



**Nottingham**

**City Council**

**CPU 1945 Day and Evening Services**

**Accreditation**

***Service Specification***

# Nottingham City Council

## Service Specification

### Day and Evening Services

#### 1. Introduction

- 1.1 This service specification sets out the Council's requirements for the provision of out-come focussed, person-centred day and evening services that provide eligible adults at risk, including those with a learning disability, mental health issues, physical disabilities, and older people with a range of activities including, where possible, weekend opportunities.
- 1.2 Whilst wanting to ensure that a broad spectrum of day service provision is developed to meet the diverse needs of adults at risk in the city, Nottingham City Council also has an obligation to ensure that our citizens are being safeguarded. Furthermore financial regulations dictate that Nottingham City Council can only pay directly for services provided to citizens where there is a formal contractual relationship with that provider. This service specification will be the means by which this contractual relationship is established.
- 1.3 It is intended that this specification will facilitate the development of an improved offer of personalised service provision for Nottingham's citizens. By engaging in this Accreditation, service providers will be able to deliver services to eligible citizens who choose not to take their personal budget as a direct payment. Citizens (service users) will also be reassured that the service that they will receive will be monitored by the City Council in respect of agreed quality standards.
- 1.4 For the purpose of this service delivery specification, a day service is defined as a support/activity service provided during the day (including evening) for the purpose of delivering outcomes specified in the attendee's support plan and to provide respite for a service user's carer.

A day service would ordinarily be utilised to enhance a person's life through social interaction, opportunities to be independent and experiences to encourage self-realisation. They might also specifically offer a safe environment for a person at risk and/or a means of providing personal care. It is expected that day services would normally take place away from the home environment.

It is anticipated that the activity will take place predominantly in a specific fixed building and that activity will typically take place in a group setting.

- 1.5 The specification will form an integral part of the contractual arrangements and provides the criteria by which service quality, efficiency and effectiveness will be monitored and evaluated by the Commissioner, (included here any other interested party – e.g. CQC – if relevant)".

1.6 It is our aspiration that many different providers of day services will participate in this Accreditation.

1.7 Nottingham City Council is the sole investor in respect of these services

## **2. Strategic Relevance**

### **The Nottingham Plan**

Day and evening opportunities will provide services which are able to meet the specific needs and wishes of the individual Citizen. This will provide Citizens with choice and control over how services are delivered maintaining dignity, independence and control

### **Vulnerable Adults Plan**

Day and Evening Services will support the outcomes and objectives of the Vulnerable Adults Plan

- The focus of the Authority will be on early intervention and support to prevent care needs from escalating and to promote an individual's independence wherever possible
- Aims to improve the outcomes for adults at risk by providing them with support to live with choice and dignity in a setting which meets their individual needs
- To enable citizens to be active partners in their own support

### **Adult Social Care Outcomes Framework**

The Adult Social Care Outcomes Framework measures a Provider's performance against the ambition of ensuring that wherever they live people receive the highest quality of care.

The Framework is split into four domains, each with their own outcomes and where appropriate these outcome measures are included in this specification (please see section 4).

### **A Vision for Adult Social Care: Capable Communities and Active Citizens**

As a result of the modernisation agenda of adult health and social care as detailed in the Department of Health publications Our Health, Our Care, Our Say and, latterly, A Vision For Social Care, Capable Communities & Active Citizens, there is a need to transform the range of day services/opportunities available to Nottingham's citizens. A wider choice of provision is required which is responsive to the needs and aspirations of the individual in order that they fulfil their potential in a safe and supportive environment.

## **The Care Act 2014**

The Care Act requires the Local Authority to ensure that the Citizen and their views, wishes, feelings and beliefs is at the heart of all decision making. Authorities should start with the assumption that the Citizen is in the best place to make judgements about their own wellbeing.

Authorities should focus on preventing or delaying the development of the need for care and support wherever possible and the importance of reducing needs of either kind which already exist.

Authorities should ensure that services operate causing the minimum restrictions on Citizen necessary and that Citizens are protected from abuse or neglect.

### **3. Service Specific Requirements**

#### **3.1 Accessing Day and Evening Services**

The need for a Day or Evening Service will be identified during the assessment / review process with Adult Social Care (ASC). The allocated worker from ASC will identify services which are able to meet the assessed needs and outcomes of the Citizen from the Accredited list.

The worker from ASC will support the Citizen to decide which of the selected providers is most suitable to meet their needs. This may include supporting the Citizen to visit the services.

The Citizen will have been allocated a personal budget and wherever possible, preference will be given to providers who can meet the needs of the citizen within the Personal Budget.

Where there is not a suitable provider on the Accredited List which can meet the needs of the Citizen but Adult Social Care have been able to locate a provider outside of the List, then the provider will be able to accredit their organisation.

For the full Call Off process please see Appendix 1

Nottingham City Council will produce a list of accredited services which will be made available to Citizens and their social worker / assessor to inform their decision making process. Providers will be asked to complete a pro forma (see Application Form) which will populate the document. The list will also be available to citizens who are utilising a Direct Payment as well as those whose service is being commissioned by Nottingham City Council

### 3.2 Service Aim

The focus of all Day and Evening Services should be on increasing the Citizen's skills for independence.

The outcomes for each individual Citizen will be set out in the support plan at the commencement of their service and will focus on the promotion of self-care and the skills to live independently.

Through organised, meaningful activities, the service should promote some or all of the following:

<p><b>Social inclusion</b></p> <ul style="list-style-type: none"> <li>• Making friends</li> <li>• Maintaining relationships</li> <li>• Communication</li> <li>• Trust</li> <li>• Enjoyment</li> <li>• Humour</li> <li>• Cultural needs</li> </ul>	<p><b>Health &amp; Wellbeing</b></p> <ul style="list-style-type: none"> <li>• Exercise</li> <li>• Sport</li> <li>• Diet/Nutrition</li> <li>• Relaxation</li> <li>• Hygiene</li> <li>• Access to appropriate therapies</li> </ul>
<p><b>Independence</b></p> <ul style="list-style-type: none"> <li>• Skills for independence and self-care</li> <li>• Decision-making</li> <li>• Managed risk-taking</li> <li>• Learning and involvement</li> <li>• Discussion</li> <li>• Leisure</li> <li>• Resilience</li> </ul>	<p><b>Self-realisation</b></p> <ul style="list-style-type: none"> <li>• Creativity (e.g. art, music, writing)</li> <li>• Self-expression (e.g. dance, drama)</li> <li>• Challenge</li> </ul>

### 3.3 Intended Users

The Intended users of Day and Evening Services will be eligible citizens (18 years+) with a personal budget commissioned on their behalf by Nottingham City Council.

This will include:

- Older people
- People with Learning disabilities,
- People with Mental health needs,
- Autistic People
- Physical & Sensory disabilities,
- Other social care needs

### **3.4 Availability of Service**

In general the service will be expected to be available to all residents of Nottingham City (citywide).

Access to the service may be via self-referral or through brokerage. Services must keep accurate records of all referrals and the outcome of these.

Services should be available Monday – Sunday between 9am and 4pm and 6pm – 10pm.

It is anticipated that the Provider will deliver the appropriate number of hours of services per week as identified in the individual support plan/person centred plan.

In situations where the citizen becomes a risk to the health and safety of themselves or others the Provider may suspend the placement immediately. A review shall be held as soon as possible to make decisions about the future care and support of that individual. The provider must ensure that the citizen of their carer is not left in a vulnerable situation without necessary care and support.

### **3.5 Location of Service**

It is anticipated that the service(s) will be located/delivered in Nottingham City or within the area immediately surrounding the City.

Where a fixed building base is provided, it/they will be of sufficient and flexible size to accommodate the number of people using the facility, having quiet space for people who wish to take a break and will be able to meet the needs of the citizen as identified within the care and support plan.

The provider will ensure that bases are maintained in good order and have suitable facilities / equipment to meet the assessed needs of service users accessing the service. Bases will meet the Equalities Act requirements and all requirements of legislation in respect of Health and Safety, Fire Precautions and Environmental Health will be satisfied.

Unless the provider has clearly identified that they are unable to accommodate certain support needs, physical or otherwise, service bases must be suitable in terms of assisting citizens with their toileting and changing needs and accommodate those who cannot use a standard disabled toilet. In exceptional circumstances another facility nearby can be accessed to support with aspects of personal care (e.g. a local health centre).

### **3.6 Service Activities**

The service should offer a range of activities that deliver the following key objectives regardless of the user group:-

- To promote independent living skills
- To provide social contact and stimulation
- To offer meaningful activities which maintain and enhance physical and mental wellbeing
- To provide a place where citizens can be helped to access universal services
- To provide (or provide access to) education and training opportunities
- To offer or enable preparation for employment or access to work opportunities
- To maintain/restore and develop independence including basic life-skills
- Care and monitoring of highly dependent or frail and adults at risk
- Support and monitoring for adults at risk
- Support and advice for carers including respite care
- To assist recovery and rehabilitation after a critical episode. This could relate to both physical and mental health.

### **3.7 Equipment**

The provider will possess all necessary equipment appropriate for the services being delivered, excluding personal items which the service user would be expected to possess. Equipment will be maintained in accordance with Health and Safety legislation and the manufacturers' guidance, supervised and operated by suitably trained staff when in use and stored safely when not in use.

Providers should also ensure that they have appropriate administrative resources including email, phone, photocopying etc. to support the needs of the services being delivered.

### **3.8 Record keeping**

The provider will ensure appropriate records are maintained and available to the Council, or agents acting on their behalf, including but not limited to:

- Person-centred records
- Care plans
- Activity plans
- Risk assessments
- Financial transactions undertaken on behalf of Citizens
- Monitoring and review of Care Plans and Person-Centred Plans
- Any assistance with medication or other health related tasks where this has been identified in the Care plan
- Delivery of First Aid
- Preparing reports for and attending Citizen reviews
- Health and Safety audits
- Staff rosters
- Register of attendance
- Safeguarding referrals

In addition, the provider will keep and make available to the Council or agents acting on their behalf, upon request:

- Details of all staff employed (including volunteers) and staff changes
- Staff records including training and induction
- Records of all financial transactions carried out on behalf of Citizens
- Details of all complaints received and actions taken
- Records of all accidents/ incidents involving staff/ Service Users with follow up risk assessments and records of actions taken
- Health and Safety audits
- Information on any past or current criminal convictions of staff (DBS)
- Evidence of eligibility to work in this country

### **3.9 Wellbeing**

Services must promote the wellbeing of individuals, their children and their carers when carrying out care and support functions. Wellbeing is set out in the Care Act 2014 and is a broad concept relating to the following areas

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Control by the individual over their day to day life (including over care and support provided and the way it is provided)
- Participation in work, education, training or leisure activities
- Domestic, family and personal relationships
- Suitable living accommodation
- The individual's contribution to society.

Services should have a strength or asset based focus on supporting citizens to live as independently as possible for as long as possible, taking a person centred approach.

## **4. Outcomes**

### **4.1 High Level Outcomes**

The Service must be delivered in a manner which support the principles set out in the Care Act 2014;

- (a) the importance of beginning with the assumption that the individual is best-placed to judge the individual's well-being;
- (b) the individual's views, wishes, feelings and beliefs;
- (c) the importance of preventing or delaying the development of needs for care and support or needs for support and the importance of reducing needs of either kind that already exist;



- (d) the need to ensure that decisions about the individual are made having regard to all the individual's circumstances (and are not based only on the individual's age or appearance or any condition of the individual's or aspect of the individual's behaviour which might lead others to make unjustified assumptions about the individual's well-being);
- (e) the importance of the individual participating as fully as possible in decisions relating to the exercise of the function concerned and being provided with the information and support necessary to enable the individual to participate;
- (f) the importance of achieving a balance between the individual's well-being and that of any friends or relatives who are involved in caring for the individual;
- (g) the need to protect people from abuse and neglect;
- (h) the need to ensure that any restriction on the individual's rights or freedom of action that is involved in the exercise of the function is kept to the minimum necessary for achieving the purpose for which the function is being exercised.

The service must be guided by the seven principles identified in "A vision for adult social care: Capable communities and active citizens " (Department of Health 2010):

- Prevention: empowered people and strong communities will work together to maintain independence. Where the state is needed, it supports communities and helps people to retain and regain independence.
- Personalisation: individuals not institutions take control of their care. Personal budgets, preferably as direct payments, are provided to all eligible people. Information about care and support is available for all local people, regardless of whether or not they fund their own care.
- Partnership: care and support delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils - including wider support services, such as housing.
- Plurality: the variety of people's needs is matched by diverse service provision, with a broad market of high quality service providers.
- Protection: there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people's freedom.
- Productivity: greater local accountability will drive improvements and innovation to deliver higher productivity and high quality care and support services. A focus on publishing information about agreed quality outcomes will support transparency and accountability.
- People: we can draw on a workforce who can provide care and support with skill, compassion and imagination, and who are given the freedom and support to do so. We need the whole workforce to lead these changes.

## 4.2 Individual Outcomes

Where there are specific outcomes to be delivered by the service in respect of an individual, these will be those stated in the individual support plan. Attainment of these outcomes will be monitored by the citizen and through the Nottingham City Council citizen review process.

Specific outcomes may be identified for a citizen that focus on the development or maintenance of skills for independence. This could include being able to prepare a

meal, being able to use public transport or in some cases prepare the Citizen for employment.

In addition it is anticipated that the service will be able to evidence the following Adult Social Care Outcomes Framework (DoH November 2014) measures:

- 1B. The proportion of people who use services who have control over their daily life
- 3A. Overall satisfaction of people who use services with their care and support
- 4A. The proportion of people who use services who feel safe
- 4B. The proportion of people who use services who say that those services have made them feel safe and secure

### **4.3 Outcomes Based Support Plans**

There may be instances where it is anticipated that the achievement of an outcome will lead to a reduction in the amount of care and / or support which the citizen requires. In these instances the reduction of the care and / or support will form part of the judgement as to whether the Citizens outcomes are being achieved.

There may be cases where an element of the payment schedule is dependent on the achievement of specified outcomes. This could include a proportion of the overall cost of the service or an incentivisation payment from ASC on the achievement of an outcome.

Where either of the above elements form part of the citizens support plan, the outcomes and the process for measuring their achievement will be agreed with the citizen, the provider and Adult Social Care prior to service commencement.

## **5. Social Value**

5.1 The service is expected to add social value in Nottingham through (but not limited to):

- Social inclusion for residents and the representation of service users as positive contributors to the life of the city.
- a focus on developing and retaining skills for independence, preventing costs to other services such as health, particularly emergency health services.
- enabling Citizens to develop or retain their skills for independence should assist with reducing the need for residential provision.
- supporting carers to care by providing an opportunity for respite provision.
- offering Citizens volunteering opportunities wherever possible to support and enable Citizens to develop skills for employment
- Due to the nature of the service provided it is likely that care workers will be from the local area and this should be encouraged where possible and appropriate

## **6. Citizen Focus**

- 6.1 Providers will be expected to take a person centred approach with all citizens
- 6.2 Providers should ensure that they have regard to the Mental Capacity Act and Deprivation of Liberty at all times. The best interests of the Citizen should be at the forefront of any decision making.
- 6.3 The Service must promote and encourage the choice, independence and wellbeing of the citizens, taking into account their particular circumstances and chosen lifestyle and the need to promote a secure environment. It must be delivered in a non-discriminatory manner.
- 6.4 In all aspects of service delivery the needs of the whole person (ie physical, psychological, social, emotional and spiritual) should be taken into account. This will require staff to spend time on gaining an understanding of the citizen's life history, personality, mental and physical health, relationships, attitudes and aspirations. The planning or provision of any Service should always be approached from the citizen's perspective.
- 6.5 Citizens should be engaged wherever possible in the design of the service they are receiving. This should include but not be limited to Citizens being involved in the design of programmes of activity for the service.
- 6.6 There must be reliable delivery of the Service at all times to all citizens.
- 6.7 The Service must maintain the citizen's right to privacy, dignity and confidentiality, and must recognise this when consulting the citizen's carer and/or family.
- 6.8 Where the citizen is in agreement family members and other key carers are known and communicated with. Documentation detailing support for carers and family members is available and easily accessible.

### **6.9 Accessible Information**

The service should demonstrate consideration of, and make reasonable adjustments for, the different needs and preferences of users (and potential users) in regards to their engagement with the service.

The service and any information provided should meet the requirements of the Accessible Information Standard

<https://www.england.nhs.uk/ourwork/patients/accessibleinfo/#standard>

## 6.10 Complaints

The Provider shall have in place a written complaints procedure that is understood and implemented by all staff and shall make that procedure available to citizen and carers in an accessible format,

## 7. Resilience

- 7.1 Services should be provided with the focus on enabling or re-enabling the Citizen's skills for independence wherever this is possible. Citizens should be supported to realise the maximum independence possible by acquiring or reacquiring basic living skills and to retain those which remain for as long as possible.
- 7.2 Citizens should be provided with support and assistance which allows them to increase control over their daily lives.
- 7.3 Services should be designed to achieve the maximum rehabilitative effect. As well as assistance and support with physical rehabilitation, this will include ensuring that appropriate aids and equipment are available, assisting in the learning or relearning of skills and techniques necessary for independent living, the provision of encouragement and support to rebuild confidence or self-motivation etc. It is important that where they have the ability, citizens are supported to carry out tasks for themselves.
- 7.4 A range of preventative services should be provided to enable citizens to take action to preserve or promote their own health and wellbeing. This should include a focus on the promotion of emotional wellbeing. These will include advice and information on healthy living and safe practice, as well as opportunities for maintaining physical fitness and good nutrition.

## 8. Partnership Working

A close working relationship between the Provider's staff employed in the delivery of the Service, Adult Social Care's assessment teams and NHS Staff should be established and maintained to ensure that the health, independence, mental and physical ability of Citizens is optimized.

## 9. Safeguarding & Child Protection

- 9.1 Nottingham City Council requires that all providers follow the Nottingham & Nottinghamshire Safeguarding Adults Policy, Procedure & Guidance, available on the Nottingham City Council website here:  
<http://nottinghamcity.gov.uk/CHttpHandler.ashx?id=8430&p=0>

9.2 And where appropriate the Nottingham City Safeguarding Children Board procedures and practice guidance, available on the Nottingham City Council website here: <http://nottinghamcity.gov.uk/index.aspx?articleid=2327>

9.3 In addition, the following should be put in place by providers:

- Providers should attend the appropriate level of safeguarding training via Nottingham City Council or their own internal training structures.
- Safer recruitment procedures should be adhered to.
- All safeguarding referrals should be logged and outcomes recorded.
- The provider should establish internal safeguarding policy & procedures as appropriate to the size of the organisation, and that align with the requirements of the Nottingham and Nottinghamshire Safeguarding Adults Policy, Procedure and Guidance and those of the Nottingham City Safeguarding Children Board.
- The provider should have policies and procedures which specifically relate to domestic and sexual violence. This should include the practice of direct enquiry with all service users. If risk is identified, the provider must complete the Domestic Abuse, Stalking & Harassment Risk Indicator Checklist (known as the DASH RIC form).
- Nottingham City Council requires providers to co-operate with investigations of abuse including appropriate representation at City Council safeguarding case conferences and submit action plans in response to recommendations arising from safeguarding investigations as required.
- Nottingham City Council requires providers to contribute to all major incidents which require multi agency review.

## **10. Equality & Diversity**

10.1 The service should be delivered in accordance with Nottingham City Council's Equality and Diversity Policy

10.2 As a Provider you shall ensure that in delivering this service the organisation does not discriminate against people because of their race, religion, gender, disability, age or sexual orientation. This should also incorporate respect for Staff and Service Users irrespective of race, religion, disability, age, sexual orientation and gender. In addition to the Provider taking steps to prevent such unlawful discrimination, The Provider shall also ensure that they promote equal opportunities and good community relations between people from different racial/social groups where possible.

## **11. Health & Safety**

11.1 There is an overriding requirement on the Provider to monitor the health and safety of the citizen, bringing any concerns to the attention of the Citizen, the Purchaser and any other relevant party

11.2 The service provider shall be responsible for risk assessment, hazard control and other health and safety matters affecting its staff in the delivery of services. The service provider shall do all that is reasonably practicable to prevent personal injury and damage to property and to protect staff, citizens and others from hazards.

11.3 The service provider will need to demonstrate compliance with all relevant Health and Safety legislation and guidance relating to every element of the service. The Partner's Health and Safety Officers will take an active part in reviewing health and safety procedures and documentation prior to the award of the contract.

11.4 The service provider will use reasonable endeavours to ensure that in its performance of the services it uses working methods, equipment, materials and consumables which minimise environmental damage.

11.5 The provider must have appropriate policies in relation to the following:

- Lone working / home visits
- Fire safety
- COSHH
- Manual Handling
- First Aid / accidents and injuries
- Substance misuse

## **12. Workforce**

12.1 The service will be provided with the appropriate level of fully trained staff who have been subject to an enhanced DBS check and have the appropriate training and inter-personal skills to care for and support the anticipated service user group

12.2 Providers should seek to employ citizens from the local area where possible and practical to do so.

## **13. Contract Compliance**

Nottingham City Council is committed to commissioning high quality services which support the delivery of health and social care outcomes. These outcomes are also part of the Council's vision of promoting independence and choice as identified in its Corporate Plan.

The Provider shall at all reasonable times during the Contract period allow authorised officers of the Local Authority, or agents acting on their behalf, access to all documents relating to the performance of the service under the Contract.

The Provider must be able to demonstrate that it has a commitment to providing a quality Service and ensuring customer satisfaction. In order to do this the Provider

shall have developed a quality assurance system, which continuously reviews and improves the standards of service delivery. Such a system shall include but not be limited to the following:

- **Quality Assurance Processes:** The Provider is required to implement appropriate Quality Assurance processes to monitor service delivery as a whole. The Purchaser will carry out their own Quality checks as part of service monitoring.
- **Spot Checks:** Both the Provider and the Purchaser shall undertake spot checks to satisfy themselves of the ongoing quality of service delivery, and shall make a report available to the other Part, which includes details of any remedial action to be or being taken.
- **Service User Feedback:** This shall involve the Provider recording individual comments about Service quality, and the outcome of these comments, as well as feedback from citizens and their families through appropriate methods such as questionnaires.

#### **14. Service Levels and Costs**

14.1 The service provider will produce clear concise information that is accessible to the intended user group describing the core elements of the service including any specialisms that the service may have. This should include but not be limited to, the target user of the service, the age range of service users,

14.2 When quoting costs these must be expressed as

- A cost per half session (a period of up to 4 hours)
- A cost per full session (a period between 4 and 8 hours)
- A cost per evening session

If your service is able to provide a full day session then a meal should be available for Citizens to purchase, though this will not be funded through a personal budget.

14.3 If the service provides different levels of service depending on a Citizens support needs, the differing levels will need to be clearly defined and the cost for each level described.

14.4 If the service is able to provide additional care at an hourly rate, this should be clearly stated.

14.5 If the service is not able to accommodate any particular care or support needs then this should be clearly stated.

- 14.6 If the service is able to provide additional activities which are not included in the core price per session please describe these separately. Please note that although this information will be provided to Citizens, these additional elements will only be funded by the Council if they are included as an outcome in the Citizens support plan.
- 14.7 If the service is able to provide transport then prices should be made clear and any limits described for example if there are there physical or geographical limits to the provision.
- 14.8 If a citizen is purchasing their service directly from the provider via their Direct Payment there is an expectation from Nottingham City Council that the service would be at a comparable cost to Citizens with a commissioned service.