



## SUPPORTED LIVING SERVICES FOR ADULTS WITH LEARNING DISABILITIES

### SUPPLEMENTARY SERVICE SPECIFICATION

#### LOT 2: Supported living for people with profound and multiple learning disabilities

##### SECTION ONE: INTRODUCTION

1. Introduction
2. Policy Context

##### SECTION TWO: SERVICE DELIVERY

3. Communication
4. Behaviour that Challenges
5. Decision Making and Choice
6. Physical Health
7. Sensory Needs and The Environment
8. Functional and Skills Assessments
9. Staffing and Training
10. Partnership Working

##### SCHEDULE 1

Service User Needs and Outcomes

(NB: a separate form will be included for each service user for each specific invitation to tender)

SECTION ONE: INTRODUCTION	
1.	Introduction
1.1	ILDP service data tells us that we have a small, but growing, cohort of adults with Profound and Multiple Learning Disabilities (PMLD) who also have complex physical health needs. In order to better meet their needs, we want to establish a robust list of providers that have the required skills and specialisms within their organisation to deliver high quality personalised supported living services for this cohort.
1.2	This supplementary service specification must be read in conjunction with the main service specification for supported living services for adults with learning disabilities. The purpose of this document is to outline the <b>additional</b> expectations of providers who can offer specialist services to meet the needs of adults with PMLD.
1.3	This specification has been written to align with best practice guidance published by Mencap, the PMLD Network and other leading organisations in this field. Providers successful in joining this lot will be expected to keep up to date with developments and shape services accordingly. Islington's commissioning team will work with providers to quality assure services against best practice guidance as it is published.
2.	Policy Context
2.1	<p>Relevant guidance, policy and legislation includes:</p> <ul style="list-style-type: none"> <li>• The 'How-to-guides', Mencap and the PMLD Network <a href="https://www.mencap.org.uk/advice-and-support/pmld/raising-our-sights-guides">https://www.mencap.org.uk/advice-and-support/pmld/raising-our-sights-guides</a></li> <li>• Five Good Communication Standards, Royal College of Speech and Language Therapists</li> <li>• Raising our sights: services for adults with profound intellectual and multiple disabilities, Professor Jim Mansell</li> <li>• Supporting people with profound and multiple learning disabilities: Core &amp; Essential Service Standards <a href="http://www.pmlmlink.org.uk/wp-content/uploads/2017/11/Standards-PMLD-h-web.pdf">http://www.pmlmlink.org.uk/wp-content/uploads/2017/11/Standards-PMLD-h-web.pdf</a></li> </ul>
SECTION TWO: SERVICE DELIVERY	
3.	Communication
3.1	<p>As per the overarching specification, providers are expected to adhere to the five good communication standards for all individuals they work with:</p> <p>1: There is a detailed description of how best to communicate with individuals.</p> <p>2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services.</p> <p>3: Staff value and use competently the best approaches to communication with each individual they support.</p>

	<p>4: Services create opportunities, relationships and environments that make individuals want to communicate.</p> <p>5: Individuals are supported to understand and express their needs in relation to their health and wellbeing.</p> <p><a href="https://www.rcslt.org/news/docs/good_comm_standards">https://www.rcslt.org/news/docs/good_comm_standards</a></p>
3.2	<p>Providers will ensure staff engage people in meaningful interaction, to include:</p> <ul style="list-style-type: none"> <li>• dedicated time given to meaningful sessions of activity that are well planned and varied in line with the individual's needs and preferences.</li> <li>• a range of indoor and outdoor activities</li> <li>• use of appropriate communication approaches to support this interaction, as identified in the individual's communication passport</li> </ul>
3.3	<p><b>Communication Passport</b></p> <p>Each person will have a detailed communication passport, in line with the Five Good Communication Standards, outlining their individual methods of communicating. This will be:</p> <ul style="list-style-type: none"> <li>• completed by a member of staff who knows the individual well and has a good understanding of the individual's communication strengths and needs</li> <li>• completed with the individual and their circle of support</li> <li>• understood by all staff and used to tailor service delivery</li> <li>• reviewed and updated regularly</li> </ul>
3.4	<p><b>Technology</b></p> <p>Providers will facilitate innovative use of technology to support communication where appropriate e.g. use of switches.</p>
4.	<p><b>Behaviour that Challenges</b></p>
4.1	<p>It is essential that staff understand that all behaviour occurs for a reason and seek to identify this reason for the individual so that appropriate proactive strategies can be put in place.</p> <p>The provider will ensure:</p> <ul style="list-style-type: none"> <li>• Staff have training around understanding behaviour, including early warning signs and triggers, as well as effective interventions and strategies to both prevent further escalation and to support with de-escalation</li> <li>• Staff have training Positive Behaviour Support (PBS) as the preferred approach to managing behaviour that challenges</li> <li>• Detailed recording takes place in a suitable format each time the individual displays behaviour that challenges, which is reviewed regularly by the staff team to identify the triggers and functions of the behaviour that challenges</li> <li>• Staff are offered a face-to-face debrief in a timely manner, ideally within 24hours, after a significant incident occurs to ensure they receive emotional support and are able to reflect on what happened and consider new ideas for supporting the person in the future.</li> <li>• Staff consider onward referrals to disciplines within ILDP for further support if necessary.</li> </ul>

5.	Decision Making and Choice
5.1	<p>All individuals will be supported to participate in making decisions and choices; affording maximum control to the person being supported. To facilitate this, the provider will ensure:</p> <ul style="list-style-type: none"> <li>• All staff can demonstrate they understand how individuals communicate decisions and choices and the support they need to do this, as outlined in the individuals' communication passport.</li> <li>• Individuals have access to appropriate advocacy services</li> <li>• All staff have a good understanding of best interests decisions, the Mental Capacity Act and the Deprivation of Liberty Standards</li> <li>• The individual's family, and others that know the individual well, are consulted for advice and are involved in decision-making where appropriate.</li> </ul>
6.	Physical Health
6.1	<p>Providers must be confident in their ability to manage the physical health needs of any individual they support.</p> <p>In line with section 9.2, providers are required to arrange training (internally or externally) should they begin supporting anybody with a health need that they aren't familiar with.</p>
6.2	<p>Providers will ensure all monitoring charts e.g. seizures, eating &amp; drinking, are completed accurately and intelligently by staff members who understand what they are looking for.</p> <p>These charts may be scrutinised by clinicians as part of ongoing review of individuals.</p>
6.3	<p>Providers are responsible for ensuring best practice manual handling guidance is followed at all times and people are supported to maintain good posture and positioning.</p>
6.4	<p>As per the overarching specification, providers are expected to be highly competent in the management of dysphagia.</p>
6.5	<p>Providers are responsible for ensuring that any change or deterioration in health condition is communicated to all professionals working with the individual to ensure they receive joined-up care.</p>
6.6	<p>Providers will ensure there is appropriate senior management level skills and expertise within their organisation to provide support and guidance for frontline staff around managing complex physical health needs.</p>
7.	Sensory Needs and The Environment

7.1	<p>Providers will develop a sensory needs assessment for each individual:</p> <ul style="list-style-type: none"> <li>• with input from occupational therapy (preferably within the organisation)</li> <li>• with input from the individual and their circle of support</li> <li>• that is understood by all staff and used to tailor service delivery</li> </ul>
7.2	Providers will work to ensure that a person's home environment is conducive to good communication and supports their sensory needs.
7.3	Providers will facilitate multi-sensory experiences and support the person to engage with them, both in the home and in the community.
8.	<b>Functional and Skills Assessments</b>
8.1	<p>Providers must demonstrate there are skills and competencies within the organisation to conduct functional and skills assessments in-house, or that they can access external support for these. Assessments must be conducted by individuals who have been trained to do so.</p> <p>Providers will ensure:</p> <ul style="list-style-type: none"> <li>• Staff understand the purpose of functional and skills assessments and are supported to contribute to the assessment process.</li> <li>• The assessments are used to tailor the support delivered</li> <li>• Assessments are completed in conjunction with the individual and their circle of support</li> </ul>
9.	<b>Staffing and Training</b>
9.1	<p>Providers are required to ensure that the staff team is recruited and shifts allocated in order to guarantee:</p> <ul style="list-style-type: none"> <li>• Required skill set and values</li> <li>• Emotional wellbeing and resilience of staff</li> <li>• Staffing numbers and ratios</li> </ul>
9.2	<p><b>Training</b></p> <p>The provider is required to:</p> <ul style="list-style-type: none"> <li>• Ensure that all staff receive training in the following areas (unless agreed not relevant): <ul style="list-style-type: none"> <li>○ Switches</li> <li>○ Intensive interaction</li> <li>○ Multi-sensory interaction training</li> <li>○ Dysphagia</li> <li>○ Makaton</li> <li>○ Manual handling</li> </ul> </li> <li>• Conduct regular training and skills audits to identify whether staff: <ul style="list-style-type: none"> <li>○ have the necessary skills to meet the needs of the individual</li> <li>○ have the understanding to implement guidance from professionals</li> <li>○ have incorporated learning from training they have received</li> </ul> </li> <li>• Arrange training (in-house or externally) to address and gaps identified through the audit process</li> </ul>

9.3	<b>Ongoing supervision</b> The provider will: <ul style="list-style-type: none"> <li>• Provide regular supervision and on-the-job coaching</li> <li>• Practice reflective practice during supervision sessions with staff</li> <li>• Facilitate shared discussions and learning</li> </ul>
10.	<b>Partnership Working</b>
10.1	Specialist clinical input is available through ILDP and providers are expected to seek their advice: <ul style="list-style-type: none"> <li>• if struggling to develop an understanding of a person's communication or sensory needs</li> <li>• if there is a significant, unexplained change in a person's communication or behaviour</li> <li>• if the person starts experiencing difficulties with eating or drinking</li> </ul>

	Schedule 1
	<p><b>Service User Needs and Outcomes form</b></p> <p>A separate form will be used for each individual service user associated to each specific invitation to tender.</p> <p>Please note that this form may be amended from time-to-time in consultation with the service providers admitted to the DPS, in order to improve the information presented at ITT stage.</p>

For information only

<b>Service User 1</b>	
<b>Client ID:</b>	
<b>Age Bracket:</b>	
<b>Assessed Total Personal Budget:</b>	
<b>Current Provider:</b>	
<b>Current Accommodation:</b>	
<b>Environmental/Property Adaptations requirements:</b>	
<b>Diagnosis:</b>	
<b>Details of LD / Mental health / physical health:</b>	
<b>Complexity of Needs:</b>	
<b>Capacity:</b>	
<b>Does the service user have capacity?</b>	
<b>If the service user does not have capacity:</b>	
<b>Has a capacity assessment been completed?</b>	
<b>Has a Best Interest decision been made?</b>	
<b>Communication skills/support requirements:</b>	
<b>Medication Support Needs:</b>	
<b>Current Activities Undertaken:</b>	
<b>Strengths / interests:</b>	
<b>Support network:</b>	
<b>Risks:</b>	
<b>Specific Skills/Training required by Staff:</b>	
<b>Outcomes to be achieved:</b>	
<b>Background Support Needed:</b>	
<b>1:1 Support:</b>	
<b>Any further information:</b>	
<b>Completed by:</b>	
<b>Date:</b>	



Schedule 2	
<b>Accommodation Specification</b>	
<b>Address of property</b>	
Building description	
No of residential places	
No of flats with own bathroom, kitchen, lounge	
Through floor lift	
No of bedrooms with en-suite	
No of bedrooms without an en-suite	
Level access within floors?	
No of communal meeting rooms/lounges	
No of communal kitchens	
Parking?	
Garden?	
No of staff offices in the property	
No of staff sleep in rooms	
No of shared bathrooms and WCs accessible to service users	
Laundry room?	
Any adaptations in the property?	
Any special equipment installed?	
Any assistive technology installed?	
<b>Landlord Functions</b>	
Registered Social Landlord	

Provider / RSL agreement	
Responsible party for maintenance and repairs	
Tenant and landlord agreement	
Rental costs of the staff office	
Responsible party for these costs	