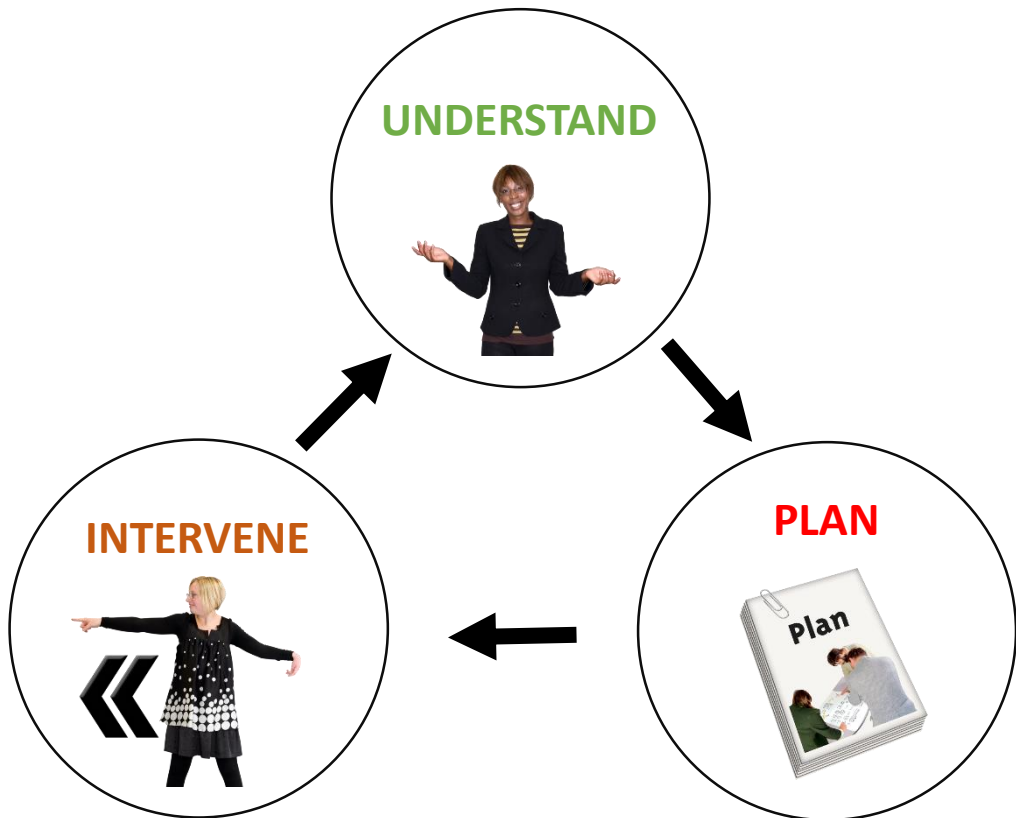


Work together to prevent problems arising but continue to work together when they do.

# MARKET FACILITATION MODEL

## PRINCIPLES OF ENGAGEMENT:

- 1) Sharing risks
- 2) Reducing bureaucracy
- 3) Increasing capacity
- 4) Measuring success



# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS



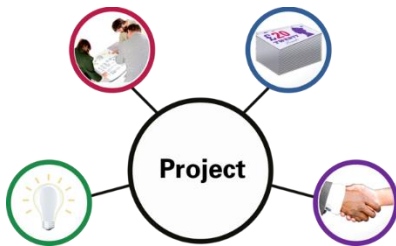
## What we can do at a **local** level



Take the commitments back and put them into our market position statements and our strategic plans.



Use the commitments as a checklist for how we are all working – get it into our work routines.



Ensure that commissioners use the protocol when commissioning new projects/ operational teams use at meetings - interviewing/recruitment processes.



Share information with Clinical commissioning groups, operational teams, carers groups, advocacy groups and self advocates.

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS



## What we can do at a **local** level



Commissioners work jointly with local community networks, and hold events to engage people in planning.



Use the support available from the Winterbourne View Joint Improvement Team.



Use integrated and pooled budgets and develop a local calendar of events to keep the protocol live.



Raise the profile in local provider forums and online noticeboards - linked to and feeding into their regional equivalents.

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS



## What we can do at a **local** level



Raise the profile in local partnership boards, partnership forums and networks.



Develop a local approach to monitor outcomes and share good stories - when the protocol is used effectively and share learning about what works well.



Organise local events or develop processes that allow families, advocates, carers and individuals to engage directly with providers and make contacts on a less formal basis than a 'forum'.

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS



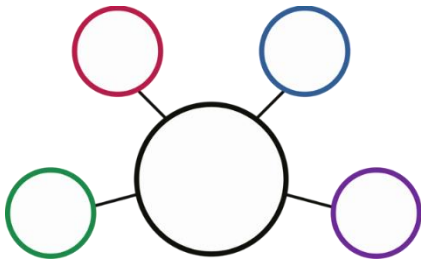
## What we can do at a **regional** level



Tell people about this process regularly.



Organise regional forums with providers and families and always have a sustained and consistent approach.



Keep the protocol as a standing item on key networks and forums to maintain oversight and leadership.



Develop a shared approach to monitoring the outcomes from the protocol and include a focus on how people feel about their ability to engage and contribute.

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS



## What we can do at a **regional** level



Use regional online noticeboards and regional provider forum.



Raise in regional core briefings.



Use Experts by experience and support everyone to share experiences of what works.



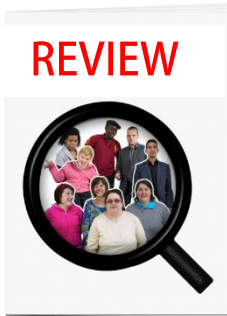
Develop a regional approach to monitor outcomes and share good stories - when the protocol is used effectively and share learning about what works well.



# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS



## What we can do at a **regional** level



Commissioners co-ordinate activity to review current contracting arrangements and identify if they support the principles of this protocol or are a barrier to making it happen.



Invest in advocacy training.

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS

## WHAT WE CAN DRAW ON THAT WILL HELP



Prevention agenda



Transition team



Self-advocacy groups



Share our efforts to reach people outside of the usual networks

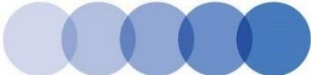


Use social media to encourage people to engage with the protocol

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS

## WHAT WE CAN DRAW ON THAT WILL HELP

DRIVING UP  
QUALITY



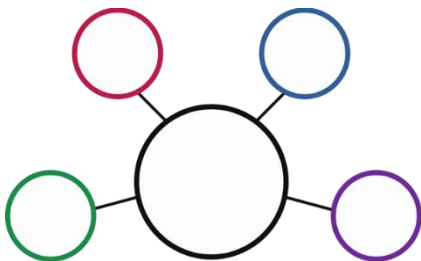
Consider the links with 'Driving up quality'.



The Care Quality Commission's minimum standards and contract monitoring.



Use Winterbourne View Joint Improvement Partnership and regional networks to help build a sense of continuity.



Independent sector for networks.

# WHAT WE CAN DO THROUGHOUT THE MARKET SHAPING CYCLE TO MAKE A REALITY OUT OF OUR COMMITMENTS

## WHAT WE CAN DRAW ON THAT WILL HELP



Take personal responsibility for doing what we signed up for



Our commissioning networks



Carers forums - local and regional



Learning Disability strategy and action plans



Learning Disability Partnership Boards



**Translated into Easy-Read by Ace (Anglia) LTD**  
July 2014

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