



Doing Services Differently

Local innovations for disabled people and their families

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nef (the new economics foundation) is a registered charity founded in 1986 by the leaders of The Other Economic Summit (TOES), which forced issues such as international debt onto the agenda of the G8 summit meetings. It has taken a lead in helping establish new coalitions and organisations such as the Jubilee 2000 debt campaign; the Ethical Trading Initiative; the UK Social Investment Forum; and new ways to measure social and economic well-being.



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Foreword

Across the country, councils face unprecedented financial pressures. The Government has put in place the deepest, most sustained cuts to public spending since World War II; local authorities have been left with 27% cuts in their grant funding up until 2014–15. For some, this is a loss of over a fifth of their total budget.

But the worst is still to come. The Institute for Fiscal Studies estimates that only 5% of these cuts have actually been implemented.

Councils now face difficult decisions: about where to invest their money, time and resources and how to transform their services to produce better outcomes for disabled people and the communities they live in.

Like local authorities, the voluntary sector has also experienced substantial cuts to funding and increased pressure to significantly reduce costs. In this financial year alone the charity sector is facing cuts of between £1 billion and £5.5 billion.

This isn't what councils want, it's not what charities want, and it definitely isn't what disabled people or their families want. Time and time again disabled people tell us that if their council thought and did something differently it would significantly improve their lives. Together we need to move from an approach of doing more with less, to doing something very different with resources at the disposal of individuals, communities and public sector organisations

In this age of austerity, we need to work closely together to challenge the year-on-year cuts local authority budgets are facing from their funding settlement; showing the impact that this will have on the disabled people in our area. But also, we must work closely together to find new ways of building capabilities and capacity in citizens and communities – promoting greater independence, choice and control – so that we can find new and better ways for disabled people to do the things they want to do.

This report, written and produced by **nef** and informed by the ideas and reflections of disabled people and the actions that commissioners and providers are taking, argues that by focusing on innovation as a force for social change, local authorities and the voluntary sector can together improve the lives of disabled people and their families. This report celebrates social innovation in local

services – showcasing and sharing ideas that better enable disabled people to lead social change.

These social innovations don't come easily, but if partners learn to work together creatively – putting in the leadership, time, investment and support needed – they can really make a difference.

At Scope, we're passionate about possibility. It inspires us every day and means we never set a limit on people's potential. We believe a world in which disabled people have the same opportunities as everyone else would be a pretty incredible place for all of us. This vision is clearly shared by many local authorities who are striving to transform their services to produce better outcomes for disabled people and their families.

We hope that this revealing report will spark a new conversation – with and between councils and charities – on how both sectors can work with each other to deliver the support that disabled people want to chart their own course and lead the lives they want and value.

Richard Jones CBE, Executive Director Adult and Community Services, Lancashire County Council and a Trustee at Scope

Richard Hawkes, CEO, Scope

Executive Summary

This report is about local innovation in services for disabled people. This means 'doing services differently' so that they help make the lives of disabled people better; giving them greater choice and control, enabling them to participate equally in society and modelling social change.

This report shows how some local authorities and providers in England and Wales are delivering better services by working in partnership with disabled people and disabled people's organisations (DPOs). Where cuts and welfare reforms risk marginalising disabled people and delaying progress towards a more equal society for a generation or more, the innovative services highlighted here offer an alternative future, one based on strengthening the capabilities and citizenship of disabled people.

Cuts to services and support are marginalising disabled people and pushing them closer to the brink of crisis and poverty.¹ Equally, local authorities find themselves in a very challenging position, faced with unprecedented cuts to their budgets at a time of increasing demand for their services. With more cuts scheduled until at least 2015, this situation is likely to get worse before it gets better.²

The impact of these cuts is compounded by welfare reform and the tightening of eligibility for state-funded services. Vital support for disabled people is being made less secure, less protective and increasingly contingent. This is likely to increase demand for existing services, especially in health, housing and social care. The impact on local authorities is that there are more people in their communities who need support, but they have fewer resources to deploy to meet this need.

The challenge for local authorities in this period of austerity is to understand how local services can support disabled people when cuts are the main driver of change. Some local authorities have focused on back office efficiency savings in an attempt to protect front line services; others have had to cut services directly. Yet, relying on cuts alone is likely to be a false economy for local authorities. Cuts don't make services more efficient, they increase the demand for services elsewhere as well as further marginalising disabled people in the future. This in turn risks increasing the demand for more acute and expensive services. Focusing on what to cut doesn't produce innovation either.

Changing services in times of austerity should therefore be less about cutting and more about reframing the nature of disabled people's support. The purpose and rationale for changing services should be about improving the lives of disabled people, reshaping the communities they live in and increasing their independence.

Fundamentally, this means prioritising human outcomes – improvements in the well-being and life chances of disabled people, their families and carers – which often lead to cost-savings in the medium and longer term, over and above those generated by an exclusive focus on financial outcomes.

This requires a vision of ‘social change’ for disabled people – change based on the recognition that disabled people are limited by the barriers which society creates, rather than by their impairments. The vision is based on an understanding that the right services can make the lives of disabled people better, giving them greater choice and control, enabling them to participate equally in society and modelling social change. We call these services socially innovative.

In this report we present examples of innovations developed by local authorities and providers that demonstrate how services can improve disabled people’s lives, build on their abilities, and model and promote social change. These range from personalised and integrated support provided by local authorities, to services designed and delivered by disabled people for disabled people. They demonstrate ways of doing services differently.

The most important lesson we draw from these case studies is that better outcomes can only be achieved by placing disabled people and their families at the centre of this transformation from the start. The best way for local authorities to innovate is for them to work in partnership with disabled people and DPOs for a fairer, more equal and inclusive society. This will improve the lives of disabled people, as well as their well-being and inclusion in local communities.

Given the current difficult context, it is critical that local authorities learn from each other’s efforts to improve services and support for disabled people and their families. Innovating is harder in the context of austerity, so local authorities need to be committed and confident about wanting to make a lasting change. We hope this report offers a new way of understanding the purpose and direction for the changes that are needed in these times.

The impact of cuts

Cuts to their grants are forcing local authorities to make tough choices in order to cope with much lower budgets.

Local authorities face a 27 per cent cut in their grant funding to 2014–5.³ The Joseph Rowntree Foundation has suggested this figure could be even higher, since the cuts are front-loaded; allowing for inflation they may amount to 40 per cent of local authorities' grants or 25 per cent of their spending power.⁴

These cuts are not distributed evenly across authorities, with some losing more than 20 per cent of their total budgets.⁵ Significantly, it is the most deprived local authorities who have been hit the hardest by the cuts and who will, as a result, be forced to make the most dramatic reductions in services.⁶

Cuts are, and will be, the reality for local authorities for quite some time

Given the current state of the economy and political responses on both the left and right, it looks increasingly unlikely that there will be any kind of return to previous levels of funding, including that which is allotted to local authority services. We are likely to experience at least another five years of cuts. The Government also indicated in the April 2012 budget that it is considering an additional £10 billion of cuts to welfare by 2016.

In addition, local authorities will have to cope with the consequences of demographic change. Spending on adult social care is expected to increase by 84 per cent, from £14.5 billion to £26.7 billion by 2030, with a corresponding squeeze on councils' ability to fund other services.⁷

The result is that, for many disabled people, the support they need is being dramatically eroded

As a recent report from the Joseph Rowntree Foundation noted, some local authorities are responding to the cuts by re-designing and re-modelling services.⁸ We present examples in section 3.

However, many councils are responding to reduced budgets through closing or restricting services (especially 'low-level' support services), tightening eligibility criteria for care and support (including limiting it only to people considered to have the most critical and substantial needs), reducing the numbers of people on personal budgets/direct payments, and increasing charges for service users. Worryingly only half of the authorities surveyed by the JRF had prioritised 'protecting the needs of the most vulnerable clients or communities' as a principle to guide their implementation of the cuts and/or re-design of services.⁹

In particular, cutting preventative services that offer a bit of vital, but basic, support is likely to worsen disabled people's quality of life, and push many towards more expensive acute services. Councils are facing a perfect storm as demand for services and support is increasing while their income is decreasing.

These cuts will have a negative impact on disabled people, creating anxiety and pushing disabled people further away from participating in their local communities

Many disabled people already experience a range of economic and social inequalities. For example, in 2011 only 48 per cent of disabled people were in employment, compared with 77 per cent of non-disabled people. In 2009-10, 21 per cent of individuals in families with a disabled person lived below 60 per cent of the median income (before household costs), compared to 16 per cent of individuals in families where there were no disabled adults or children. This doesn't include the additional costs of disability, which significantly increases the number of disabled people in poverty.¹⁰ Such inequalities act as barriers to disabled people participating in and contributing to their local communities.

Where they have worked well, services provided by local authorities and providers have helped to mitigate the inequalities and social barriers that disable people with impairments. They have helped to give people greater choice and control over their lives, recognised and developed disabled people's skills and capabilities and helped them to live more fulfilling lives in their communities. Of course, many services for disabled people are imperfect, and fail to do these things – these require changing. However, cuts to local authority budgets make such improvements less likely, and risk undoing the good work that better services do.

The impact of these cuts is compounded by wider changes happening in the welfare system and the tightening of eligibility for statefunded services

Disabled people are at risk of being further marginalised by cuts and welfare reforms introduced by central government. Vital social support for disabled people is being made less secure, less protective and increasingly contingent. A number of changes are especially worrying for disabled people. In particular, many disabled people will be hit by the replacement of Disability Living Allowance (DLA) with the Personal Independence Payment (PIP) from April 2013. DLA supports people to meet some of the additional costs of disability and enables many disabled people to retain their independence, including staying in work. The Government has included an assumption of a 20 per cent saving as a result of the move to PIP, and the Department for Work and Pensions estimates that 500,000 people are likely to lose support.¹¹ This could lead to a significant increase in unemployment amongst disabled people.¹² Many charities have also expressed significant concern about the fairness and accuracy of the new assessment to gauge eligibility for PIP.¹³

Underlying all of these changes is a move to push risk away from central government and onto local communities and families

These reforms will impact significantly on local authorities as well. Welfare reform and cuts to services are likely to increase demand for existing services, especially in housing and social care. However, if demand rises, this doesn't mean that local authorities will be able to find the resources for the required support. The ending of ring-fencing for care and other grants also means that local authorities are likely to have a smaller cushion from which they can cross-subsidise shortfalls in their resources.

Despite the emphasis on localism and the Government's commitment to the 'Big Society', the voluntary sector has also experienced significantly decreased funding.¹⁴ One in five user-led organisations is expected to close in the next year, and most are expected to receive at least some cuts to funding, severely reducing access to support, advice and advocacy for disabled people and others.¹⁵

The impact on local authorities is that there are more people who need support, but fewer resources to meet those needs and help people live fulfilling and independent lives

The cumulative impact of the cuts and welfare reform on disabled people is difficult to discern in its entirety, such is its likely scale and complexity. However, one assessment of the impact of cuts and welfare reforms up to 2015 suggests that the poorest 20 per cent of the 2.7 million households receiving disability benefits will lose 16 per cent of their cash income plus benefits-in-kind.¹⁶ Among working families with disabled children, one in seven are already missing meals; this number increases to one in four families for those not in work.¹⁷ One in five family carers fears that they will be forced to give up work to look after their child or family member. Nearly three out of four carers fear that their child will not receive the support they need to live a full and independent life.¹⁸

Social innovation

The Government has suggested that efficiency savings are the 'answer' to these pressures, by suggesting that savings can be made without any significant impact on the front line.¹⁹ However, analysis has shown that this isn't the case.

The challenge for local authorities in this period of austerity is to understand how local services can support disabled people in a climate where cuts are the main driver for change.

Local authorities need to find an alternative basis for changing the support and services used by disabled people

Relying on cuts alone is likely to be a false economy for local authorities. Cuts don't make services more efficient, in fact they increase the demand for services elsewhere as well as further marginalising disabled people. This in turn risks increasing the demand for more acute and expensive services. Cuts are also an ineffective response to what is likely to be a long-term pressure on budgets. Focusing on what to cut doesn't produce innovation either.

Instead, real efficiency means improving outcomes, not just reducing financial inputs.²⁰ None of the innovations included later in this report were motivated primarily by money-saving. They started with what disabled people, their families and carers need in order to live better lives in their communities. This focus holds the key to a different way of changing services in the context of austerity.

Changing services in austerity should be less about cutting and more about reframing disabled people's support

For disabled people and those organisations that provide services to them, the purpose and rationale for changing services is about improving their lives, reshaping the communities they live in and increasing their independence. Local authorities should try to develop new and better services for disabled people because this will not only improve their lives but also the well-being of, and inclusion in, their local communities generally. Producing very different outcomes requires very different approaches.

Fundamentally, this means prioritising human outcomes over financial outcomes. While it is important to recognise the need for local authorities to make savings, a stronger emphasis can and should be placed on prioritising human outcomes – improvements in the well-being and life chances of disabled people, their families and carers – which can lead to cost-savings in the medium and longer term, over and above those generated by an exclusive focus on financial outcomes.

This means bringing about ‘social change’

‘Social change’ for disabled people means change which is based on the recognition that disabled people are limited by the barriers that society creates, rather than by their impairments. This vision is based on an understanding that the right services can make the lives of disabled people better; giving them greater choice and control, enabling them to participate equally in society and modelling social change.

Social change for disabled people is based on the social model, which argues that ‘disability’ is caused by the way society is organised rather than by a person’s impairment or condition. Disability is the inequality that people with impairments experience as a result of discrimination, inaccessible environments and a lack of resources, support and opportunities.²¹ This causes and reinforces poverty and social isolation. Disabled people’s lives will only improve through social change, by a radical transformation that ensures that society treats disabled people as full and equal citizens.²²

Services for disabled people are important not just because they support an often-marginalised and vulnerable section of society. Designed in the right way, and with proper investment, they have the potential to become vehicles for strengthening, promoting and protecting the equality of disabled people.

Innovating is harder in austerity, so local authorities need to be committed and confident about wanting to make a lasting change

In addition to their impact on disabled people, unprecedented pressures on budgets can make it more difficult for local authorities to innovate to change services for disabled people. Innovation takes time and requires capacity and resourcing – none of which are readily available in the current context.

Firstly, the extent and speed of the cuts to local authorities’ budgets has pushed many councils to focus on reducing existing services rather than developing better services that improve the lives of disabled people. In addition, reductions in the numbers of local authority managers limit the capacity in councils to plan and lead innovation.

Secondly, as noted, welfare reform and cuts to services are likely to increase demand for existing services, especially in housing and social care, and so further reduce the resources available to invest in new services.

Thirdly, the amounts of funding made available by central government for innovation, such as the *Innovations in Giving* fund and *Big Society Bank*, are too small to fill the gaps in vital services and welfare provision, or to make up for the reductions in funding available to the voluntary and community sector. It is more difficult for smaller provider organisations to apply successfully for support from national cross-sector funds, than from dedicated sector-specific funds.

Table 1: Needs-based and asset-based services

Needs-based services	Asset-based services
Professionals doing things to and for service users	Services supporting and enabling service users to do things for themselves wherever possible
Decisions being made on behalf of services users/ service users being represented by others	Genuine choice and control by service users, advocating for themselves and others
Consultation on services	Co-design of services between professionals and service users
Traditional professional/service user split – professionals deliver services to service users	Co-delivery of services between professionals and service users
Mainly one-to-one relationship between professionals and service users	Service users are part of active supportive networks and communities (for example, peer support)
Relying on professionals to provide information	Supporting and enabling service users to find and use information themselves
Because they focus on the most urgent needs, services and interventions are largely reactive and (at best) ameliorative; as a result, these services are less likely to be sustainable (affordable)	Because they recognise and build on assets, services and interventions are more preventative and so help build resilience and independence; as a result, if properly designed and resourced, these services are more likely to be sustainable

Three principles for innovation in services and support for disabled people

By ‘social innovation’ we mean the art of doing something radically different for the purpose of promoting social justice. Innovation in services for disabled people should not only improve the lives of disabled people, they should also model and promote social change; disabled people’s lives can only be fundamentally improved through social change.

From this, we suggest three principles for innovation in services and support for disabled people, based on what disabled people want the outcomes of social innovation to be.

1. Firstly, and most obviously, innovation should improve the lives of disabled people and their families, to include providing greater choice and control (‘voice’) to them, so that they can participate more fully in society. This improvement might be difficult to specify in advance, since by definition it will depend on what individuals want from their own lives – what ‘participation’ in society means to them. As illustrated in many of the case studies included later in this report, this is likely to mean that services are designed around identifying and responding to what individuals want, rather than assuming this on their behalf.

2. Secondly, innovation should build on and develop the capabilities of disabled people, including enabling them to participate as equal members of society. Disabled people want to make a contribution to their local communities, but inadvertently services can devalue their potential contribution by thinking of them as 'dependent'. Traditional services are typically based on what is thought to be 'wrong' with people – a 'deficit-based' model which focuses on what people supposedly cannot do for themselves. As a result, traditional services can disempower people by undermining their capabilities and confidence.

Instead, we need to shift the way we think about services because supporting and building disabled people's capabilities means that they can live the lives they choose, which also means they can participate and contribute to society. Starting with people's abilities and building on these in ways that strengthen their social relationships supports disabled people to make a positive contribution to meeting their own needs and those of others. This 'asset-based' approach to services is the foundation for 'co-production' – a way of designing and delivering services in an equal and reciprocal relationship between staff, people who use services, and their families, friends and neighbours.²³ This is illustrated in some of the case studies set out in this report.

3. Thirdly, innovation should encourage disabled people to bring about change for themselves and the communities in which they live. Another way of putting this is that, at best, innovation should model and promote social change, especially by being developed and led by disabled people and disabled people's organisations themselves.

Changing the focus from needs to assets means that local authorities can rethink the purpose of changing services, moving away from cutting and towards putting disabled people's lives and outcomes at the heart of what they do. The table below contrasts (traditional) needs-based and asset-based (co-produced) services.²⁴

Recognising that people have assets helps to free up thinking about innovative approaches – local authorities and other providers can think beyond existing service models to consider very different ways that people's needs can be met, by themselves or by other service users.

This thinking helps to reframe the challenge facing local authorities. Cuts have a very real impact on people's lives. They also fail to get to the root of the problem: traditional services are often outdated and outmoded. In contrast, social innovation offers local authorities greater room for manoeuvre in the current context and new ways of designing, commissioning and delivering services that may help mitigate the impact of central government cuts.

Doing services differently

In this section we present examples of innovations developed by local authorities and providers that demonstrate how services can improve disabled people's lives, build on their abilities, and model and promote social change. These range from personalised and integrated support provided by local authorities, to services designed and delivered by disabled people for disabled people. These demonstrate ways of doing services differently.

These are not the only examples we could have included in this report, but they demonstrate what local authorities and providers can achieve and the types of innovation that matter most for disabled people. On their own, these innovations won't achieve a more equal society, but in different ways all of them illustrate the three principles for innovation suggested earlier.

Firstly, they help to improve the lives of disabled people and their families, including by providing greater choice and control to them – for example, the person-centred planning in the Regional SEN Transition to Employment Initiative in South Wales, the market of local care and support services stimulated by Nottinghamshire County Council and Community Catalysts, and the online marketplaces developed by shop4support and KIDS Direct Short Breaks.

Secondly, they build on and develop the skills and abilities of disabled people, including enabling them to participate as equal members of society – for example, the bespoke employment support provided by the COASTAL project (also in Wales), and KeyRing's Living Support Networks in communities across England and Wales.

Thirdly, they model and promote social change, especially by being developed and led by disabled people and DPOs – for example, the way that Derbyshire and MacIntyre have supported disabled people to participate in its partnership boards, the strategic relationship between Norfolk County Council's social care team and the Norfolk Coalition for Disabled People, the one-stop-shop services provided by Real in Tower Hamlets, and the 'total co-production' that is at the heart of the Northamptonshire Community Housing Network.

We have particularly focused on areas that rank highly in the Index of Multiple Deprivation and/or those which are among the hardest-hit areas in terms of budget cuts, in part to challenge the notion that innovation is only possible in wealthier local authority areas.²⁵ The innovations cover a mix of rural and urban areas, indicating that the type of area is no barrier to innovation.

We have organised the case studies under three headings:

1. Markets for services and support;
2. More integrated and personalised services;
3. Disabled people co-producing services.

Markets for services and support

These innovations show how local authorities have actively developed markets of local care and support services, to provide high-quality, more flexible and personalised services for disabled people and their families. These examples show a range of methods, from actively supporting the development of micro-providers to new technologies that improve access for people who get support. The following examples show that by working to develop local markets, local authorities can give disabled people greater choice and control over their services and support providers who work creatively with disabled people to build on their capabilities and promote and model social change.

Nottinghamshire and Community Catalysts

Since July 2010, Nottinghamshire County Council has been working with Community Catalysts to stimulate and develop the local market for social care, with a particular focus on micro-providers. The market has been stimulated by two things: the appointment of a dedicated micro-provider support function- and the growth of personalisation within the county, including the many people who are being offered personal budgets and direct payments. Micro-providers usually have between two and five staff, and offer highly personalised and flexible support, often based around developing low level preventative support, helping people stay independent, promoting active citizenship, and social inclusion. The programme increases the amount of choice people have over how and where to spend their budget, and is being used by hundreds of people across the county, including people who receive direct payments and those who are self-funders. The programme has been hugely successful; and over the past two years, the local authority has had over 180 enquiries from potential micro-providers. As a result, 45 new micro providers are now up and running. Micro- providers offer over 15 different local services and work with well over 600 people who need or support to live their life. Local people support other local people, creating jobs and volunteering opportunities and enabling public money to benefit the local economy.

The initial idea for the project started back in 2010 by chance after Community Catalysts presented at a Nottinghamshire Country Council event exploring new ideas that might develop personalisation. The link coincided with a strong internal drive within the authority to implement a meaningful self-directed support agenda and ensure that a good quality local market of services was developed.

The programme has been up and running since July 2011 and is co-ordinated by Rebecca, who is employed by Community Catalysts but is based within the local authority Market Development Team. Rebecca's role is to provide capacity building and support for

individuals interested in setting up a micro enterprise, removing many of the barriers that can exist for small start-ups. She offers guidance and advice to interested providers, and sign-posts individuals to relevant expertise outside her remit, such as business advice. Rebecca might for example help a provider to scope out the area of support they're interested in, or identify the different types of regulation they need to comply with in order to provide services. Rebecca has also created a micro provider forum which facilitates informal peer support among providers with quarterly meetings.

The project has a steering group which identifies where there are gaps in the social care market, and channels insight from across the county to Rebecca, who can then recommend or suggest these gaps to potential providers. For example, services for black and minority ethnic groups, provision in rural areas, mental health support and day opportunities have all been identified as needing further development and are current priority areas that Rebecca is working on.

The variety of provision that has begun to develop is startling, and many different people are stepping forward, identifying the gaps in provision, and setting up micro-services to meet this demand. They include people who have worked in social care, parents, carers, and people who have experience of using services. The enterprises have expanded the variety of support on offer, and include a Friday social club, numerous personal support services that help with things like shopping, house jobs or gardening, and direct payments support and sole traders. For a couple of former teachers, it has been the perfect way to develop a new offer of transitional activities for young people with autism. David and Richard saw a gap for people leaving education and set up Space Inclusive, which works with young people to identify what they want to achieve, and helps them realise those goals. In David's words, Space Inclusive aims to: *"allow people to move to the next stage rather than holding on to people."* The support of the micro-coordinator was critical too: *"Rebecca acts as a small and medium enterprise interpreter ... she's a networker and she's able to provide the local authority answers in small enterprise terminology."* Demand for Space Inclusive has been huge, and they now support about 55 people and get six to seven referrals per week. Despite their growth as an organisation, the support they provide stays small-scale, with set staffing ratios to ensure support is still personalised and flexible.

Despite the success of the programme, it hasn't been without its challenges. For Rebecca, the biggest hurdle was a cultural one: *"Helping people understand what micro-services are and how they can be used: people were very concerned about whether they were accredited. This was the case on both sides: some small providers thought they had to have a contract with the local authority."* A big part of Rebecca's role has been supporting staff to understand how micro-enterprises work, and addressing questions about whether services are safe enough, or if the provider's size might impede the quality or sustainability of services.

In fact, one of the first things Community Catalysts did was some myth busting around the assumption that smaller scale provision necessarily equates to a higher cost. Often they're a similar cost or

actually cheaper, and a supporting argument would suggest that they're better value for money because they're able to provide the right support the first time. (A cost comparison of a small number of home based care/support services offered by micro enterprises in Nottinghamshire was undertaken in 2010. The hourly rate charged for micro provision was compared against the average hourly rate of larger providers in the area. 100% of micro services were found to be the same cost or cheaper).

From the local authority's perspective, there are huge benefits to growing the market in micro provision. It helps to achieve one of their core aims, to maximise choice for people who purchase support. But perhaps more importantly, micro services are often more 'human scale.' They are able to be as flexible as possible and are proving to be very good value services. Reflecting on the experience many people have had, Rebecca says that:

“any feedback that I've had from anyone who uses any of the services has always been hugely positive... so and so never left the house before this provider ... now my mother's much happier that she knows it will be the same person coming to support here everyday.”

The early success of the project also means that it will be extended into 2013, when the coordinator function currently provided by Community Catalysts will be transferred into the social care market development team. In order to make sure these services are available to as many people as possible, Nottingham County Council is also planning to extend an existing online social care directory (which currently provides information on contracted providers) to include all other providers, including micro-enterprises. This should mean that many of the skills and information on supporting micro-providers is placed within the local authority, leaving a legacy from the initial investment.

Leeds City Council

Leeds Adult Social Care is working to achieve 'Better lives for people in Leeds' through a wide-ranging transformation programme that seeks to provide more personal and flexible services for disabled people in the community, including developing a new market for service provision.

Traditionally, as in many areas, services in Leeds have isolated disabled people in large residential homes and day centres. Not only are these large centres expensive to run, with high running, maintenance and transport costs, they also risk isolating disabled people on the fringes of community life. Leeds' new approach aims to move away from this traditional statutory support by developing new markets for care and service provision and by offering a greater diversity of local activities from which disabled people can choose. As Councillor Lucinda Yeadon puts it:

“People with learning disabilities have every right to feel part of their local communities, and not be excluded by being sent to day centres every day of the week. It is right that we look at different ways of including them in society, and the traditional services on offer don't always fit the bill.”

Leeds calls this approach 'Better lives through enterprise.' It is about stimulating the social care market in Leeds to create a variety of enterprises providing care and support choices and a greater range of health and well-being activities, above and beyond those provided in the traditional way by statutory organisations. As Mick Ward, head of commissioning, says:

"We have to recognise that we have to use a wide range of approaches because different things are going to work for different communities and different organisations. ...At the heart of it is our potential to support social enterprises."

One of the biggest changes over the last year has been the gradual, and on-going, phasing out of traditional learning disability day centres across Leeds. It was felt by disabled people and the council that these centres are no longer meeting the needs or aspirations of the people using them. They are too far away from where people live and do not offer the range of activities that disabled people want. They are also inefficient; it costs a lot to staff, heat, maintain and transport people to them.

Three years ago, in partnership with disabled people, their families and carers, Leeds City Council began looking at alternative ways of providing learning and well-being activities. They decided that smaller providers, based more centrally in local communities were the best option. They could provide a greater range of interesting services, and at a much lower cost – not being burdened by the costs of owning and maintaining large buildings.

So far two of the eight traditional centres have been closed and replaced by a mix of smaller community-based centres and a range of social and voluntary organisations. After closing the Moor End day centre in south Leeds, the council has moved day support for people in the area to three smaller voluntary organisations, with help from three adult social care staff. The 86 people that used to go to Moor End now receive personal support packages and can access a wider variety of activities which interest them including arts and crafts, keep fit, cookery, social and employment skills.

Importantly, the new centres have been well received by the people attending them. Mick Ward provides a personal example:

"Alan attended Moor End Day Centre for many years, but has now taken full advantage of some of the many new opportunities open to adults with learning disabilities as a result of the modernisation programme. He now attends the new service base at Hillside in Beeston two days each week, where he has become involved in the community radio station. He attends drama, literacy and Tai Chi classes run by Leeds Health for All's 'As One' project in Holbeck. He is also the co-chair of the stakeholder involvement group and works as a receptionist one day each week for Leeds People First at their 'Leep 1' project."

The transition from large statutory provision to smaller voluntary provision has not been easy. There were concerns that it would seem to be a mask for covering cuts to the council's budget, which

have certainly been significant. However, as Sandie Keene, head of Adult Social Care explains, the council are able to manage this change because they planned ahead and began investing in the new market long before the transition process began. Rather than decommissioning the old centres and then re-commissioning new ones, something that would risk delays and gaps in service provision, Leeds invested £500,000 to support the development of new social enterprises and voluntary organisations before any of the traditional centres were closed. This means that they are covering a double running cost at the moment.

In part Leeds has been able to do this in a time of cuts because of the political commitment to ensuring that there are no service disruptions and that human outcomes – making people’s lives better in Leeds – come first. Leeds Council recognises that if new markets are to function well for disabled people they need time, money, support and leadership. Leeds is also thinking of longer term, future savings. Sandie Keene estimates that in two years they should be saving between £600,000 and £1,000,000 in revenue savings and will have also generated capital receipts for the authority. In the long run Sandie hopes that most of these new enterprises will be sustained by people’s personal budgets.

One other innovative way in which Leeds is supporting civic enterprise is the ‘Ideas That Change Lives’ investment fund. This is a micro-grant programme established to provide small kick-starter grants (up to £1k) and larger sustainment grants (up to £9k) to social enterprises and voluntary organisations that have good ideas. The council recognises the need to invest in and support the process of coming up with new ideas. The grants are not tied to specific outputs or specifications, and this has allowed people to be imaginative. New investments that are being supported include collective purchasing by pooling personal budgets, and a Dine at Mine project that will enable people with learning disabilities to learn to cook in their own kitchens, along with a group of friends – supporting people to not only learn a new skill and increase their independence, but also to extend and maintain their social circle.

Online marketplaces for support

These online marketplaces provide disabled people and their families with access to more convenient and flexible care and support. By doing so, they enable disabled people to exercise greater choice and control over the services they use, and help to reduce the demand for traditional care services.

shop4support

shop4support is an online marketplace where people can shop for services or equipment using their personal budget or their own money to meet their social care needs. They can search and shop for support products and services, manage their personal budget, receive and share help and advice, and find local groups and activities. People using shop4support make it clear how being in control of their personal budgets through the service can have a profound impact on their confidence and independence, enabling them to participate in social activities, including finding and remaining in employment.

shop4support was created when In Control, the national charity and pioneer of self-directed support, came up with the idea of using the internet to help people needing support find and buy care products and services more easily. Its 'Citizen Portal' can be tailored to an individual local authority's needs, for example Harrow Council was one of the first local authorities to introduce the service for its citizens. shop4support has been appointed as the provider for a regional social care 'e-Marketplace' for the Yorkshire and Humber region (the funding to develop this regional marketplace project has been provided by the Regional Improvement and Efficiency Partnership in Yorkshire and Humber and commissioned by the regional Joint Improvement Partnership). The e-Marketplace is being rolled out to 15 local authorities, including Doncaster Metropolitan Borough Council, Kirklees, North Lincolnshire, Barnsley and Bradford, followed by Calderdale, Sheffield, Wakefield, Rotherham, North Yorkshire, Hull, East Riding, York and Leeds. These arrangements allow for other councils to use this platform without having to undertake their own procurement processes. The first to do this is Manchester City Council. shop4support can also serve as a e-commerce website for social care providers.

Other consumer-oriented online sources of advice are emerging. The Good Care Guide aims to give people using care and their relatives a place to go to share their views on the service they have received from care homes and nurseries. The Good Care Guide website has been developed by My Family Care and United for All Ages with other national bodies and charities. The site currently covers childcare and eldercare in England. The Social Care Institute for Excellence (SCIE) is also developing a website that will help people to make choices about care and provide feedback on the quality of those services. Find Me Good Care will cover all types of care and support for adults including regulated and unregulated services in England. It will provide links to specialist websites (including local services, specialist and independent financial advisers).

KIDS Direct Short Breaks

The KIDS Direct Short Breaks Service is designed to help families care for a disabled child or young person aged up to 25 by providing a short break, from one hour to a full day. It represents an example of providing greater choice for families with disabled children by focusing on simplicity, ease of use and flexibility – the same qualities any consumers would expect and demand from an online service.

A KIDS Direct Short Break means that disabled children and young people can experience activities that interest them with the support of a skilled Short Break Worker (Personal Assistant). The Short Break Worker will help the disabled child to participate in exciting activities, learn new skills, or just keep them company for a walk in the park. The Direct Short Breaks service is easy to use, convenient and puts families in control. Families can access their account at any time and book a break at a time that suits them. They can look at all the suitably trained and checked social workers in their area and select the one that they are happy with.

The service currently operates in ten local authority areas. Breaks can be arranged and paid for by the local authority where appropriate

with direct payments and individual budgets, or families can arrange and pay for a break themselves. The Direct Short Breaks service came about as a result of the Aiming High for Disabled Children programme, a government programme to transform disabled children's services. The development of the model was helped by funding from Futurebuilders (which covered operating costs and the initial website), followed by an innovation grant from the then Department for Children, Schools and Families to fund the rollout (staffing costs to support liaison with local authority commissioners).

Activities Unlimited – Suffolk County Council and Scope

Activities Unlimited is a brokerage service that supports short breaks for children and their families and carers. In contrast to KIDS Direct Short Breaks (which is the direct provider), Activities Unlimited helps families to find respite care or short breaks in their area. More than this, it has used the purchasing power of families with disabled children to challenge (often mainstream) local providers to change their services and support so that disabled children and their families can access it. All children with additional needs are eligible to access the service, regardless of support need or presence of diagnosis.

Previously, families often found it very difficult to make arrangements for support and didn't feel in control of provision, despite the fact that support for a short break can be critical for families who are struggling to cope. Activities Unlimited provides customers with a membership card that allows them access to activities run by participating providers. Families call the service to book activities or book via the website. The Activities Unlimited team directs families to services that are most appropriate to their needs; they also identify new providers and support providers to improve their services based on feedback from families. The range of activities offered is typically very broad, and Activities Unlimited staff work with local providers to develop new activities for customers.

The Activities Unlimited platform was developed in partnership with Scope in 2009. Scope runs one Activities Unlimited service based in Suffolk, which was developed with Suffolk County Council, in response to the needs of local disabled children, their families and carers. Suffolk and Scope recognised that leisure opportunities in the whole community needed to change to become more inclusive to families with disabled children; in effect this redefined the problem, from being about improving services for families with disabled children, to improving and investing in services that the whole community uses. Some users of the service meet local authority personal budget criteria. Those who qualify receive £500 or £1,000 each year. In some cases, the local authority can provide additional resources for customers with severe needs, and these cases are escalated for formal social work assessment.

Activities Unlimited is a preventative service. It helps to prevent family discord and breakdown, and leads to a marked reduction in demand for emergency respite care for disabled children. Since the service began Suffolk County Council has not had to provide any emergency respite care for disabled children. Since Activities Unlimited has been fully up-and-running, there has been a noticeable drop in the caseload of Suffolk's children and young people's services. Feedback

and evaluation from parents, children and young people is extremely positive. Families can go out more often, parents and carers are better able to cope, and children and young people are able to learn new skills. There is less tension in families, in part because siblings have more time and space to themselves, and parents even report noticing and appreciating the achievements of their children more.

Like KIDS Direct Short Breaks, Activities Unlimited was funded through Aiming High for Disabled Children. In April 2008, Suffolk became one of 21 local authorities that successfully bid to become a pathfinder authority and was given £6.88 million over three years to improve short break services. The model replaced more traditional residential respite care, which resulted in a cost saving for the council and enabled short breaks to be much more community-based.

Key learning points:

- Diverse markets of providers offering personal and flexible support need to be actively developed by local authorities, through commissioning, capacity building, signposting and sharing market intelligence.
- In particular, local authorities should support a local economy of care provision – especially small local providers of services that provide the most personal, flexible and responsive kinds of support.
- Genuine choice and control for disabled people requires access to the right sorts of information that can help them make informed decisions, including through online platforms.

More integrated and personalised services

These innovations move away from assuming what disabled people want, to understanding their aspirations and ambitions, and how these can be met by redesigning services and support around people. They are particularly focussed on how they can give people greater choice and variety over what support they get, and redesigning some block contracted services to reflect the key ideas of personalisation.

Derbyshire County Council and MacIntyre

In 2006 Derbyshire County Council entered into a 10 year partnership with MacIntyre, a national charity that provides learning, support and care for children and adults with learning disabilities. Together, Derbyshire County Council and MacIntyre have embarked on a transformational culture change in the way services are designed and delivered, away from traditional day centres at large distant sites and towards flexible, local and more personal activities, projects and services.

Before this, services in Chesterfield and North East Derbyshire were provided by the council out of two large day centres. By 2004 it was becoming clear that a more local, community-based approach to service provision was needed to support people to live fulfilling and

independent lives in the community. As Alison Wright from MacIntyre explains, Derbyshire had an approach to disabled people which left some disempowered. There was a lot of support given to disabled people, but it didn't build on their capabilities and it isolated them from communities: *"If you have a disability you have a separate life – you go on special buses and you go to special buildings removed from everyone else. We are trying to change that and help people to feel and be part of their community."*

Derbyshire's contract with MacIntyre covers 10 years and is worth £1.6 million a year. Although the total budget is fixed, the money is not tied to a specific service model or set of outputs. Instead the contract is managed flexibly over time, ensuring that it is able to adapt to new contexts and people's changing needs. This helps drive investment of time and money in innovative thinking, rather than in contract compliance. The priority for the council is the outcome for service users.

This approach requires continuing supportive relationships between the council, MacIntyre and the people who use these services. This is achieved through regular meetings, made up of the contract manager from the council, MacIntyre staff and service users. This group monitors services and supports new service development.

In addition Local Partnership Boards look at how services develop across the County. In 2006 the original single partnership board felt that it was covering too large and diverse an area to deliver more community-based services, so one of the first actions was to subdivide this board into six smaller boards. The six partnership boards subsequently became much more local, with better representation from disabled people.

Early on however it became apparent that it was not enough just to invite people with learning difficulties to participate in meetings. Disabled people needed training to be able to participate on an equal footing and to shape the discussions. In response, 'Reps on Board' was developed with MacIntyre. One of the first things that Reps on Board did was to hire Martin Oakey, who has a learning disability and had been a user of the council's day centres. Alongside a core group of service users, Alison and Martin designed and developed the first of many Reps on Board training sessions for people with learning difficulties, covering issues such as individual learning plans, appropriate behaviour in meetings, and listening and communications skills. Reps in each area have a supporter who helps them to organise their diaries and transport. They also hold post-meeting sessions and support them to fulfil their role.

Each local partnership board has up to 4 people with a learning difficulty, up to 4 carers and relevant professionals from various agencies. The reps are involved in shaping the strategic decisions that are made about the types of services being commissioned. Alongside this, the reps are also consulted regularly by the departments within the Council and the NHS; they have become consultants on how other agencies should engage with disabled people, and they organise their own meetings bringing groups of people with learning difficulties together. Current reps are responsible

for interviewing prospective new reps and some staff; they also help to train new reps, particularly on how to run their own meetings.

Through Reps on Board, people with learning difficulties in Derbyshire have influenced the way the Council works. They wrote a guide to making meetings work for everyone, which introduced the idea of using red and green cards at meetings to help people to ask questions or seek clarification. They also encouraged the Council to make their documents easier to read and to purchase a graphic package. As a consequence the Council have started to develop easy read leaflets and reports so communication is improved, not only for people with a learning difficulty but for other groups too.

This way of working has sparked further social innovation, including My Way. Established in 2008, My Way helps people with learning difficulties make the best out of the transition from school to adult life. It has helped many young people to make this transition more easily, and it has also initiated a culture change among staff. As one senior manager puts it:

“Facilitators have been the interface between the young person, family, social services and other agencies, whereas [traditionally] care managers are often the face of social services.”

The reps have also catalysed campaigning amongst the reps and other service users. For example, a group of them campaigned strongly against changes to the Gold card system for free travel. Alison predicts that there will be an increasing focus on campaigning in the future, in response to the Government's cuts and welfare reforms.

Alison is concerned about the impact of austerity on further innovation:

“Grass-roots innovation is not happening any more. It's about where it all starts, but does it start with the people? I don't think so anymore.”

The loss of the Learning Disability Development fund has been a significant problem in Alison's eyes. The fund provided small amounts of money for disabled people to get new projects and events off the ground, anything from one day excursions, to friendship groups and longer term projects, including Reps on Board initially:

“It wasn't a massive pot of money, but it went a long way – and it had a real impact.”

Now, if disabled people want funds to start something new they have to try to access funds that are far more demanding in terms of bidding and proving outcomes. Few people feel able:

“The opportunity to develop new ideas have just come to a halt, it's really scary.”

Regional SEN Transition to Employment Initiative, South Wales

The Regional SEN Transition to Employment Initiative – colloquially ‘Real Opportunities’ – works with young people aged 14-19 who have complex needs that include a learning disability and/or autistic spectrum disorder, to help them through the transition to adulthood and to become as independent as possible in their adult lives. It uses an innovative and comprehensive model of support, working closely with young people and their families and professionals to develop a transition plan centred on the young person. This plan, and the support around it, builds on the young person’s capabilities so that they have greater choice and control over their lives.

As they get older most young people take an increasing degree of responsibility for key decisions in their lives, however for people with learning difficulties and special educational needs (SEN) in many cases decisions are still made for them. They are also much less likely to achieve independence than other young people by, for example, moving away from home, finding employment, continuing in education and developing a social life with friends.

Real Opportunities helps young people, their families and other professionals to achieve the goals identified in the young person’s transition plan by providing training, activities, opportunities and support. Direct support is given to young people based on five ‘pathways’ for the transition to adulthood: lifelong learning, independent living, leisure opportunities, relationships, and employment.

The aim of the project is to raise the aspirations and motivation of young people, and increase their participation in learning, volunteering, employment and social opportunities, so fostering a greater degree of independence and inclusion in the community. It is also about working towards a change in practice amongst those working with young people and their families and carers, through training and support (for example, the project is developing a toolkit for good practice). The project also helps reduce the anxieties that parents can feel about increased independence for their children.

Real Opportunities involves both statutory and voluntary sector agencies, and is based in nine local authorities in Wales (Caerphilly, Bridgend, Carmarthenshire, Rhondda Cynon Taff, Neath Port Talbot, Swansea, Merthyr Tydfil, Pembrokeshire and Torfaen). Within each of these areas is a Real Opportunities Hub Team, made up of around six to ten members of staff who specialise in supporting young people in different areas of their life. Young people have the opportunity to access a variety of training and accredited courses and activities to support the development of personal, social and employment skills, all of which is decided by them through person-centred planning. This ensures the voice of the young person is at the heart of their transition plan.

At the core of the project work is the idea that planning should happen with young people and not for them. Young people decide who works with them and how, directed by their hopes and dreams for the future. Staff available to support young people include youth inclusion workers, psychology support workers, independent living

workers, person-centred planning coordinators, family liaison, transition key worker and peer mentor coordinators. All support offered to the young person is delivered in a way that allows for the staged withdrawal of support until the young person is able to continue independently. Anyone can make a referral to the project on behalf of the young people.

An important aspect of the project is peer mentoring. Each Real Opportunities team has a peer mentor coordinator who trains colleagues and peers within the young person's life to be able to support him or her in a more natural setting. The project takes the view that support offered by a peer, for example another young person or a colleague in the workplace, is often the best way to promote inclusion into the community and integration into the workplace.

Young people participating in the project have had the opportunity to gain accreditation in a wide range of topics such as sex and relationships, keeping safe, personal hygiene and work preparation. Employment support services offered as part of the programme, by project partners Elite Supported Employment Agency, Mencap, Remploy and the National Autistic Society, include: accredited vocational training; one-to-one supported work experience placements; job searching activity; development of employability skills; travel training; and on-going support and advice for families.

The project also offers support and guidance for parents, carers and families. A programme of free training is offered, available to anyone involved with the project. Real Opportunities also trains young people to become peer mentors by giving them the skills, knowledge and understanding to be able to support young people on the project in a more natural way in schools, youth clubs and sports teams.

The approach taken began to emerge in Caerphilly almost 10 years ago through working in partnership with local agencies and organisations from across Europe. Significant interest from special needs schools in South Wales resulted in Caerphilly leading a collaborative bid to develop the project model and roll it out across a further nine local authorities. The initiative is backed with £8.8 million from the European Social Fund through the Welsh Government with funding matched by the participating authorities. By summer 2012, the project had enrolled nearly 1,000 young people, completed more than 250 work placements, and trained 500 peer mentors.

Your Life, Your Choices, Monmouthshire

The Your Life, Your Choices project was established to improve transition planning in Torfaen, Monmouthshire and Blaenau Gwent. It was initiated by a group of parent carers of young service users who wanted to improve the process of planning the transition into adulthood for their own children.

Your Life, Your Choices helps young people aged 14-25 who have a physical disability, learning difficulty or a mental health issue to have more choice and control in planning for their future, and provides the necessary support to make this possible. Transition plans put the young people in the driving seat. They show what is important to

the young person, what the young person wants to do in the future, what support the young person needs, as well as what actions are needed, who will do these and by when. Referrals are accepted from the young person, their family or any professionals involved. The project has improved the transition process by having developed person-centred transition planning tools that staff and families can use, developed multi-agency transition groups in each local authority area, trained staff to take on the role of 'transition coordinators', and developed an information pack for young people and their families.

Fundamental to the project is the belief that professionals need to listen more to what young people want and thereby plan more effective services, provide better information about services and make decisions more quickly, provide seamless handovers from children's to adult services, and share information more successfully so that various agencies can better support the young person's plan.

The project was hosted by Monmouthshire Council and funded by the Welsh Government from 2009-2011. The project is now hosted by Torfaen Council until December 2012, and is also supported by Blaenau Gwent, Caerphilly, Monmouthshire and Newport Councils, the Aneurin Bevan Health Board and Careers Wales. It is also funded by the European Social Fund as part of the Welsh Assembly Government-led 'Reach the Heights' project.

The peer mentoring in this programme echoes the Youth Supported Employment programme (YSEP), a model which provides teenagers with learning disabilities (aged 15-19) with access to paid work placements, alongside non-disabled teenagers who act as peer mentors to provide support in the places where teenagers typically want to work. Disabled young people are matched with non-disabled peers through a 'buddy system.' They are then matched to employment opportunities that suit their choices, skills and abilities. The peers offer support and encouragement in the workplace until the disabled young person is able to work alone. The programme is based on the model developed in Canada by Julie Allan and first implemented in Calgary, and was adapted for the UK by Dr Mark Kilsby in the Welsh Centre for Learning Disabilities at Cardiff University. In 1999 it was piloted in two UK local authorities before it was replicated in Merthyr Tydfil; it has subsequently been introduced in Manchester among other areas.

COASTAL – the City and County of Swansea, Neath Port Talbot, Carmarthenshire, Pembrokeshire, Bridgend and Ceredigion

The COASTAL project – Creating Opportunities And Skills Teams Alliance – helps disabled people to get a job. The aim of the project is to provide employment and training opportunities for individuals experiencing serious illness, disability and/or social disadvantage. It is based on the belief that disabled people are full and equal citizens, with a right to personalised support that promotes their choice and independence within the labour market and their inclusion in the community. As Clive Prior, COASTAL's regional project director, says: *"It's about looking at what individuals can do, not assuming what they can't."*

COASTAL is an ambitious regional collaboration, bringing together six local authorities (Bridgend, Neath Port Talbot, Swansea, Carmarthenshire, Pembrokeshire and Ceredigion). Six COAST teams, one in each local authority area, work in collaboration with a range of voluntary sector providers as part of an alliance to achieve a strategic and consistent approach to services. Individual service users are offered a detailed and comprehensive needs assessment. This is used to produce a bespoke programme of support to overcome barriers to engagement in learning, training and employment. Project staff then provide or organise access to support to meet the participant's needs, including access to appropriate education and skills training, supported employment or work experience, support with job applications, CV writing, interview skills and so on. Support continues for as long as the participant requires it, up to a maximum of 12 months after they gain employment.

Participants say that the programme has increased their confidence, given them opportunities to learn new activities, skills and qualifications (including job specific skills and how to search for work), and practical ways to manage their lives and develop social networks. Depending on their starting-point, some delivery agents have been slower than others to adapt into the focus on employability and employment in place of traditional social care provision, and because of their conditions some participants remain short of either employment or formal education. COASTAL has also been affected by the state of the economy and how it relates to newer programmes such as the Work Programme. Nonetheless, as Clive Prior suggests, the project is about challenging and changing the culture of local authority services for disabled people; its ultimate aim is to create a radical shift in social care services, by which disabled people can move towards mainstream and independent lives by being more employable and ultimately employed.

In addition, COASTAL offers support, advice and guidance to employers in order to raise awareness of illness and disability issues and to assist them in engaging with and employing project participants. The main tool is to develop procedures and plans for employers, so that they can understand the issues and legislation around employing adults with learning difficulties and other health and mental issues. The COASTAL website has several downloadable tools available to help organisations develop better informed equality and diversity schemes and procedures. This shows that COASTAL is committed to changing local communities and society, as well as helping individuals.

COASTAL was developed out of a series of Partnership for Employment (P4E) projects in Swansea, developed by Clive, which demonstrated a high degree of success in improving educational qualifications. Funding was awarded in 2008, and the first services started in 2009. Approximately half of the funding for the projects comes from the European Social Fund, and this ends in summer June 2014; most of the rest is match funding from local authorities. COASTAL plans to continue after the end of ESF funding, possibly by being funded on an outcomes based approach.

Key learning points:

- Services and support should be shaped around the aspirations and ambitions of disabled people – too often services assume what people need and what their limits are.
- Collaboration between local authorities and other providers can drive innovation when they are based on genuine partnership, a shared vision and common values.
- Doing services differently often challenges existing structures and cultures; these often need to change alongside services in order for innovation to take root.

Disabled people co-producing services

Co-producing support brings disabled people's expertise right to the front of services. Co-production – a way of designing and delivering services in an equal and reciprocal relationship between staff, people who use services, and their families, friends and neighbours – can enable disabled people to take a positive, active and equal role in delivering services alongside staff. Co-producing services improves the skills, capabilities and confidence of disabled people. By getting services right from the outset, and mobilising community resources, co-produced services can also be very cost-effective.

Local area coordination, Derby

Derby City Council has begun a 12 month project which is exploring the potential to reform the 'front end' of social care in the city. They wanted to think about the ways in which people could be supported through a range of local networks, including individuals, their families, the wider community, and private and voluntary organisations before or instead of contacting the council. To try to develop a new approach that builds on this vision, Derby is implementing local area coordination (LAC) in two areas within the city.

LAC has its origins abroad, in Australia, and is a fundamentally different approach to how traditional services are organised. A local area coordinator supports people in their community, focussing on what interests and assets they have, not just on what their 'needs' are. The coordinator works with individuals and families, and has a limited caseload of between 50 and 65 people or families they support. The coordinator doesn't necessarily refer people to services, but rather into the community, looking at how someone might build up their skills, capabilities and interests away from services. In this way, LAC supports disabled people to live good lives in their communities, and helps people to draw support from their communities by working to increase both the capacity of individuals and of communities.

The Derby project is testing out how LAC could redesign the front end of social care so that it is more effective, flexible, and focussed on shifting resources to support people in their communities, and preventing more acute needs arising. The Adults, Health and Housing directorate's senior management team was interested in LAC as a way to invest resources in building up individuals' 'social capital.' Brian

Frisby, Director of Younger Adults and Housing initiated the project, and reflects on how the financial context was crucial in stimulating the project:

“Derby had been prudent in managing its Transforming Adult Social Care grant, so it [LAC] was funded from the transformation grant... I’m not sure we would have been able to fund it from the current budget.”

The senior management team agreed to fund the project, and though it is in its infancy, two coordinators are now in post, based in local libraries. The location of these sites is strategic: they are not ‘services’, there is heavy footfall and they are seen as neutral community spaces. Rajeev, one of the coordinators, has been in post for three months. He supports people with a range of needs, including one man with learning difficulties who wants to move away from supported housing and into his own accommodation. Rajeev has been building up the relationship, and supporting the man to identify how this ambition might be achieved. He describes his work as:

“Using simple scenarios to help build up his skills to live independently, and supporting him to learn those from the people who are currently doing it for him at the moment – such as support workers who come in and wake him up, and make his meals.”

Part of Rajeev’s work has been dedicated to building a strong relationship with the individual, and spending time getting to know him. Through this, opportunities to support the man to build up these core skills arise, and Rajeev is also helping him develop his social network, and look for employment opportunities.

Alongside the piloting of LAC, commissioners in Derby have begun to take a new approach to their own work, bringing in the expertise and insight from people who use services, and those in the wider community, to help guide and steer LAC. Four members of the community, including a parent, carer and someone who uses social care, are on the project steering group. These community members were also closely involved in the designed the interview process and questions for the LAC co-ordinator recruitment, which included asking candidates direct values based questions, and putting people in real life scenarios. Neil, the lead for the recruitment process, reflected on the value of this involvement, suggesting that:

“Families are able to bring the issues that had plagued them through their time of working with professionals to the process. They brought their own experience of what worked and what didn’t work, and that made it a much richer process.”

At all levels of the project it has been vital to have a strong and supportive leader who can give ‘permission’ to front line staff to work in a different way. Having political support and taking a more open action learning approach to the project have also been key to its development. Even with strong leadership, and an open mind, there are still challenges. LAC involves staff adapting to a very

different way of working – alongside people within the community, and this has been new for many people, both within and outside the council. Staff at the front line and senior leadership describe the importance of involving people in the project, dedicating time to building networks and relationships, and explaining the concept to others. Having gained that momentum, Derby's focus now is to allow the coordinators to expand their caseload. They are awaiting the results of the evaluation which is being conducted, and will 'start small, think big' in terms of how they then take it forward. Despite this commitment, Brian is very aware of how the broader context might affect his ability to invest in innovations like LAC in the future:

“As we look forward to the medium term we're facing a particularly difficult situation where councils are required to focus on statutory responsibilities with little room for manoeuvre... In that context it becomes more difficult for senior managers to take a risk ... we rely more upon the known.”

130 miles north of Derby, Middlesbrough Council has also implementing local area co-ordination. The project started in March 2010, and there are now three members of staff who have supported over 120 people with everything from housing advice to supporting young mothers, or people who are in recovery but no longer need acute support. The council has made a commitment to continue with local area coordination following the findings of a recent evaluation they had commissioned, which demonstrated strong emerging outcomes for people, and recommended it be extended across the town. The programme hasn't been entirely immune from the cuts, as the key manager has been made redundant, but despite the resource constraints they remain committed to expanding the model and their aim is for LAC to become the front end of support within the community.

As in Derby, the biggest challenge they have faced in the last two and a half years has been cultural resistance from other statutory agencies and staff. There was, Carol reflects:

“A fear of what LAC might mean to other professionals who were, due to the austerity, under threat. People felt threatened.”

But she feels they've been able to overcome this challenge now that they've worked alongside other statutory agencies which can see how LAC can complement their work; a local housing association have provided free space for the coordinators to work in across the town, and representatives from public health and a GP Commissioner sit on the operations board.

Getting like-for-like cost comparisons has proved difficult due to the complexity of data help in health and children's services, but Carol argues that the local consensus is that it is saving money. LAC has the potential to reform the entire service, as was shown in its Australian case, where it can pay for itself in the savings that it creates.

Northamptonshire Community Housing Network

Northamptonshire Community Housing Network is a community-led organisation established to help disabled people choose where they

live and receive help to find a home. The Network also helps disabled people to learn life and work skills in order to live independently, and find work and gain confidence, including by helping to run the organisation itself. The Network is very much based on the principles of co-production, or as Marion Turner, the Network's co-ordinator, likes to call it "*total co-production.*"

Based in Wellingborough, the Network is a community organisation that brings together disabled and non-disabled people and professionals as equals to help disabled people find housing, support and work. It is a mix of people and organisations who want to support disabled people to have greater choice in the way they live and feel part of the community. It aims to help disabled people to have greater choice over their housing, find a home and live a fulfilling life in the community, and find work including by helping the Network to provide its services.

The Network has 'members' rather than staff or customers. Its members are its workforce and all members give some time to help run the Network. It was established in 2011 and became a not-for-profit cooperative company limited by guarantee in April 2012. The Network was set up after many of its members were involved in co-producing the Northamptonshire Learning Disability Housing Plan in 2010/2011. The Housing Plan showed that learning disabled people, their families and supporters, need lots of help to explore their housing options but little help was available. The Network is a creative response to help disabled people to have greater choice and control in planning for and meeting their housing needs.

It's not just about helping people to find a home, it's also about living a fulfilling life. The Network helps people to learn the skills they need to be able to live happily and well in their new home, for example through its Life and Work Skills programme. This helps people learn the skills they need to live independently, such as caring for themselves, looking after their home and managing their lives. People can also learn core work skills, from writing letters to learning how to behave in a meeting, helping other people pack up and move home, and even joining the Network's Board or becoming a Director. An important aspect of all the training the Network offers is its collective nature, members work together to help each other find and create the right answer for them:

"We also support each other to learn and apply the new skills we have learnt, in our homes and in running the Network. People develop confidence and can join a small group in order to learn together."

The Network is not just a set of services, but is based on a set of values, of co-operation, compassion, inclusion and mutual respect. Becoming a member of the Network means adhering to the belief that we all have needs to meet and skills to share, disabled or not. People don't have to have a housing need or be disabled to become a member of the Network, anyone can join. Members help disabled people to find a home; in return they also gain support, confidence, a sense of achievement, friends and new work skills. Members also receive time credits that they can exchange with each other. Every

member is asked to give at least an hour a month to help run the services, and time credits can be spent on Network services as well as services provided by other members (for example, gardening, driving, DIY and so on).

Day-to-day, the Network is managed by a Board made up of seven people, the majority of whom identify as disabled. Underpinning the work of the Network is a strong commitment to co-production, meaning genuine power-sharing and shared control and responsibility. The organisation itself is run on these lines, hence 'total co-production.' This has a powerful impact on individuals, but it is also a broader political statement. As Karon, a Network volunteer and board member, says:

“Before volunteering with the Network, I had very little confidence and felt, due to my disability, I could not offer much. However, with the Network I can help in a flexible way, which really helps with my condition, I feel supported to have a go, I feel that I can contribute to society, and I’ve made a lot of friends.”

This is why the Network represents social change in action.

Norfolk County Council and the Norfolk Coalition for Disabled People

Norfolk County Council has been working on a number of different innovations that develop co-production and greater personalisation within their social care and community services teams. A range of different initiatives have taken place, including a strategic relationship between the social care team and the Norfolk Coalition for Disabled People (NCODP), work on introducing co-production into the commissioning process, and acting as a pilot site for the Up2us project, testing out approaches that support people to pool their personal budgets, and collectively access support, services, or activities. Some of these innovations have started in the past year or so, while others go back a decade.

The longest standing is the partnership that the local authority has with the NCODP, which started over 10 years ago when Laurie Acourt, a commissioning manager, began working with NCODP. The partnership involves contracted services, as well as more informal links across the two organisations, and has involved having staff mutually seconded across the organisations. There have been particularly close links between the Council and NCODP around the personalisation agenda. The main contract that the NCODP delivers is for direct payment services and self-directed support, and is worth about £1.3 million per year. This is one of the largest examples in England where a DPO provides self-directed support services on this scale. They provide support to almost 2,500 people in Norfolk, hold almost 2,000 supported accounts for people with direct payments, and its payroll service supports over 1,500 personal assistants.

The NCODP approach to self-directed support is rooted in the belief that people who use direct payments or personal budgets are best placed to provide each other with peer support and discuss together how services can be improved. As part of the SDS service, the NCODP has established six Independent Living Groups (ILGs) across the county, and a Skype ILG operates for disabled people who cannot

attend group meetings. These groups support over 190 members, and provide peer support and expert insights into personalisation and self-directed support. As well as giving users and carers the chance to share experiences, the groups allow people to make their voices heard on the radical changes taking place in social care. One person summarised the value they got from being supported by the NCODP as:

“...the confidence that you people give me is mind blowing. It is important everyone has their say. It is about you being comfortable to talk, friendship and information.”

In Norfolk, representatives from each of the ILGs are members of the Personal Budgets Advisory Group, which presents the groups' ideas and views directly to commissioners, providing a critical insight function to the council, helping to improve services, and identify gaps. NCODP has also created a Norfolk Youth Disabled People's Forum, which is a group for young people with disabilities in Norfolk based on the social model of disability, aiming to provide a forum for young people, and to support a new generation of leaders for the NCODP. This group meets once a fortnight, and is completely led by members, although there are staff for support if required. Over the past two years they have been involved in a range of activities, including activism, media and film production, public speaking and the creation of a website. All of these activities build a strong network of support and advocacy among people living in Norfolk, and are intended to achieve radical social change for disabled people.

A separate project has been underway, led by Laurie, who has been seconded into the NCODP over the past two years, and has been getting co-production embedded within the joint health and social care commissioning team's skills and processes. Recognising the need to a strong and shared vision for services to guide adult social care, Laurie has brought together people from across the county to co-develop a vision for social care and support people to be directly involved in the commissioning process. At the moment, they are co-designing a service to support people to live at home, incorporating the principles and ideas from the vision statement. Laurie has also been working with a wide range of staff and residents, developing guidance for commissioners on how to co-produce their own work. This guidance was based on the personal experience of people in the council and community including some disabled people, a younger person, older people, the NCODP, commissioners and a representative from the new joint commissioning team.

The process of coming together and writing the guidance took about six months, and involved identifying what barriers might get in the way of co-production, and getting people from key departments, such as procurement, on board to reduce resistance. For Laurie, *“the biggest thing about the guidance was that it was saying you need a reason to opt out of co-production.”* If successful in establishing this benchmark, it could help to make co-production the default approach for commissioners in Norfolk. Laurie's long term aim is to get co-production owned by all the commissioners, and ensure that the right relationships and processes are embedded within the culture of the council.

If managed well, existing services that are commissioned can be used to build the vital support and role that local DPOs provide. One example of this comes from recent work the NCODP has been doing in Suffolk. After the sudden closure of a contracted direct payments service, the NCODP was contracted to provide direct payment support in Suffolk. At the time, Suffolk had no local DPO, but part of the NCODP proposal involved re-investing the surplus from the contract to develop a Suffolk based DPO. This was launched 18 months ago, and now has its own staff and offices. Back in Norfolk, having a well-resourced local user led organisation also appears to be drawing innovation into the area, and NCODP is confident that other statutory agencies are begin to engage with ideas of co-production as a result of the sustained focus on it through the partnership. They are already working with Clinical Commissioning Groups, and are hopeful that strong joint commissioning of health and social care will also pave the way to improving people's lives across the county.

Having a strong network of local relationships, cross-organisation capacity building, and a sustained focus on co-production and self-directed support has been critical to the partnership's success. Despite the strengths of the relationship, the challenge of operating within the current austerity is clear. As Laurie reflects:

“The pressure imposed by the austerity programme and the cuts makes it very difficult because they're [the local authority] having to take huge amounts of money out while they're reconfiguring for personalisation.”

KeyRing Living Support Networks

KeyRing supports disabled people to live independent lives in their communities by developing networks of interdependence with other KeyRing members and people in the community. Each network is made up of nine KeyRing members and one community living volunteer all living within a ten to fifteen minute walk of each other. There are currently 110 networks across England and Wales, supporting over 850 people in a range of settings from inner cities to small market towns and rural villages.

The community living volunteers are like good neighbours; they help people out with day-to-day tasks and are there when challenges arise. They help to make sure bills are paid on time, they organize for things like the boiler to be fixed and some have had to deal with noisy and abusive neighbours. The volunteers also work with KeyRing members to identify their skills, talents and aspirations to see how they can be used to help and socialize with other KeyRing members and the wider community too.

One of the first things that members of a new network start to work on with the volunteer is a personal and community map which shows their network of friends and acquaintances and draws out formal resources and amenities, and informal networks and assets, within the community.

“Because the volunteer lives in the community, they know what's going on and are able to help members make the most of where they live. Community connections are very important to KeyRing. KeyRing members campaigned for streetlights, have saved lives and run neighbourhood improvement campaigns.”²⁶

The KeyRing model first and foremost improves outcomes for its members. It takes them out of institutional settings and gives them a much broader set of choices about how they can live their lives. It broadens their social networks and challenges them to make the most of their talents and skills to get things done for themselves and pursue their aspirations. In most cases, as informal support is strengthened and people's confidence and autonomy increases, the hours of formal support needed by members reduces over time.

Improving people's lives in this way helps to save local authorities and other public agencies money. Residential placements and high levels of formal support are expensive, as the case of Walsall (below) shows. KeyRing's low-level community support mixes professional support with informal mutual help and a greater emphasis on what people can do for themselves. This reduces costs and can also help prevent people from escalating to more intensive, intrusive and expensive services by picking up on small issues quickly and working with people to resolve them.

KeyRing networks have played a significant part in Walsall's agenda of rehabilitation and supported community living. As Claire Hammonds, senior commissioning officer, explains:

"We got into a position in Walsall where we were exporting people into care homes, often outside of the borough, instead of keeping them in the community. When the new director came in, about two or three years ago, which also coincided with the austerity measures, we looked at how we were spending money; the drive was to do things better, to give people more choice and bring them back into the community."

Over the last three years Walsall has worked with KeyRing to develop ten networks, supporting ninety people. This has helped to reduce the numbers of people who are being cared for in homes outside of the borough, which are both expensive and isolating. KeyRing has helped a number of people who have only ever lived in institutions, such as care homes or hospitals, live independently in a home of their own for the first time. Perhaps the greatest success is that eight people with very complex needs have been supported to transition from forensic care (where their choices were severely limited and the annual cost of their placements exceeded £130,000), back into the community.

KeyRing's ethos of helping people to become as independent as possible and to develop mutually supportive relationships is also reducing the amount of professional care people need in Walsall. For example, one man used to be supported for 20 hours a week travelling to and from college because he did not have the confidence to do it alone. KeyRing worked with him to develop that confidence and now he travels by himself.

Real, Tower Hamlets

Real is a disabled people's user-led organisation (DPULO) and Centre for Independent Living (CIL) in Tower Hamlets, London, that supports disabled people, their families and friends to live independently and participate as equal citizens in society.

With funding from the local authority and other sources, Real currently supports up to 1,000 people from across the borough by raising awareness of their rights, advocating for and with them when these rights are being infringed upon, providing advice on independent living – especially around direct payments and personal budgets – and being politically active at a local and national level. Real works with and supports anyone with an impairment or long-term health condition. Unlike a lot of other organisations, Real doesn't have specific 'client groups.' They stress the importance of being inclusive of, and open to, a broad range of constituents. As Mike Smith, Real's chief executive, says:

“As well as those who engage with us as clients, campaigners, volunteers, supporters and allies, we want to drive change for every disabled person in the borough regardless of whether they're directly involved with us or not. So, some of our constituents are known to us and some aren't (yet).”

Real also works with the families and friends of disabled people, provided there is no conflict of interest. It does this because it recognises that the same financial, attitudinal and physical barriers that prevent disabled people from enjoying equal opportunities also often affect their families and friends. One of the ways that Real reaches out to such a wide group of people is by holding monthly meetings where people can connect with others locally over a cup of tea. As Mike explains:

“Anyone interested in or affected by disability can come to these groups – you don't have to be disabled. Friends, family, carers, social care professionals and allies are all welcome.”

At these meetings people typically talk with others who are dealing with the same issues, discuss problems with local services and identify solutions, find people who might like to go out and about together, learn more about new services or support, and start or continue a campaign that makes life better for disabled people.

Perhaps the most important aspect of Real, and the key to its success, is that it is founded on the social model of disability. Indeed as Mike Smith suggests, it permeates everything Real does:

“We believe in the social model of disability. Everything we do is based on the belief that there's nothing inherently wrong with disabled people and it's the barriers created by society that create inequality... We focus on positivity and not on pity... this means we're edgy rather than safe – and not afraid to push the boundaries around disability and equality.”

One way that Real does this is by ensuring that everything it does is co-produced, at an organisational, operational and project level. Real places great emphasis on the fact that the organisation is run by disabled people from the local area:

“...people here don't just use our service, they lead and direct it. All of our board members and 75 per cent of our front-line staff are disabled people.”

Real's disabled and non-disabled volunteers also perform a range of important activities, from working on reception to helping other people use computers or fill out benefit and housing forms. Peer support is one of the main ways that things are done at Real. Services at Real are planned, delivered and improved with disabled people in ways that work best for local disabled people. At the same time, Real aims to help everyone they can – be they disabled or non-disabled.

Because Real works for and with disabled people, they have enjoyed a lot of success. Their services are widely recognised and respected, both by those that use them and the local authority. As Mike adds:

“Unlike many third sector organisations, we have actually grown over the last two years. I think part of our success has been presenting ourselves to funders, such as the local authority, as a solution to their problems. For example, the local authority wanted us to help them with implementing the personalisation of social services, and supporting people to independently conduct their own support planning. We get results because many of our staff are disabled and so our clients knew we could relate to them and their lives. And because we are driven by the social model, our approach always empowers the individual. The local authority recognises this means we can deliver outcomes others can't and we represent good value for money.”

A recent example is Real winning a contract from the local authority, who wanted to outsource their consultation with disabled people. Based on its inclusive approach, and driven by the social model, Real was able to demonstrate it can achieve engagement and results that other organisations can't, as well as developing social capital in the people that it supports.

Face2Face – Scope

Face2Face is an expanding network of local schemes which provide support to parents of disabled children. It helps parents make positive changes in their own and their families' lives, increases their ability to make a positive contribution in their communities, and reduces the barriers to inclusion experienced by disabled children, young people and their families.

Parents of babies and children with additional needs often feel overwhelmed and unable to cope. They can experience feelings of guilt, fear, anger and depression that can lead to withdrawal. Exhaustion and financial pressures can ultimately result in the break-up of families. Formal support can be patchy and sometimes inconsiderate, and it tends to focus on the child to the exclusion of the parent. Parents often want to talk to someone who understands and who isn't a friend or family member, but they can be afraid to discuss their feelings with professionals in case they are judged as not coping.

Face2Face works closely with funders, local authorities and other partners to develop bespoke services that meet the needs of local parents. Each local scheme forms part of the national network which co-ordinates the service and supports new schemes to develop. Local schemes recruit and train volunteer parents, who themselves have disabled children, to act as 'befrienders' who are able to share and empathise with new parents

because of their own experiences. In the main service, parents are offered structured one hour sessions with a befriender; most parents attend an average of 8–12 sessions. These focus on providing emotional support to parents. Befrienders also signpost parents to specific information and advice. The personal nature of the service helps parents to open-up in the way they might not in a support group.

As a result, parents better understand their child's needs, they are better able to manage their family's new situation, and are more confident in communicating with professionals (including educating professionals about emotional issues). The service also helps to create new social networks for families of disabled children. In addition to formal referrals, Face2Face staff and volunteers support parents of disabled children wherever they come into contact with them. The intensive training to become a befriender and the experience of working with other parents inevitably has a big impact on the volunteers. As Alison Watson, a befriender, says of her experience:

“The course has changed me as a person. I feel more confident now. I think it's helped me grow and find my voice.”

Face2Face schemes operate across the UK. Any parent of a disabled child can use their local scheme, and it is not necessary for any diagnosis to have been made. About half of the schemes are managed by Scope, while the other half are managed by local charities using good practice guidelines developed by Scope. Each service is bespoke to the local area; services work with local parents to identify what they need in their area and then strive to provide this.

For example, in Stoke-on-Trent for many years parents preferred group support rather than one-to-one befriending. (In most areas Face2Face now has support groups, which provide continued support after a parent no longer needs intensive support). In response to needs identified by parents, Stoke has also developed a range of groups, social evenings and an 'Aiming Higher Together' parent forum. This forum is now a social enterprise Community Interest Company (which enables it to apply for small grants), and is developing its own training for professionals to educate and inform them about the needs of families with disabled children. The initial development of Stoke's Face2Face forums was supported by a government grant for participation ('Together for Disabled Children'). The city council now also provides some top-up funding.

Key learning points:

- Recognising, valuing and harnessing people's assets can be a starting-point for the radical redesign of services and support.
- These innovations depend on going far beyond consultation to a much deeper relationship based on genuine power sharing, even though this challenges conventional professional roles and views of 'risk'.
- Co-production can take place at many levels – between two people, at the level of a service, or to transform how organisations are run and what services are commissioned.

Doing innovation differently

In this final section, based on the examples included in this report, we present some initial thoughts and suggestions for local authorities wanting to innovate in this difficult context.

Social change rather than cuts should serve as a starting-point for innovation

Now more than ever, cost-saving is critical to local authorities, but cutting services can't act as a starting-point for improving them, let alone for innovation. Many of the innovations described in this report are highly cost-effective and provide greater value for money, but they have been inspired first and foremost by a commitment to improve the lives of disabled people and promote social change. They have often saved money as a result of providing what disabled people and their families actually want, by working closely with them and DPOs, and by drawing on support based in their communities.

The most important lesson we draw from these case studies is that better outcomes can only be achieved by placing disabled people and their families at the centre of this transformation from the start. The best way for local authorities to innovate is for them to work in partnership with disabled people and DPOs for a fairer, more equal and inclusive society. This will improve the lives of disabled people, as well as their well-being and inclusion in local communities.

Based on the case studies in this report, we suggest five principles for innovating to improve services for disabled people.

1. Partner with disabled people

Local authorities shouldn't innovate alone. They should collaborate with disabled people, DPOs and other local authorities. As illustrated in many of the case studies, this can often be challenging to existing ways of working and organisational culture – but this, after all, is the essence of innovation.

Disabled people know best what their needs and aspirations are. They also have a commitment to social change and improving services. For these reasons disabled people represent a valuable source of innovation. Partnering means working with disabled people through the process of designing, planning, implementing, delivering and evaluating new services and support. In line with co-production, local authorities need to share power and responsibility with disabled people and DPOs.²⁷

Local authorities should reflect on whether their own structures are suitable for partnership and innovation - for example, Derbyshire was willing to sub-divide its partnership boards to ensure greater participation from users and more localised services.

Local authorities could consider ways in which they can collaborate with each other and with other organisations. Collaboration is a vital part of many of the case studies included here. Examples include Derbyshire working with MacIntyre, Nottinghamshire working with Community Catalysts, Suffolk's partnership with Scope, regional collaborations such as Real Opportunities and COASTAL, and cases where local authorities worked with a range of providers who could offer different areas of expertise, such as Real Opportunities, shop4support and others. It's also worth noting that many of these case studies represent long-term initiatives, most notably Derbyshire and MacIntyre, and COASTAL, in recognition that innovation takes time, especially where it involves changing existing ways of working and organisational culture.

2. Design services with disabled people

The means of innovation must reflect the desired ends. If services are to be centred on users' needs, they should be developed with users. Similarly, services should build on and develop people's abilities, so that they can engage not only in how they are provided but also in how they are developed. This way of working is not about better consultation. It is about engaging in an open discussion to ensure that services reflect the lived experience, needs and aspirations of disabled people. This is far more likely to develop the innovative services that disabled people actually want and need.

In order to do this the innovation process needs to be accessible to disabled people. Local authorities and providers need to provide appropriate support for disabled people so that they can express their views. As illustrated in some of the case studies, for instance Derbyshire County Council and MacIntyre, disabled people may need support to be effective partners, such as training and support to be able to participate effectively in meetings.

Local authorities can co-produce their commissioning strategies with DPOs to ensure that services are aligned with the needs of the local disabled population. Councils can engage in 'collaborative commissioning', involving disabled people in the full commissioning cycle, starting with developing a needs assessment that is based on lived experience of disabled people.

3. Deliver services with disabled people

Many of the innovations in this report involve disabled people in co-delivering services and support. Developing these types of services involves asking about the skills, abilities, resources and assets that disabled people and their families already have, and the informal sources of support that disabled people already rely on. Local authorities could consider how these could be integrated into services, or how services can complement or bolster these sources of support.

Co-delivery can be prompted through commissioning, for example by:

- outcomes-based commissioning as in the case of Derbyshire and MacIntyre;
- requiring that providers involve disabled people in the design and delivery of services;

- encouraging providers to broker and form partnerships with DPOs;
- specifying approaches to service delivery that are otherwise often constrained by commissioning – such as timebanking, peer-to-peer support, peer mentoring, peer navigators/ambassadors to provide information, and micro enterprises that involve disabled people in delivering services.

4. Work with local providers, including DPOs, to develop local markets for innovation

Local authorities could consider how to grow their local service market, and in particular how to enable smaller organisations, particularly DPOs, to compete to deliver services and support. Nottinghamshire offers a good example of achieving this with micro providers in partnership with Community Catalysts. In this way, innovation could be an opportunity for disabled people to attain the services they need from DPOs, and for these organisations to be able to develop sustainable income from providing these services.

Longer-term contracts, with greater flexibility for providers, can help DPOs and support more innovation in practice. The same is true of information sharing with providers and encouraging platforms that collate local market intelligence (such as Good to Care and others).

Local authorities can encourage partnerships between DPOs and other charities and providers, for example by suggesting in commissioning that these organisations should be involved in the design or delivery of services, especially in areas such as self-directed support, advice and local information services, and micro provision. Local authorities could also offer training to DPOs on procurement processes.

5. Champion and invest in innovation

In response to a previous report produced for Scope, the Government suggested that local authorities can innovate even though their budgets are being cut. The reality on the frontline is typically the opposite. Innovation can be difficult, takes time and requires investment – including from government itself. Many of the case studies point to the important role that funding from central government and from the EU has played in the past – for example Real Opportunities, COASTAL, KIDS Direct Short Breaks, and Activities Unlimited. The lack of funding for the future raises concerns about whether other innovations will find similar support.

In the absence of such support, Derbyshire and MacIntyre, Leeds and other case studies demonstrate the importance of relatively small local funds to support early innovation (even if in both cases their overall investment in transformation has been considerable). Haringey is running an innovation fund for families, and Barnet has run a similar fund. Another model is that used by Brighton and Hove, which supported CityCamp with a small investment. This brought together the public sector, local community and local businesses over three days to develop innovative ideas (the winner in 2012 was Gig Buddies, which pairs gig-goers with learning disabled fans).

Given the current difficult context, it is critical that local authorities learn from each others' efforts to improve services and support for

disabled people and their families. Innovating is harder in times of austerity, so local authorities need to be committed and confident about wanting to make a lasting change. Without innovation, disabled people are increasingly likely to be adrift in their local communities and closer to the brink of crisis and poverty, while local authorities increasingly rely on the false economy of cuts and 'efficiencies.' Instead, we hope this report offers a new way of understanding the purpose and direction for change in such a period of austerity.

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- 24 See also the useful ‘markers’ for personalised services developed by Think Local, Act Personal – Think Local, Act Personal (2012). *Making It Real, Marking Progress Towards Personalised, Community based Support*. London: TLAP.
- 25 As part of this research, we have identified the hardest-hit local authorities and areas. We have used the Index of Multiple Deprivation as set out by the Department for Communities and Local Government (DCLG), but also employed an additional dimension to this analysis by combining this with the degree of cuts to local authorities’ budgets (as a proxy for the pressures on disability services), and where data is available, data on cuts to dis-ability services specifically. From this, we created a ‘long list’ of localities where there is the greatest pressure on disability services.
- 26 Penny, J. Slay, J. and Stephens, L (2012) *Co-production catalogue*, London: NESTA and **nef**. p.32. Retrieved from http://www.nesta.org.uk/library/documents/PPH_v13.pdf
- 27 See for example the useful ‘Checklist for Allies’ in DDA (2008). *Equalise It! A Manifesto for Disability Equality in Development Cooperation*. London: DDA.



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