

# **SERVICE SPECIFICATION**

FOR THE PURCHASE OF

Wellbeing Services for Adults with Sensory  
Impairments in the Community

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## INTRODUCTION

1. This Service Specification, in conjunction with the Contract Terms and Conditions and other documents which form this Contract, defines the Commissioners' minimum requirements for Service Providers who deliver Wellbeing Services for Adults with Sensory Impairments in the Community commissioned through this contract. It details the standards and outcomes that must be achieved and describes how these will be evidenced and monitored.
2. This Service Specification sets out the requirements for the provision of Wellbeing Services in the Community which are designed to deliver preventative community based wellbeing services for Adults with Sensory Impairments in Kent which help prevent or delay deterioration in people's health and wellbeing and help to manage demand for statutory health and social care services
3. Delivered in the community, these services will be for accessible for all adult residents of Kent with sensory impairment(s) and their carers. These services will be outcome focused – with the primary aims being to promoting wellbeing, support independence, reduce loneliness and social isolation for residents regardless of whether or not they are receiving other services from Adult Social Care.
4. This Specification supports the aim of developing a new outcome-focused care and support model throughout the Contract term to meet the Council's strategic objective that 'Older and vulnerable residents are safe and supported with choices to live independently'
5. It is important to ensure that the services delivered through this specification are accessible to all eligible Kent residents, reflecting their diversity and range of needs and aspirations.
6. This specification has been produced through engagement with people with sensory impairments and Carers, Provider organisations, CCG Commissioners and local care leads, District and Borough Councils, key stakeholders in the community and Kent County Council Commissioners. Kent County Council wishes to thank all those who have contributed to this Service Specification.

7. Improving the way we work with the NHS through integrated commissioning and provision to promote the wellbeing of adults with care and support needs, including Carers, is vital to delivering the ambition of effective and efficient co-commissioning and delivery. This service must co-operate with any activity to further enhance this and adhere to any developments and enhancements as this develops.

## **KENT STRATEGIC CONTEXT**

8. Kent is home to 1.55 million people, the most populated county in England.
9. Kent County Council's vision is to help people to improve or maintain their wellbeing and to live as independently as possible. 'Your life, your wellbeing' details Kent County Council's vision for the future of adult social care. As the demand for adult social care is increasing and finances are under pressure, expectations of adult social care are changing.
10. Adult social care in Kent needs to continue to respond to these challenges. 'Your Life, your wellbeing' sets out our approach to adult social care into three themes that cover the whole range of services provided for people with social care and support needs and their carers:
  - promoting wellbeing – supporting and encouraging people to look after their health and well-being to avoid or delay them needing adult social care;
  - promoting independence – providing short-term support so that people are then able to carry on with their lives as independently as possible;
  - supporting independence – for people who need ongoing social care support, helping them to live the life they want to live, in their own homes where possible, and do as much for themselves as they can.
11. The following service specification is a key element in achieving the above themes.
12. Preventative community based wellbeing services which help prevent or delay deterioration in people's health and wellbeing, and thereby enable them to live safely in their own homes for longer, are seen to be a key strand in the strategy to reduce demand on health and social care resources. The universal support services commissioned will therefore be available to all those who meet the eligibility criteria, regardless of whether or not they are receiving any services from Adult Social Care.
13. The NHS, social care and public health in Kent and Medway are working together to plan how we will transform health and social care services to meet the changing needs of local people.

14. The Kent and Medway STP are focussed on how best to encourage and support better health and wellbeing, and provide improved and sustainable health and care services, for the population of Kent and Medway.

15. The vision for the STP local care model is a:

“...collective commitment of the health and care system in Kent and Medway to fundamentally transform how and where we will support people to keep well and live well. We will help people to understand that hospitals aren’t always the best place to receive care. Clinical evidence shows us that many people, particularly frail older people, are often better cared for closer to home. The model will build a vibrant social, voluntary and community sector to support people to look after their health and wellbeing, connect with others, manage their long-term conditions and stay independent.” (*The Kent & Medway Sustainability and Transformation Partnership - ‘Local Care’ Investment Case*)

16. KCC and CCG officers are engaging at both a strategic and operational level, through established networks, to discuss interdependencies and joint working, including the opportunities to further joint commission.

17. The predicted numbers of adults with visual and hearing impairments can be found in appendix 1.

## THE SERVICE

18. The Kent sensory strategy defines those with sensory impairments as follows:

- i. The term sight impairment refers to someone who is blind or partially sighted. It does not refer to someone who is short-sighted or long-sighted.
- ii. d/Deaf refers to someone who is Deaf, deafened or hard of hearing. The term d/Deaf will be used throughout to include people who are Deaf (British Sign Language users), who were either born deaf or became deaf in early childhood and use BSL as their first or preferred language. The focus of this term is on the ‘D’ in Deaf to indicate that they have their own language and culture.
- iii. Deafblindness is regarded as a separate unique disability. Persons are regarded as deafblind if their combined sight and hearing impairment causes difficulties with communication, access to information and mobility.

19. The role will focus on supporting adults with sensory impairments.

20. The service will support people to maintain and improve their wellbeing and develop resilience and confidence to help them live as independently as possible. This will include, but is not limited to:

- peer support;

- befriending;
  - exercise;
  - arts and heritage;
  - creative activities;
  - physical activities; and
  - cognitive stimulation opportunities, enabling people to pursue new and old interests as desired.
21. The delivery model should aspire to promote wellbeing and support people to continue participating in activities that they enjoy and to maintain or establish new networks and support systems, rather than a default option of meeting people needs through a formal service. However, a person centred approach must also recognise that how this is achieved will vary depending on the needs of the individual. People with more complex and/or multiple needs may require a more structured offer to help and support them.
22. The service will need to promote wellbeing as a concept to individuals in order to build resilience and help keep people mentally well. The service should sign post or support people to take part in activities which promote wellbeing such as those identified through the 'Six Ways of Wellbeing' or via 'One You' national resources. This may include being active (e.g. health walks), learning, or taking an active role in their community (e.g. volunteering).
23. The service should deliver interventions that have an evidence based approach demonstrating good practice. This should not stop innovation and creativity to meet the specified outcomes.
24. Mechanisms used to identify the support people need and the appropriate response in each case will vary depending on the needs of the individual.
25. Providers should have an awareness of the specialist services available in their area which support people (particularly those with dementia and physical disabilities) their Carers and their families, so that they can refer them on to services which are able to provide them with specialist information, advice and support to help them understand the condition and its impacts. This will include raising awareness of, and recommending the use of, the [This is Me](#) tool when supporting anyone living with, or caring for someone who is living with, dementia.
26. The provider will populate and maintain the Vision Impairment Register on behalf of KCC.
27. During the mobilisation period variations to the specification may be agreed to reflect the new pathway for adults with sensory loss e.g. the training needs of staff.

## Community Focus

28. Community Navigators have been commissioned under a separate contract to have oversight of the full range of social, health, economic and environmental support available locally and establish excellent knowledge of, and links with, local opportunities and sources of information/support. This includes

supporting people to access a range of community activities which allow them to connect with, and contribute to, their local community.

29. Providers should work with their local Community Navigator(s) as appropriate to support people to access their local communities.

## **Aims and Objectives of the Service**

30. The Provider will work with people to identify their needs in order to deliver the following objectives, which support the Personal Outcomes identified in this specification:

- People are empowered and supported to achieve their personal goals and address any immediate concerns; and
- People's health, wellbeing and independence is improved, or maintained, as a result of the support received.

## **OUTCOMES**

31. This specification responds to development in social policy regarding a shift in focus from service inputs to the outcomes they achieve and as such this specification primarily focuses on the outcomes of the services required. This model may appear different from previous specifications as it does not tightly prescribe what providers should do in order to achieve the outcomes required.
32. Kent County Council is confident that provider organisations have the ability and skills to organise their resources in the best way possible to achieve the outcomes specified.
33. Providers are encouraged to operate flexibly, be innovative and 'try new ways of delivering services, outcomes and interventions', then learn and improve what they do. As such Kent County Council welcomes innovative approaches that add value and maintain and improve people's wellbeing whilst also meeting people needs.
34. Outcome focused services are fundamentally person-centred in approach, recognising that each person is unique and will have different requirements and levels of needs. Outcomes can be defined as "the intended impact or consequence of a service on the lives of individuals and communities". An outcomes focused service aim is to achieve the aspirations, goals and priorities as defined by the person accessing the service through interventions and activities.

35. Kent County Council is specifying the outcomes which the providers are to achieve, these outcomes have been co-produced and are what people have told us is important to them.
36. This specification details the service outcomes in terms of minimum levels of delivery and requirements. It is expected that Providers will seek alternative and additional ways of working to ensure all outcomes are fully delivered across Kent.

## **Personal Outcomes**

37. Providers are expected to support all people that they work with (under all Parts of the specification) to achieve their personal outcomes by using an approach which best meets each Person's needs. A range of different responses and approaches will be required, particularly in relation to the level of need and identified goals/outcomes of older people and people living with dementia.
38. The Personal outcomes set out below have been identified by the people of Kent as being important to them:

### **Information and advice**

1. I receive information and advice that is the right amount and easy to understand.

### **My Community**

2. I am able to access social activities that I enjoy.

### **My Care and Support**

3. I feel listened to.

### **My Health**

4. I don't feel lonely;
5. I am supported to live safely and independently;
6. I am able to carry out everyday activities that I choose.

39. These personal outcomes have been developed through a process of engagement including public consultation, and co-production. The summary report of the public consultation can be found at [insert link](#).

## **System Outcomes**

40. By working in partnership with Commissioners, the Provider should be able to demonstrate how the service specified has contributed to the following:

- Reduction in the number of people entering social care and health services unnecessarily;
- Reduction in the level of unmet need at the point of referral to social care or health;
- Increased community capacity so that communities are more able to support vulnerable residents.

## Social Value

41. Kent County Council services have a social purpose and therefore Kent County Council will require that services become smarter at determining social value working within the commissioning process. This will be through improving the economic, social and environmental wellbeing of Kent.

42. The Public Services (**Social Value**) **Act 2012** requires public bodies to consider how the services they commission and procure might improve the economic, social and environmental well-being of the area.

43. The Provider must demonstrate how they will contribute to and measure the following social value contributions in their delivery of the contract:

Theme	Description
Good Employer	Support for staff development and welfare within the service providers' own organisations and within their supply chain.
Community Development	Initiatives to support people with sensory impairments to build stronger community networks and reduce social isolation.