

SUPPORTED LIVING SERVICES FOR ADULTS WITH LEARNING DISABILITIES

SUPPLEMENTARY SERVICE SPECIFICATION

LOT 3: Supported living for people with learning disabilities and behaviour that challenges

SECTION ONE: INTRODUCTION

- 1. Introduction
- 2. Policy Context

SECTION TWO: SERVICE DELIVERY

- 3. Positive Behaviour Support
- 4. Crisis Management
- 5. Least Restrictive Practice
- 6. Understanding Behaviour
- 7. Functional and Skills Assessments
- 8. Communication
- 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)

SEC	SECTION ONE: INTRODUCTION		
1.	Introduction		
1.1	ILDP service data tells us that we have a small, but growing, cohort of adults with learning disabilities who display complex and challenging behaviours. 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.		
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 additional expectations of providers who can offer specialist services to meet the needs of adults with learning disabilities and behaviour that challenges.		
1.3	This specification has been written to align with emerging best practice guidance published by the PBS Academy 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	 Relevant guidance, policy and legislation includes: Improving the quality of Positive Behavioural Support (PBS): The standards for service providers and teams, PBS Academy <u>http://pbsacademy.org.uk/pbs-standards/</u> Supporting Staff Working with People who Challenge Services: Guidance for employers, Skills for Care and NTDi Positive Behavioural Support (PBS): A Competence Framework, PBS Coalition UK http://pbsacademy.org.uk/ pbs-competence-framework/ NICE Guideline - Challenging behaviour and learning disabilities: prevention and interventions for people with learning disabilities whose behaviour challenges 		
SEC	TION TWO: SERVICE DELIVERY		
3.	Positive Behaviour Support		
3.1	Positive Behaviour Support (PBS) is the evidence-based approach to managing behaviour which Islington Council has adopted across its services for adults with learning disabilities.		
3.2	Providers are expected to embed this way of working across their organisation. Providers must have a permanent identified PBS lead within the organisation who has received a higher level of training (i.e. BILD's PBS Coaches training) and who is able to coach and support front-line staff.		

3.3	PBS Plans
	Providers must demonstrate there are skills and competencies within their organisation to develop PBS plans in partnership with the service user, their circle of support and the staff team.
	The provider is responsible for ensuring the PBS plan is:
	 Actively used, reviewed and updated Developed and reviewed in partnership with the service user, their circle of support and the staff team Followed consistently by all involved in the service user's support Presented in an accessible way to facilitate understanding by staff, the person, and other important stakeholders
4.	Crisis Management
4.1	The provider is responsible for ensuring:
	 Staff have an understanding of the early warning signs and triggers for an individual presenting with behaviour that challenges, as well as effective interventions and strategies to both prevent further escalation and to support with de-escalation Each person has a written crisis management strategy that staff feel confident to implement Detailed records are kept about crisis incidents and a formal process is in place to review and learn from these, including updating the PBS plan if required
5.	Least Restrictive Practices
5.1	 The provider will guarantee least restrictive practice is followed at all times, by ensuring: Clear policies and procedures are in place around the use of restrictive practices including environmental restrictions, physical interventions, use of PRN medication etc. A front-line manager is responsible for overseeing the governance over and use of restrictive practices Staff understand that restrictive practices are only ever used as a last resort and only to maintain the safety of the individual or others Any use of restrictive practices is recorded and monitored to ensure that usage is minimised and reduced where possible
6.	Understanding Behaviour
6.1	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.
	The provider will ensure:

	 Staff have training around understanding behaviour Staff engage with family carers and others who know the individual well to gain understanding of behaviour 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 Ensuring that biopsychosocial factors (i.e. physical health) are considered as part of understanding behaviour Staff are offered a face-to-face debrief in a timely manner 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
7.	Functional and Skills Assessments
7.1	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.
	Providers will ensure:
	 Staff understand the purpose of functional and skills assessments and are supported to contribute to the assessment process Assessments are completed in conjunction with the individual and their circle of support A process of robust and meaningful data collection is used (i.e. ABC forms, observations, views of frontline staff gathered) The assessments are used to tailor the support delivered
8.	Communication
8.1	As per the overarching specification, providers are expected to adhere to the five good communication standards for all individuals they work with:
	1: There is a detailed description of how best to communicate with individuals.
	2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services.
	3: Staff value and use competently the best approaches to communication with each individual they support.
	4: Services create opportunities, relationships and environments that make individuals want to communicate.
	5: Individuals are supported to understand and express their needs in relation to their health and wellbeing.
	https://www.rcslt.org/news/docs/good_comm_standards

8.2	 Communication Passport 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: completed by a member of staff who knows the individual well and has a good understanding of the individual's communication strengths and needs completed with the individual and their circle of support understood by all staff and used to tailor service delivery reviewed and updated regularly
9.	Staffing and Training
9.1	 Providers are required to ensure that the staff team is recruited and shifts allocated in order to guarantee: Staffing numbers and ratios Required skill set Emotional wellbeing and resilience of staff
9.2	 Training The provider is required to: Ensure that all staff have received accredited PBS training and continue to have refresher sessions Conduct regular training and skills audits to identify whether staff: have the necessary skills to meet the needs of the individual have the understanding to implement guidance from professionals, including implementing all aspects of the PBS plan have incorporated learning from training they have received Arrange training (in-house or externally) to address and gaps identified through the audit process
9.3	Ongoing supervision
	 The provider will: Provide regular supervision and on-the-job coaching to support the implementation of the PBS plan Practice reflective practice during supervision sessions with staff, including encouraging staff to reflect on how their actions may impact on the behaviour of the person they support
10.	Partnership Working
10.1	 Specialist clinical input is available through ILDP and providers are expected to seek their advice: if struggling to identify the triggers and/or functions of specific behaviours displayed by a service-user, despite reviewing behaviour monitoring forms and discussing the behaviour as a staff team

• if there is a significant change in the frequency, intensity or type of behaviour displayed by an individual and staff are unable to identify possible contributing factors for this
Providers will be expected to engage with the PBS Project being developed by the North Central London (NCL) Transforming Care Partnership (TCP). This is likely to involve joining a PBS forum amongst other activities to share best practice and learning.
<u> </u>

Service User Needs and Outcomes form

A separate form will be used for each individual service user associated to each specific invitation to tender.

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.

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

dation Specification	
of property	
escription	
dential places	
with own bathroom, kitchen,	
oor lift	0
rooms with en-suite	
rooms without an en-suite	0
ess within floors?	
imunal meeting nges	
munal kitchens	
f offices in the property	
f sleep in rooms	
red bathrooms and WCs e to service users	
pom?	
ations in the property?	
al equipment installed?	
tive technology installed?	
Functions	

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