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Archwilydd Cyffredinol Cymru
Auditor General for Wales

Strategic Commissioning of Accommodation Services for Adults with Learning Disabilities



WALES AUDIT OFFICE
SWYDDFA ARCHWILIO CYMRU



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Mae'r ddogfen hon hefyd ar gael yn Gymraeg.

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Summary Report

Local authorities are generally meeting the accommodation needs of adults with learning disabilities, but existing commissioning arrangements are unlikely to be fit for purpose in the future

- 1 Social care services can be crucial in helping people with a learning disability to live their life in the way they choose, and the level of support offered will depend on an assessment of an individual and their condition. Some people require very little help or support, and have little or no need to access services, whereas others require full-time care and support in every aspect of their lives. Support can be many things, including helping somebody to get up and get dressed, to develop friendships and relationships, or to do meaningful activities and be part of the local community.

What we mean by people with learning disabilities¹:

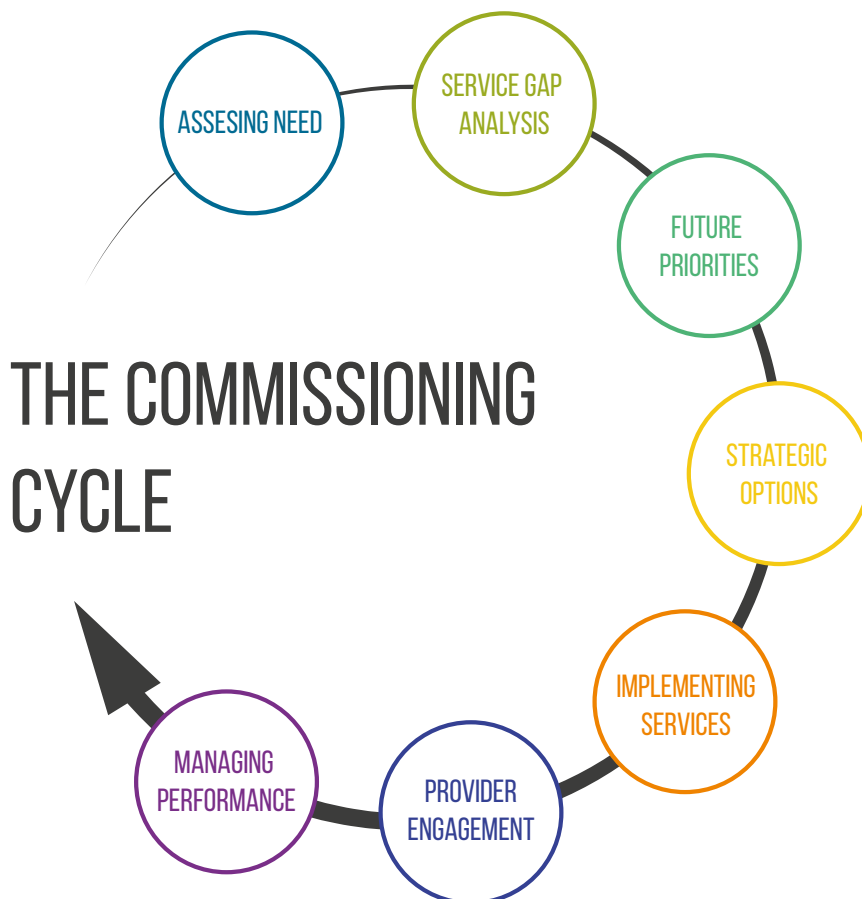
A learning disability is a reduced intellectual ability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life. People with a learning disability tend to take longer to learn and may need support to develop new skills, understand complicated information and interact with other people. The level of support someone needs depends on the individual. For example, someone with a mild learning disability may only need support with things like getting a job. However, someone with a severe or profound learning disability may need full-time care and support with every aspect of their life – they may also have physical disabilities.

- 2 Most people with learning disabilities can lead independent lives with the right support, but as resources reduce, effective planning and provision of care and support services is becoming increasingly important and challenging. The pressure to find greater efficiencies whilst improving wellbeing is driving local authorities to look for different ways to deliver better outcomes for people. Person-centred planning, regular reviews by skilled care managers, and external input by partners, staff, advocates and families can all be used to create services that provide better outcomes in a more cost-effective way.

1 www.mencap.org.uk/about-us

- 3 Most people with learning disabilities can lead independent lives with the right support and, therefore, as resources reduce, effective planning and provision of care and support services is becoming an increasingly important aspect of public policy in Wales. Commissioning is the process by which social care services are planned, purchased and monitored. Effective commissioning of learning disabilities involves putting the individual at the centre of the process of identifying needs, and helping them make choices about how they are supported to live their lives.
- 4 Whilst commissioning models vary, most definitions of commissioning identify some core inter-connected stages, as set out in **Exhibit 1** below. These include assessing people’s needs; setting priorities and developing commissioning strategies to meet those needs; buying goods and securing services from providers to address need; consulting and involving a range of stakeholders, including people with learning disabilities and communities at key stages in the process; monitoring and evaluating outcomes; and revising plans, needs assessments and services in light of evaluation.

Exhibit 1 – Key stages of the commissioning cycle



Source: Wales Audit Office.

- 5 The overall spend on learning disabilities in Wales has risen in real terms (considering inflation) by 6.8% since 2008-09. In 2015-16, the 22 local authorities' gross expenditure for people with learning disabilities (adults under 65) was £398.5 million. Recognising the importance of investing resources properly, authorities are increasingly focussing on how to maximise the benefit of the services they commission.
- 6 This review has focussed on assessing if local authorities have effective approaches to commissioning accommodation for adults with learning disabilities (those aged over 16)². Our review methods are set out in [Appendix 1](#). These include audit fieldwork at five local authorities; a detailed analysis of current performance and expenditure; modelling future growth and costs; website and document reviews; and interviews with a range of national organisations. Based on the findings of this audit, the Auditor General has concluded that local authorities are generally meeting the accommodation needs of adults with learning disabilities, but existing commissioning arrangements are unlikely to be fit for purpose in the future.

Summary of our findings

- 7 Local authorities are underestimating the complexity and level of challenge in meeting the long-term accommodation needs of people with learning disabilities and their carers. Despite progress in many areas, local authorities and their partners must do more to integrate services and resolve a number of complex challenges if they are to achieve the ambition of sustainable accommodation-based services.
- 8 Current investment by local authorities is keeping step with demand and authorities are continuing to meet the needs of people with learning disabilities. However, we estimate that authorities will need to increase investment by £365 million in accommodation in the next twenty years to address both a growth in the number of people with learning disabilities who will need housing, and the increase in the number with moderate or severe needs. Given that a third of authorities have reduced expenditure and services in recent years, this challenge will be particularly onerous.

2 This report considers adult social care and support for people aged 16 and over. Where the data included in this report refers to people aged 18 we highlight this. People can define things in different ways so where there is a difference in meaning we have taken expert advice on the most appropriate definition. Our report does not prescribe particular solutions, staffing levels or cost models.

CURRENT NUMBERS ASSISTED BY LOCAL AUTHORITIES:



3.15 MILLIONS

Estimated population
of Wales in 2015

Estimated number adults of Wales
in 2015 with a learning disability

58,308



12,014 adults with a
learning disability
in Wales provided with services by
local authorities in 2015-16



Three in every 100
people in Wales have
a learning disability

In 2015-16 there were 239.5



staff

employed by local authorities to plan
and commission social care services

This ranged from 0 staff
in one authority to 33 in another.

- 9 Local authorities need better quality financial and population data to ensure they make the most informed decisions. Too many local authorities do not have a shared understanding of the scale of the task in maintaining people's wellbeing, and are not involving people with learning disabilities, partners and service providers in finding a sustainable and cost effective way forward.
- 10 **Part 1** of this report examines whether local authorities take a well-considered and planned approach to commissioning accommodation services for people with learning disabilities. We consider how good local authorities are at planning based on patterns of demand, and considering how much is currently spent on different types of service. We also estimate the levels of investment needed to keep pace with demographic change.
- 11 **Part 2** examines whether local authorities have the right systems in place to commission and deliver accommodation-based services. This part considers workforce planning, joint commissioning and how effectively local authorities engage with people with learning disabilities and service providers in considering options and agreeing future priorities.
- 12 Finally, **Part 3** considers how well local authorities monitor and review the impact of the commissioning of accommodation services for learning disabilities. This includes how effectively local authorities monitor and scrutinise what they do, and therefore how well they understand what works well and why.

Recommendations

- 13 Our work has identified a series of recommendations for improvement and these are set out below. In [Appendix 11](#), we have also proposed a checklist to help local authority scrutiny members undertake a self-assessment and identify options to improve commissioning of learning disability services.

Recommendations

- R1 People with a learning disability have a right to live independently. The last 50 years have seen significant changes in the provision of accommodation and support. Service provision has moved to a model that enables people to live in the community in ordinary houses throughout Wales ([paragraphs 1.3 to 1.10](#)). **We recommend that local authorities continue to focus on preventing people becoming dependent on more expensive placements in care homes by providing effective support at home and a range of step up accommodation by:**
- **improving the evaluation of prevention activity so local authorities understand what works well and why;**
 - **utilising the mapping of prevention services under the Social Services and Well-being (Wales) Act 2014 that covers other agencies and service providers;**
 - **improving the signposting of additional help so carers and support networks can be more resilient and self-reliant. This should include encouraging carers to make long-term plans for care to maintain and protect their dependant's wellbeing; and**
 - **sharing risk analysis and long term planning data with other local authorities, service providers, and partners to agree a shared understanding of the range of options.**
- R2 Population projections show that the number of people with a learning disability will increase in the future, and those aged over 65 and those with a moderate or severe learning disability will rise significantly ([paragraphs 1.3 to 1.10](#)). **We recommend that local authorities improve their approach to planning services for people with learning disabilities by building on the Regional Partnership Boards population assessments for people with learning disabilities and agreeing future priorities.**

Recommendations

R3 Welsh Government produced guidance to local authorities, entitled 'developing a commissioning strategy for people with a learning disability' to support authorities in producing strategic plans for the commissioning of learning disability services. In conjunction with codes of practice developed following the Social Services and Well-being (Wales) Act 2014, Welsh Government requires local authorities to develop integrated commissioning options with Local Health Board services. The aim is to provide a joined-up and cost-effective approach to the commissioning of services but our review-highlighted weaknesses in current arrangements ([paragraph 2.4 to 2.12](#)). **We recommend that local authorities do more to integrate commissioning arrangements with partners and providers and take account of the work of the National Commissioning Board by:**

- understanding the barriers that exist in stopping or hindering further integration;
- improving the quality of joint strategic plans for learning disability services ([see also paragraphs 3.11-3.14](#));
- establishing investment models and sustainable financial structures, joint workforce planning and multi-year budgeting; and
- developing appropriate governance and data sharing frameworks with key local partners that include a clear process for managing risk and failure.

Recommendations

R4 Local authorities' engagement with people with learning disabilities and their carers is variable. Whilst many authority services have positive relationships with advocacy groups, some are less successful in involving these groups and carers in evaluating the quality of services (paragraph 2.18 to 2.20). **We recommend that local authorities do more to involve people with learning disabilities and their carers in care planning and agreeing pathways to further independence by:**

- consistently including people with learning disabilities and their carers in the writing, monitoring and development of care plans;
- systematically involving carers and advocacy groups in evaluating the quality of services;
- involving people with learning disabilities in procurement processes; and
- ensuring communications are written in accessible and appropriate language to improve the understanding and impact of guidance and information.

R5 Local Authorities could do more to involve service providers in commissioning and make the tendering process more effective by making it easier to navigate and more outcome focused. However, providers are not as effectively engaged as they should be (paragraph 2.28 to 2.38). **We recommend that local authorities collaborate with providers, the third sector and suppliers in understanding challenges, sharing data, and pooling expertise by:**

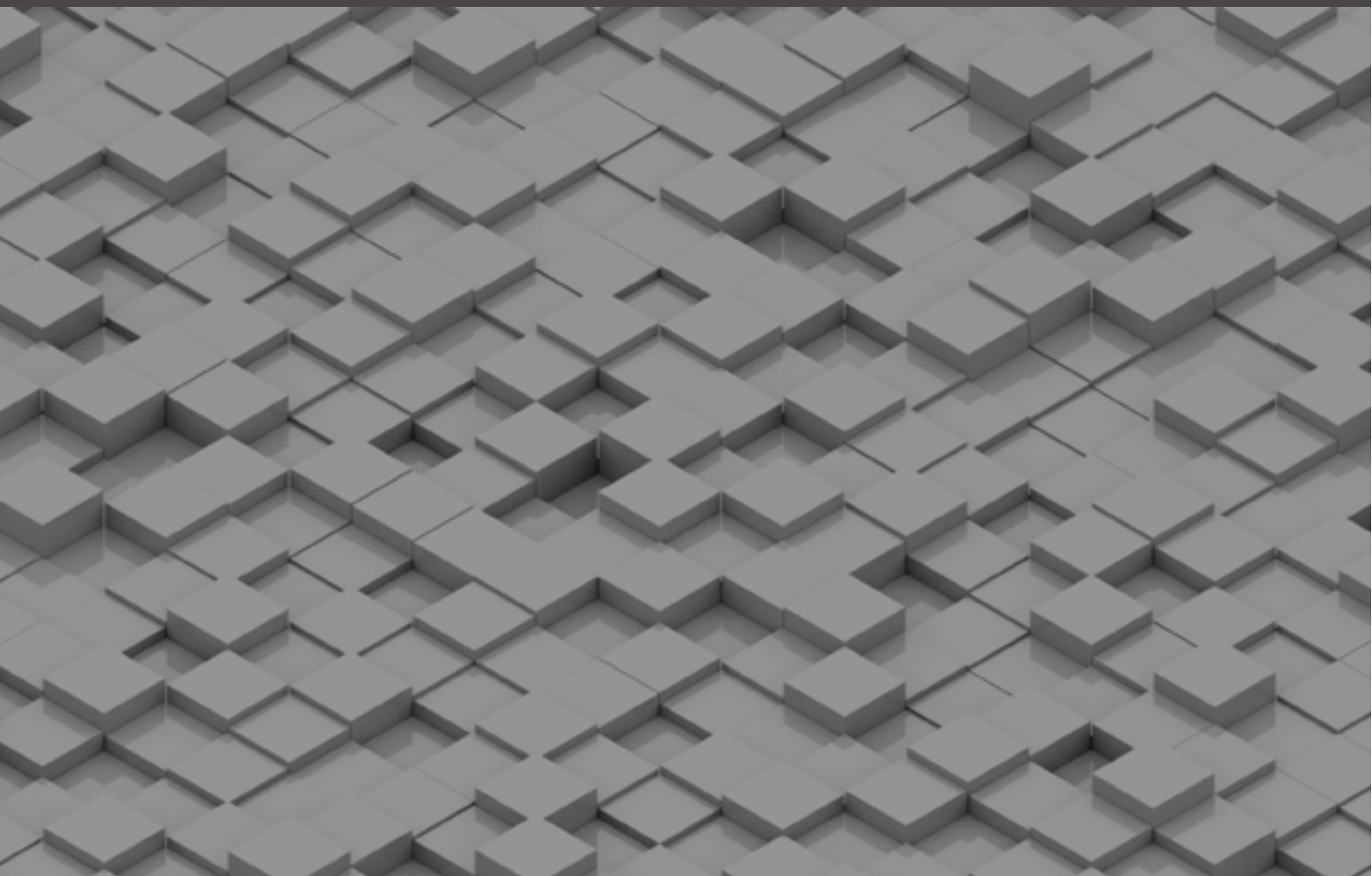
- improving the quality range, and accessibility of tendering information; and
- working with providers to shape local markets by coming to a common understanding of the opportunities, risks, and future priorities in providing learning disabilities services.

Recommendations

- R6 Most local authorities do not have effective arrangements to monitor and evaluate their commissioning of learning disability services (paragraphs 3.3 to 3.15). **We recommend that local authorities develop a more appropriate set of performance indicators and measures of success that make it easier to monitor and demonstrate the impact of service activity by:**
- **co-designing measures, service and contract performance indicators with service providers, people with learning disabilities and their carers;**
 - **ensure commissioners have sufficient cost and qualitative information on the full range of placement and care options available;**
 - **equipping commissioners with data to demonstrate the long term financial benefits of commissioning choices, this includes having the right systems and technology;**
 - **integrating the outcomes and learning from reviews of care plans into performance measures;**
 - **evaluating and then learning from different types of interventions and placements; and**
 - **including learning disability services in local authority scrutiny reviews to challenge performance and identify improvements.**

Part 1

The approach to commissioning accommodation for people with learning disabilities is potentially unsustainable



1.1 With increased financial pressures at a time of austerity, it is even more important that authorities balance providing people with learning disabilities with safe and good quality accommodation with making the best use of resources and delivering value for money. To do this well, commissioning staff and planners need to use population and demographic projections to gauge future demand for accommodation services which best meet the aspirations of people with learning disabilities. In this part of the report, we consider current demand for accommodation services for people with learning disabilities. We also consider current expenditure and analyse costs to both determine the economy of current provision, and to understand regional and socio-economic variations. Finally, we model future accommodation demand, highlighting some challenges for some authorities, and project the potential additional costs authorities will need to address going forward.

The number of people with learning disabilities provided with accommodation by local authorities is growing and current authority provision is keeping step with demand. The changing profile of demand raises some challenges for authorities in the future

1.2 The Welsh Government does not collect comprehensive information on the number of people with learning disabilities in the population and neither are learning disabilities recorded in the census. It is, however, possible to estimate the number of people with learning disabilities in Wales drawing on information from Daffodil³. In 2015 It was estimated that there were 58,300 adults with learning disabilities in Wales. Currently around 20% of the estimated total adult population of people with learning disabilities are provided with local authority social care services. The number of adults with learning disabilities in receipt of social care services has increased by just over 900 people since 2008-09⁴. Proportionally, provision for younger people is falling and the number of people with learning disabilities aged 65 and over in receipt of social care services is increasing. [Appendix 2](#) provides a detailed analysis of the data.

3 The web-based system developed by the Institute of Public Care for the Welsh Government. Daffodil supports public sector organisations to plan services providing population projections to identify potential need for care.

4 We have used 2008-09 as the starting point for our analysis as it is the last year before the UK coalition government 2010-2015 introduced austerity measures.

1.3 People with a learning disability have a right to live independently. Backed up by commitments in Welsh Government⁵ and local authority policies, the last 50 years have seen significant changes in the way accommodation and support is provided. Service provision has moved away from an institutional model to one which promotes people living in the community in ordinary houses. In 2015-16, local authorities funded over 12,000 placements to accommodation based services for adults with learning disabilities. **Exhibit 2** below shows that the bulk of these placements – 10,006 – were for community based accommodation services. The remaining placements were to residential care homes and other forms of accommodation.

Exhibit 2 – Learning disability placements for all local authorities in 2015-16 and percentage change in provision since 2008-09

Local authorities are providing more people with learning disabilities with social care services, particularly placements in community based services.

| Type of accommodation | Aged 16-64 | Change | Aged 65+ | Change | Total (all aged 16+) | Change since 2008-09 |
|---------------------------------------|---------------|--------------|--------------|--------------|----------------------|----------------------|
| Own home | 1,399 | -12% | 276 | 42% | 1,675 | -5.9% |
| Living with parents or family | 5,456 | 2% | 156 | 73% | 5,612 | 3.2% |
| Foster home | 84 | -33% | 8 | -20% | 92 | -32.3% |
| Lodgings / supported living | 2,217 | 27% | 410 | 63% | 2,627 | 31.8% |
| Accommodation in the community | 9,156 | 4.1% | 850 | 31.4% | 10,006 | 10.4% |
| Health service accommodation | 115 | 7% | 17 | 42% | 132 | 10% |
| Local authority care homes | 40 | -57% | 20 | -47% | 60 | -54% |
| Private or voluntary care homes | 1,109 | 4% | 244 | -2% | 1,353 | 2.5% |
| Residential accommodation | 1,264 | -0.7% | 281 | -5.7% | 1,591 | 1.3% |
| Other accommodation | 426 | 270% | 37 | 118% | 463 | 250.1% |
| All accommodation | 10,846 | 7% | 1,168 | 35% | 12,014 | 8.7% |

Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

5 Learning Disability Strategy - Section 7 Guidance on Service Principles and Service Responses, Welsh Government, August 2004.

- 1.4 Welsh Government projections from Daffodil predicts that the number of people in Wales aged 18 and over who will have a learning disability will increase from 58,300 in 2015, to 63,114 in 2035, an increase of 8.2%. In terms of the distribution of the population with learning disabilities, [Appendix 3 and 4](#) summarises Daffodil projections by local authority area. In summary, Daffodil projections suggest that more people will require help and support from local authorities to live independently by 2035 because:
- a twenty authorities will see a rise in the number of people with learning disabilities and five local authority areas will have significant increases;
 - b the number of people aged over 65 with learning disabilities will rise from 12,986 to 17,996, a 38.5% increase⁶ and are likely to place greater demands on local authorities for assistance; and
 - c the number of people in Wales aged 18 and over diagnosed with a 'moderate or severe' learning disability will increase in 12 of the 22 local authorities. In particular, a greater proportion of people with severe or moderate learning disabilities will require assistance, especially where parents and families become less able to provide care.

Expenditure on learning disabilities accommodation services have grown in recent years and authority investment has kept pace with demand. However, it is difficult to determine why there is a wide variation in authority spending

- 1.5 Local authorities spend large amounts of public money on learning disability services. At a Wales level, gross expenditure for people with learning disabilities (adults under 65) has risen by 16.5% from £336.3 million in 2008-09 to £398.5 million in 2015-16. In real terms, considering inflation, this equates to an all Wales increase of 6.8% over the period. [Appendix 3](#) provides a detailed analysis of the change in local authority expenditure.
- 1.6 The Welsh Government collects a range of data on accommodation services for people with learning disabilities. This includes overall expenditure on social care, and the number of placements made on annual basis to the different types of accommodation. However, Welsh Government does not collate and report on the cost by authority of the different types of social care accommodation and it is therefore not possible to compare expenditure for the different forms of accommodation to help determine economy in service provision.

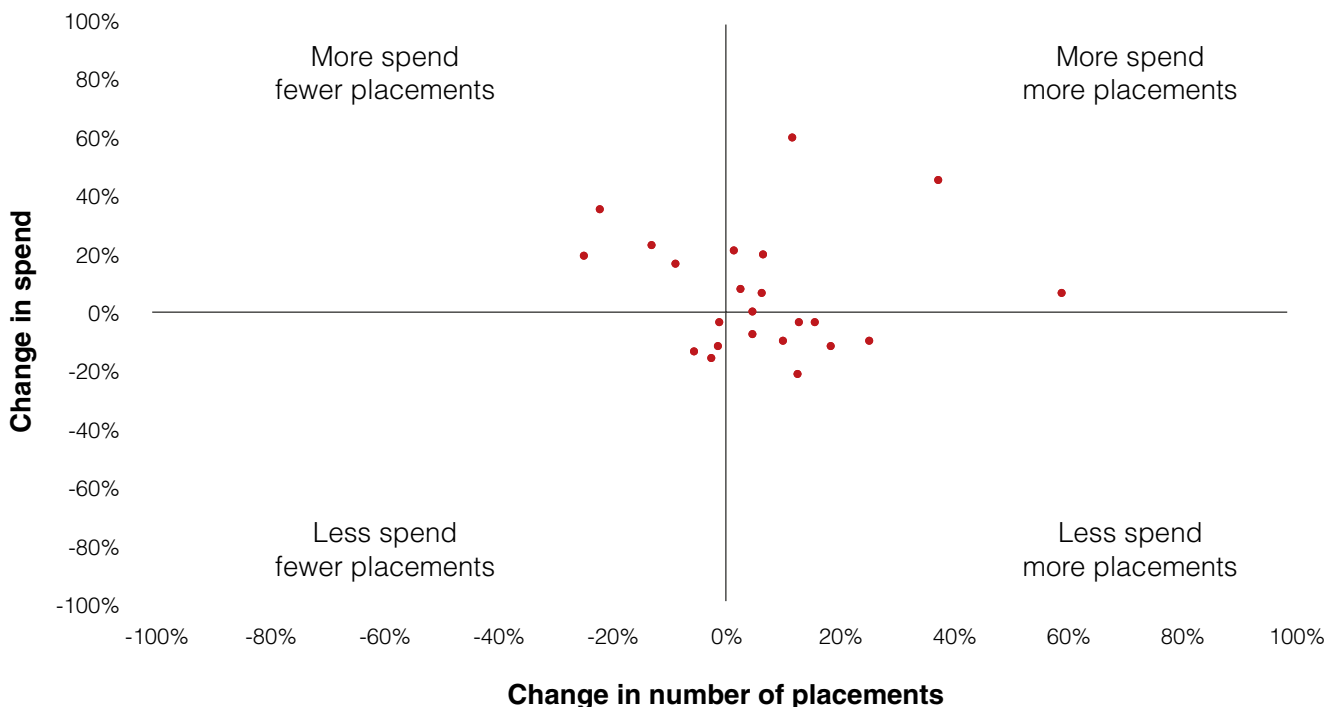
6 The increase in the number of people aged over 65 with moderate or severe learning disabilities is primarily a result of increased life expectancy, especially among people with Down's syndrome, and the growing numbers of people with complex and multiple disabilities who now survive into older adulthood.

1.7 To understand how authorities are managing their funding of learning disabilities provision, we have analysed expenditure as follows:

- a Firstly, we plotted the change in expenditure and placements from 2008-09 to 2015-16 to determine if there is a link between high cost and high numbers and/or frequency of placements. Exhibit 3 below maps the real terms change in expenditure against the number of placements by local authority between 2008-09 and 2015-16. Our analysis shows that there is no clear pattern between expenditure and placements. Spending more does not always result in more placements. Similarly, spending less does not always result in fewer placements.

Exhibit 3 – Change in number of learning disabilities accommodation placements for adults under 65 (x axis) against change in gross expenditure (real terms) between 2008-09 and 2015-16 (y axis)

The chart shows the change in spend and number of placements for each of the 22 local authorities in Wales between 2008-09 and 2015-16. Each quadrant of the chart represents a different pattern of change over time (as labelled). The Exhibit shows that there is no obvious correlation between expenditure and number of placements.



Source: Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

- b Secondly, we have mapped overall average⁷ authority expenditure on health board footprints to determine if there are regional commissioning markets in operation. **Appendix 6** shows that the average cost per placement ranges from roughly £22,000 to just under £71,000. Overall, we conclude that based on averages, there are no clear and discernible 'regional markets'.
- c Thirdly, we have grouped authorities by geographical and socio economic type, classifying authorities as either: valleys; mixed urban and rural; city; or mostly rural. **Appendix 7** summarises this analysis and highlights that overall, the range of cost is too wide to suggest geographical or socio-economic factors significantly influence cost.
- d Finally, we analysed variations in expenditure and changes in provision to determine which, if any, service model – community or residential based services – are cheaper or more expensive. **Appendix 8** compares average cost per placement and the prevalence of different types of provision for the authorities with lowest and highest average cost per placement. From our analysis, we conclude that there is no clear relationship between average placement cost and type of social care accommodation.

1.8 Drawing on the above evidence we estimate that there is no discernible pattern or rationale such as market conditions, regional issues or service model type that helps explain or justify variations in expenditure. Consequently, we consider that the cost of learning disability placements are more likely driven by other factors, which are explored in detail in Parts 2 and 3 of this report. In particular:

- a the effectiveness and approach of each authority's commissioning team, their skills and abilities to negotiate, challenge and set appropriate costs;
- b the number and range of staff employed and their engagement with and management of external care providers;
- c the availability of providers within the market and how effective local authority commissioning teams are at increasing provider capacity;
- d the systems and approaches used to commission services, especially the link between corporate approaches to procurement and social care commissioning;

⁷ Because data is not collected that identifies how much is spent on the different types of learning disability accommodation we are only able to compare performance between authorities using the overall average spend per placement for all learning disabilities social care accommodation. We recognise that averages can have some weaknesses, especially where data is skewed by wide variations in expenditure within an authority. Nonetheless, using average spend per placement allows us to explore whether there are underlying issues that may influence cost of services.

- e the robustness of needs assessments and strategic planning which underpin the choices made by authorities; and
- f the strength of scrutiny and oversight of the commissioning system to determine what is working and what needs to improve.

1.9 Others also echo our conclusions. For example, the Wales Mental Health and Learning Disabilities Collaborative Commissioning Group National Collaborative Commissioning Unit (the 'Unit') in the NHS in Wales has reviewed the costs of residential placements for mental health and learning disabilities and found a range of costs for similar care placements. This analysis is set out in **Exhibit 4** below and highlights that providers charge local authorities different amounts for broadly the same type of service. The Unit concluded that the 'prices charged for existing residential placements on a care setting by care setting basis lack transparency, are inconsistent and have limited relationships to any service specifications.' This suggests that current weaknesses in commissioning arrangements allow providers to maximise charges for services rather than operate to a defined cost model.

Exhibit 4 – The cost of weekly care packages for people with learning disabilities

The Exhibit summarises the range of weekly costs for three different models of provision in care homes and highlights that the charges made by providers for broadly the same type of service range widely.

| Placement type | Range of costs per weekly placement | |
|--|--|---------------------|
| | Minimum cost | Maximum cost |
| Care home, learning disabilities, without continuous staffing | £1,216 | £1,628 |
| Care home, learning disabilities, with continuous staffing | £681 | £3,250 |
| Care home, learning disabilities, with continuous nursing staffing | £1,330 | £2,766 |

Source: Director of National Collaborative Commissioning Unit, presentation to CIPFA Annual Conference 2017.

Our modelling suggests that at an all Wales level provision is keeping step with projected growth but a third of authorities face major choices in how they address future accommodation demand

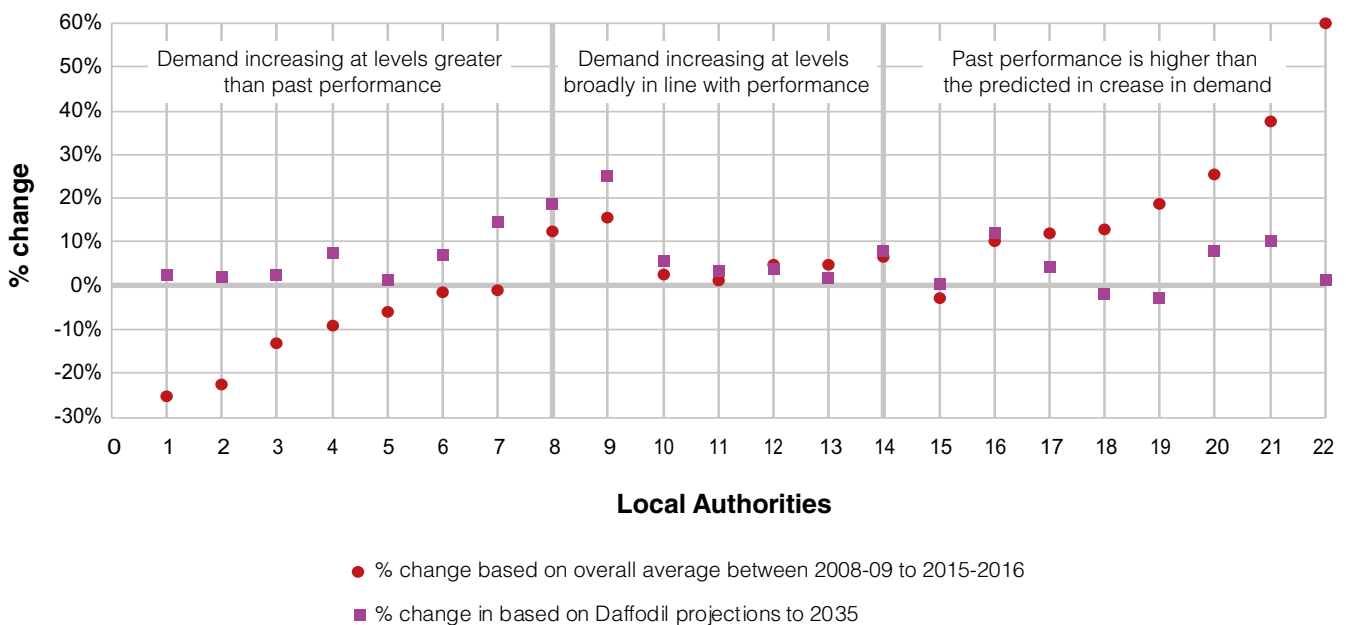
- 1.10 Framing future service delivery on current standards and approaches can sometimes result in demand being over or under estimated. Predicting future demand can be influenced by the assumptions that underpin any analysis, and projected demand does not always turn into actual demand. However, by assuming that services operate with little or no change to eligibility criteria, and broadly continue as currently provided, allows us to consider how well placed local authorities are to respond to potential future demand.
- 1.11 Assuming no change to eligibility criteria we have modelled in [Exhibit 5](#) the likely change in demand for social care accommodation provision for people with learning disabilities at an all Wales and local authority level⁸. We use a scatter graph to represent and compare current performance in provision of social care accommodation services, with the predicted change in numbers requiring those services by 2035. Where the two markers coincide, past performance is well aligned with projected demand and authorities are in a good position to manage projected population increases for social care accommodation. Conversely, where the two markers diverge, then authorities either need to increase capacity to address the projected growth in accommodation demand or need to taper future growth.

8 Our analysis draws on two separate sets of data. Firstly, we looked at the average percentage increase in provision of services to people with learning disabilities between 2008-09 and 2015-16. Using this data, we estimate that demand for accommodation will rise by 8.7% over the 20-year period. Secondly, the projected increase in demand based on the anticipated growth in the number of people with learning disabilities, as determined by the Daffodil data, projects that accommodation demand will increase by 8.2%.

1.12 In summary, our analysis highlights that nine local authorities (numbers 1 to 9) may need to increase the provision of social care accommodation services to address a predicted growth in demand by 2035. These are authorities where either accommodation services have reduced between 2008-09 and 2015-16 or the change in accommodation provision in this period is below the projected level of demand they need to address in the future. Seven authorities (numbers 10 to 16) past performance broadly matches predicted growth in accommodation. This suggests that current approaches to managing demand are well suited, or should require minimal change in accommodation provision to meet the projected change in the number of people with learning disabilities. Finally, six authorities (numbers 17 to 22) have increased learning disability accommodation placements in the recent past but their projected population of people with learning disabilities in the next 20 years may require them to rethink and taper services.

Exhibit 5 – Modelling of current performance (2015-16 base data) in provision of social care accommodation services for adults with learning disabilities against the predicted change in numbers potentially requiring accommodation services by 2035 (derived from Daffodil)

A third of authorities need to increase their investment in learning disability services to meet the projected population growth by 2035.



Source: Wales Audit Office analysis of Welsh Government published data available on StatsWales and Daffodil.

LOOKING FORWARD WE PROJECT THAT BY 2035:

The number of people with learning disabilities that local authorities will need to help will rise by



Local authorities will need to invest an additional

£365 MILLIONS

Our research shows that local authorities are at different places in how they commission services for people with learning disabilities and face different challenges in the next 20 years

9

authorities need to increase the amount of accommodation they make available to meet the needs of people with learning disabilities

7

authorities are well placed with little change required to services in the future

6

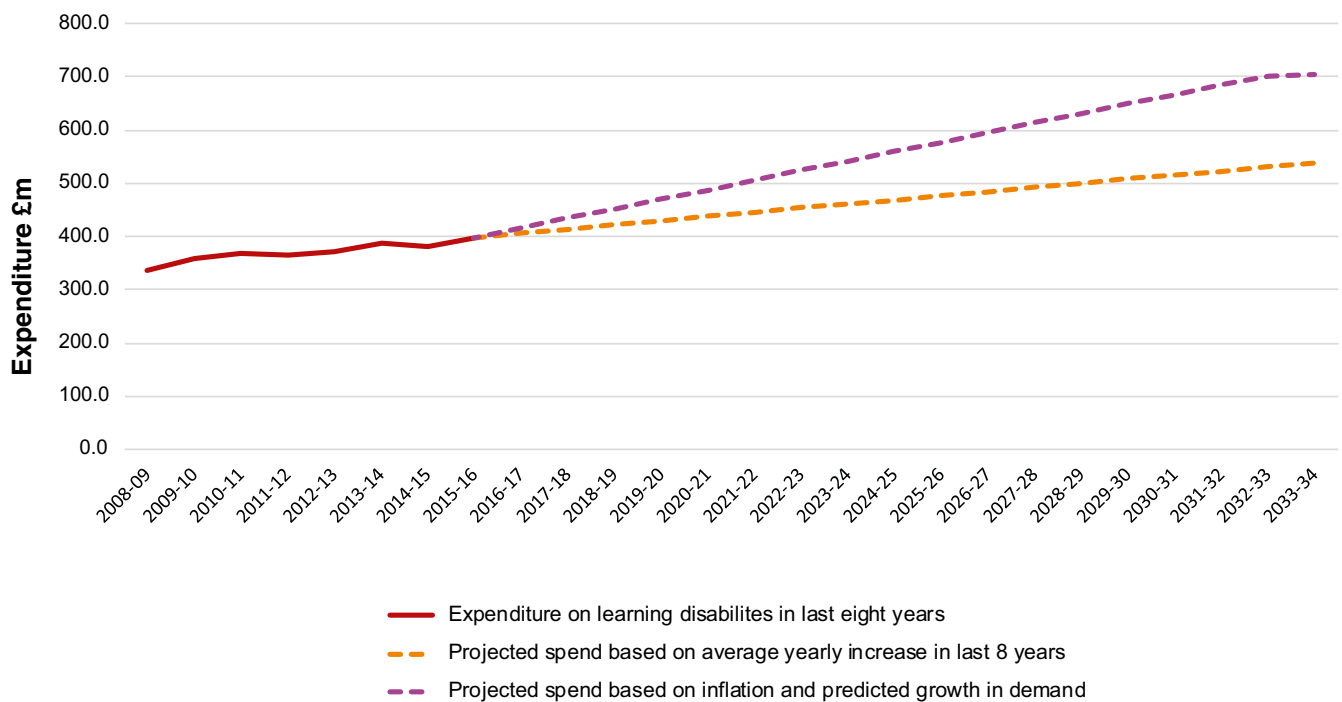
authorities are projected to have an oversupply of accommodation and need to rethink and taper services

Current levels of expenditure on learning disabilities accommodation services is insufficient to keep pace with inflation and growing demand

- 1.13 Comparing current patterns of expenditure against predicted increases in demand enables us to determine how well placed local authorities are to meet the financial demand of future accommodation needs. **Exhibit 6** overleaf compares current levels of expenditure on accommodation services against potential future costs on two measures: the predicted level of expenditure based on the average yearly budget increase between 2008-09 and 2015-16; and the projected increase in expenditure needed to keep pace with inflation and the growth in demand.
- 1.14 Our modelling in **Exhibit 6** highlights that local authorities will need to increase expenditure on learning disability accommodation services in the region of £365 million by 2035 (**Appendix 9** summarises our calculations showing how we have derived this figure). To keep pace with growing demand, and to make best use of current resources, authorities will need to both improve their commissioning systems and processes to offset our estimated increase in cost, but also invest greater sums of money to meet rising demand. This will prove challenging in the current financial climate for public services. Below, in Parts 2 and 3 of our report, we provide an overview of current commissioning arrangements, commenting on the effectiveness of current practices and how well placed authorities are to commission sustainably in the future.

Exhibit 6 – Modelling of projected increase in expenditure of social care accommodation services for adults with learning disabilities by 2035

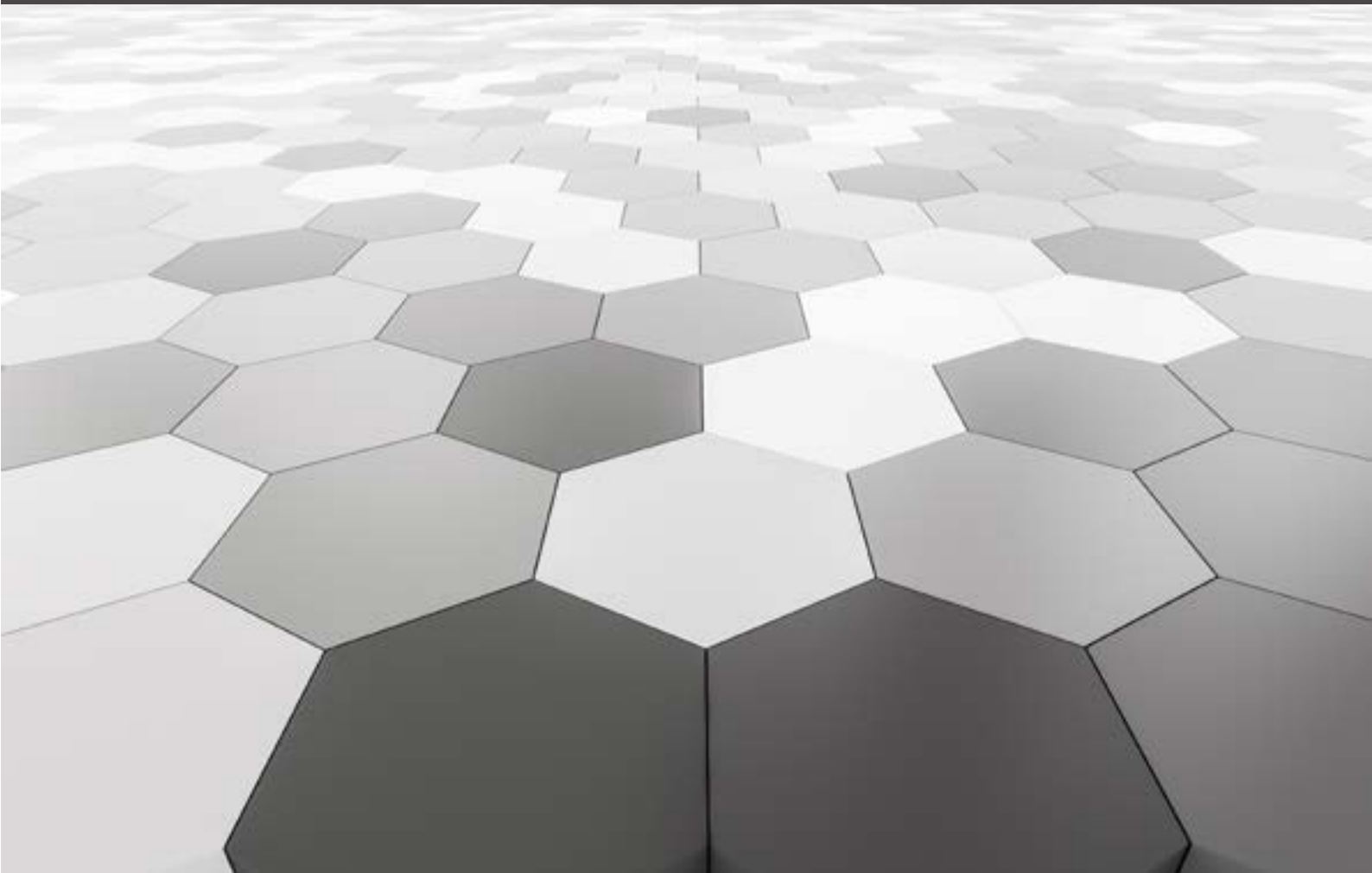
Our modelling concludes that comparing recent local authority expenditure patterns against projected inflation and increasing demand shows that current local authority investment on accommodation services will need to be significantly increased to keep pace with inflation and meet projected demand in 2035.



Source: Wales Audit Office.

Part 2

Local authorities generally do not have effective arrangements to commission accommodation services for people with learning disabilities



- 2.1 The best commissioners have the confidence to challenge the status quo, take on radical change, collaborate effectively with external stakeholders, gain a deep understanding of needs, and target resources effectively to meet those needs.
- 2.2 In January 2011, Welsh Government produced guidance to local authorities⁹, to support the production of strategic plans for the commissioning of learning disability services. This guidance is used by local authorities, in conjunction with codes of practice developed following the Social Services and Well-being (Wales) Act 2014, to develop commissioning options that are integrated with wider social care strategies. The aim of the guidance is to ensure partners provide a joined-up and cost-effective approach to the commissioning of accommodation services. Local authorities' commissioning strategies should communicate how they will achieve this and therefore we have considered how well they have developed their plans together with the views of the people tasked with delivering the strategies.
- 2.3 In this Part of the report we consider how effectively local authorities are organising themselves to meet current demand for accommodation of adults with learning disabilities.

Not all local authorities have developed strategic commissioning options in line with Welsh Government guidance and the introduction of the Social Services and Well-being (Wales) Act 2014

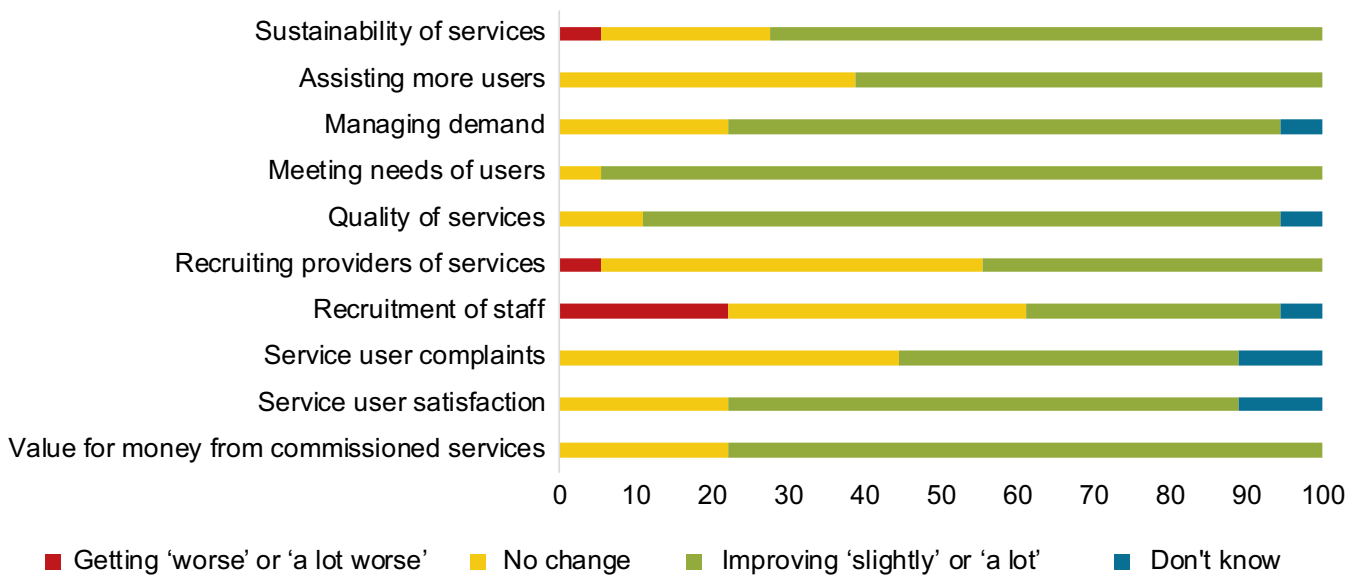
- 2.4 Authorities are striving to develop their approach to commissioning and there is clear evidence of improvements in strategic planning. Nineteen of the 22 local authorities have developed a specific commissioning strategy for learning disability services, and most authorities believe that their commissioning strategy has resulted in services improving. **Exhibit 7** overleaf highlights the benefits authorities recognise they have achieved as a result of commissioning strategies. Despite positive conclusions, some local authorities noted some local and regional commissioning challenges, commenting specifically on:
 - a difficulties recruiting staff, particularly across North Wales;
 - b a shortage of accommodation to meet more complex needs;
 - c existing providers being unable to meet increasing demand for more complex solutions;

9 <http://gov.wales/docs/dhss/publications/110301LearningDisCommStraten.pdf>

- d difficulties balancing the need for finding savings and more cost-effective service provision against the increasing demand for more complex packages of care; and
- e problems in implementing a cultural shift away from existing day-care provision that many older people with learning disabilities are accustomed to, and feel comfortable with, to community based services.

Exhibit 7 – The views of service managers with responsibility for learning disability services on the impact of their commissioning strategy

In most service areas, the majority of local authorities feel that their Commissioning Strategies have improved the quality of the social care services they provide to people with learning disabilities and better meet the needs of people with learning disabilities.



Source: Wales Audit Office Survey of local authority service managers with responsibility for social care learning disability services, May 2017.

- 2.5 The combination of pressure on budgets and new legislation from Welsh Government is encouraging authorities to modernise commissioning approaches. The Social Services and Well-being (Wales) Act 2014 (the Act) provides a legal framework for people with a learning disability who require care and support, and for transforming social services in Wales. Of particular relevance to people with a learning disability, the Act provides those receiving services with greater freedom to decide which services they need.
- 2.6 The suitability and availability of appropriate accommodation is critical in meeting the needs and future demands of people with learning disabilities and their carers. The findings of our survey of local authority service managers show that overall there is continuing policy support for community-based services that support independent living compared to more residential based services. For example, 21 of the 22 local authorities are prioritising supported housing services in the future, and 16 authorities favour increasing the number of people with learning disabilities who live in their own homes or reside with parents and family members.



- 2.7 However, whilst the Act promotes people's independence to give them a stronger voice and control, responses have mostly focussed on improving strategies and written documentation. In addition, whilst local authorities want to move away from services focussed on day care and residential services towards more bespoke and flexible community based accommodation services that best meet the needs of individual users, these aspirations are not always being delivered.
- 2.8 For example, a number of national organisations we spoke to who work with people with a learning disability and their families and carers, told us that authorities have long discussed changing service models, but they have seen little evidence of positive change on the ground or in the services commissioned by authorities. Interviewees also told us that authorities do not always take account of the contribution that other services, such as leisure and education, can play in delivering better outcomes for people with learning disabilities. One senior manager in a learning disabilities support organisation we spoke to told us the intention to improve service delivery models has been around 'for all of my 30 years in the sector'. Others stated that opportunities such as supported employment are far more satisfying than 'filling time' activities such as day care, which often do not produce effective outcomes for people with learning disabilities. The need to give staff wider and more specialised skills in locating and developing job opportunities for people with learning disabilities is recognised in a growing number of local authority plans and strategies.
- 2.9 Despite these shortcomings, authorities are improving their strategic focus on commissioning. For instance, Rhondda Cynon Taf County Borough Council has a Commissioning Strategy and Statement of Intent for Learning Disabilities, which is supported by a Commissioning, Procurement and Management Strategy. The aim of these two strategies is to provide a unified strategic framework for commissioning, procurement and contract management within the local authority. The Commissioning Strategy has been developed jointly with Cwm Taf Local Health Board. Staff we spoke to acknowledged that the Social Services and Well-being (Wales) Act 2014 has driven the change in thinking about service provision.

2.10 Likewise, the City and County of Cardiff have a number of operational plans that support the delivery of their Learning Disability Commissioning Strategy¹⁰. These include an overarching Statement of Strategic Commissioning that sets out the values, principles and purposes of all commissioning undertaken by the Council, and more specific documents covering Older People's services, an Autistic Spectrum Disorder strategy and a joint Day Opportunities strategy. As a result, the up to date information and intelligence places the local authority in a better position to commission services.

Commissioning strategies are not always resulting in cost effective service options that meet the needs of people with learning disabilities

2.11 The World Health Organization states that the health inequalities experienced by people with a learning disability are partly caused by poor quality social care and on average people with learning disabilities have poorer health and die younger than other people¹¹. Therefore local authorities should do all they can to secure the most effective and appropriate accommodation service to meet the wellbeing of individuals and a local authorities' formal arrangements with carers and providers of learning disability services form an important part of an effective strategic approach that assures good value for money.

2.12 From the documentation we examined, together with our interviews with commissioning staff and national organisations, we found inconsistencies with how authorities balance cost and quality of accommodation services. We also found a lack of common understanding between commissioners, corporate procurement teams and providers in what they are trying to achieve.

¹⁰ www.cardiff.moderngov.co.uk/learningDisabilityCommissioningStrategy

¹¹ See www.who.int/mediacentre/factsheets/fs352/en/

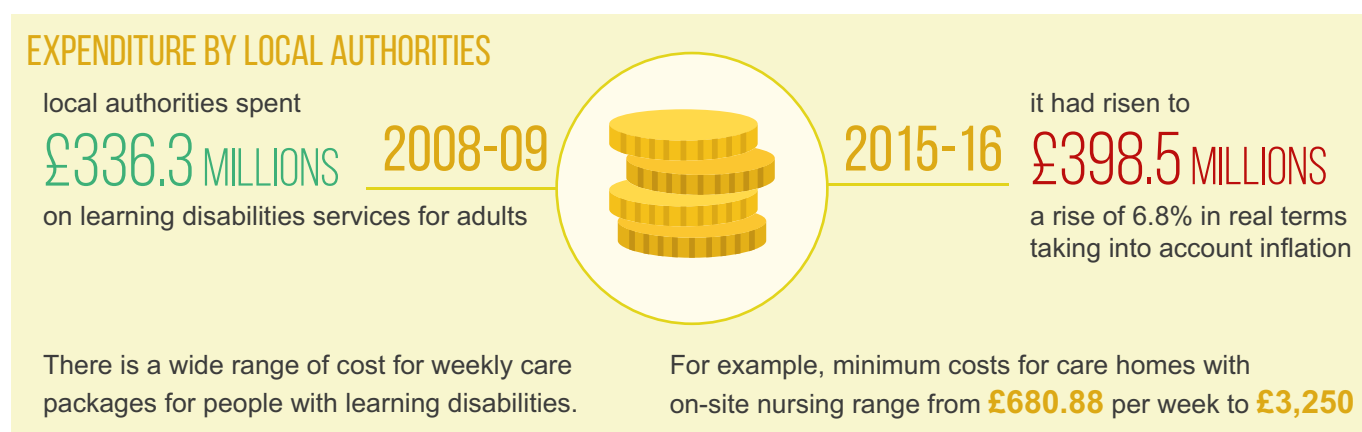
- 2.13 Our examination of national research and documentation shows authorities' commissioning arrangements do not give sufficient reassurances that they have the right systems in place to deliver their strategic commissioning intentions. Too many commissioning strategies give a poor indication of current and longer term user and carer needs, insufficient market analysis, limited provider input, and a weak analysis of current levels of spending and policy choices. As a result, baseline positions remain incomplete. Therefore, action plans may not be pointed at the right things and often focus on a list of intentions rather than strategic actions that drive and improve commissioning activity.
- 2.14 The Wellbeing of Future Generations principles¹² (the 'five ways of working') are increasingly being integrated in commissioning and procurement strategies, but progress in involving providers is still developing. Cardiff City and County Council has produced a procurement strategy, which explicitly aims to maximise economic, social, environmental and cultural wellbeing. Ensuring that small and medium sized enterprises are able to access tendering opportunities is currently under review by commissioning staff. The Western Bay Learning Disability Commissioning Strategy provides a more integrated strategic approach to reduce inconsistencies and health. This strategy defines the problems it is trying to solve, how it will improve current service delivery, and advocates the use of pooled budgets.
- 2.15 Local authorities increasingly recognise that they need to improve the efficiency and cost stability of commissioning. Nonetheless, some positive examples exist. Rhondda Cynon Taf County Borough Council's 2016 Learning Disability Joint Statement of Strategic Intent includes a strong focus on market shaping. This includes differentiating between universal, early intervention, and intensive intervention services so commissioners are clear about what services are available to allow for comparisons between packages of care. As a result, providers can more quickly fill any gaps in provision.

12 See <http://gov.wales/docs/dsjlg/publications/150623-guide-to-the-fg-act-en.pdf>

2.16 Local authorities are also developing their commissioning strategies to look for ways to collaborate and get greater value for money. The Social Services Improvement Agency’s 2014 report entitled Transforming Learning Disability Services in Wales¹³ finds ‘there is potential to develop the functions of commissioning to deliver better outcomes for people with a learning disability and reduce avoidable costs.’ Report recommendations include more outcome-based reviews and an integrated approach across the NHS and Local Government to the planning, commissioning and delivery of learning disability services in Wales. However, we found that the need to lower costs is still perceived to be the greatest influence. This creates barriers to innovation and effective commissioning.

Regional joint working between local authorities is steadily developing, but engagement with Health Boards is variable

2.17 Welsh Government guidance on developing commissioning strategies for learning disability services and the Social Services and Well-being (Wales) Act 2014 state that local authorities should work with their local health boards when producing their commissioning strategies and developing and delivering learning disability services, including accommodation. From our survey of local authority service managers we found that roughly two thirds of respondents jointly commission services with their Local Health Board and stated that these arrangements are ‘effective’ or ‘very effective’.



13 See Transforming Learning Disability Services in Wales.

Exhibit 8 – Whole time equivalent social care planning and commissioning staff for all Welsh local authorities and social care services in 2015-16

The exhibit summarises the range of staff employed by local authorities to undertake all social care planning and commissioning. The average across Wales is 10.9 Full Time Equivalents (FTEs) to undertake social care planning and commissioning activity and ranges from no specialist staff to 33.2 (FTEs).

| Range | Commissioning Manager | Operational staff | Support officer | Other Staff |
|--------------------|-----------------------|-------------------|-----------------|--------------|
| Minimum | 0 in six LAs | 0 in five LAs | 0 in five LAs | 0 in ten LAs |
| Maximum | Four in one LA | 13 in one LA | 15 in one LA | 16 in One LA |
| Wales total | 33 | 89 | 74 | 44 |

Source: <http://gov.wales/statistics-and-research/local-authority-social-services-staff-numbers>

2.18 However, even those who commented positively on joint working with health colleagues flagged some challenges. For example, joint working focussing too much on operational matters relating to individual packages of care rather than considering how best to deliver longer-term sustainable accommodation services; and poor engagement between partners resulting in poor ownership and support of decisions for people with learning disabilities.

2.19 In addition, many commissioning managers we spoke to see regionalisation of the commissioning of learning disability services as one way of delivering financial and improvements in the quality of services. Progress in this area has however been slow to date and some senior authority managers remain unconvinced about regionalisation due to the additional demands on their time, concern over responsibilities and risk, lingering doubts about the support to smaller suppliers and reluctance to pool budgets.

- 2.20 Hywel Dda Health Board has strong links with the three local authorities in its area (Pembrokeshire, Carmarthenshire and Ceredigion) and has developed a strategic intent document and a market position statement for learning disability services. As an example of this improving relationship, Ceredigion County Council has continued to develop its strategy, working regionally with the Mid and West Wales Health and Social Care Regional Collaborative, supported by an independent review of service planning and mapping¹⁴. The review started in 2014 and has evolved significantly since the Social Services and Well-being (Wales) Act 2014 came into force, focussing on an assessment of partners' capabilities and includes a number of service options for the future.
- 2.21 Likewise, in North Wales, Betsi Cadwaladr is looking to develop a learning disabilities strategy with all six local authorities in its footprint, which will sit alongside a regional mental health strategy. Similarly, the three local authorities in the Western Bay consortium – Bridgend, Neath Port Talbot and Swansea – all work closely with Abertawe Bro Morgannwg University Health Board (ABMU) and local authority and regional strategies have benefitted from health board input.

Resources to support planning and commissioning of services vary widely

- 2.22 The number of staff employed by local authorities to undertake all social care planning and commissioning vary widely. Whilst the number of staff engaged in activities has increased from 230.35 in 2014-15 to 239.56 in 2015-16, the number of managers has fallen. **Exhibit 8** summarises the range of staff in local authorities with responsibility for planning and commissioning social care services (there is no published information specifically on learning disabilities).

¹⁴ [Mid and West Wales Health & Social Care Regional Collaborative Learning Disabilities Partnership/2014](#)

- 2.23 The number of specialist commissioning staff employed by local authorities bears little relation to an authority's level of expenditure, the number of people with learning disabilities assisted or the range of services provided. For example, the average number of people with learning disabilities per member of social care planning and commissioning staff ranges from 14 in Pembrokeshire to 600 in Conwy. The average across Wales is 56.6 people with learning disabilities per FTE member of social care planning and commissioning staff. Likewise, the spend per learning disabilities client per member of social care planning and commissioning staff ranges from £0.585 million to £17.5 million. The average for Wales is £1.663 million.
- 2.24 There is some correlation between the number of commissioning managers employed by a local authority and their views on their capacity to commission. Comparing the results of our survey of local authority learning disability managers with the above data published by [StatsWales](#) on staff numbers, shows that those authorities with more than two commissioning managers think they have better capacity, and those with no planning or commissioning manager consider themselves less well placed to commission in the future. The recent report of the Care and Social Services Inspectorate Wales 2016 on care and support for people with learning disabilities¹⁵ noted, 'the quality of care and support for many people with learning disabilities in Wales is largely dependent on the effectiveness of the front line social services and health staff who support them'.

¹⁵ <http://cssiw.org.uk/our-reports/national-thematic-report/2016/national-inspection-care-and-support-for-people-with-learning-disabilities/?lang=en>

Local authority engagement is not always responding to the needs of people with learning disabilities and their carers

- 2.25 Engagement and consultation with people with learning disabilities and their families or carers, and with service providers can go a long way towards developing and maintaining high quality, appropriate accommodation services. If done well, it can inform local authority decision-making with detailed information from people with learning disabilities on their requirements and aspirations, and from service providers on their capacity, expertise and input for designing and delivering new accommodation services. Our interviews with commissioners, providers and national representatives suggest that where better value for money is being delivered, it is in part due to increasing user input into commissioning processes.
- 2.26 Our survey found that local authorities are using a number of techniques to engage and consult with people with learning disabilities and service providers, mostly through workshops, focus groups and other meetings. Our fieldwork also identified some good examples of how local authorities are involving people with learning disabilities who receive authority services in their procurement process, including as members of interview panels when selecting providers.
- 2.27 However, only twelve local authorities formally engage with service user representative groups to help shape and improve planning and to inform their decision-making. Opportunities exist to widen out engagement activity to include other less formal and more immediate ways of engagement, such as social media.
- 2.28 Importantly, local authorities recognise that engaging directly with people with learning disabilities who use social care services and responding to their needs is important. Most authorities highlighted that engagement has allowed them to identify options to improve how they commission learning disability services. For example, through their engagement work, both Torfaen and Rhondda Cynon Taf County Borough Councils have been able to quantify the needs and expectations of different age groups and are using this information to re-design services.

- 2.29 Providers we spoke to think that local authorities still have an emphasis on procurement rather than wider commissioning. Some local authorities have a clear focus on developing the provider market, looking to add social value¹⁶ from their investment, and improving wellbeing through commissioning. Whilst budgetary pressures have also influenced decisions, part of this change has also been driven by a change in expectation from some people with learning disabilities and their families and carers. There is, therefore, an increasing recognition by local authorities of the need to widen and improve the choice of suppliers and quality of services commissioned from providers. However, only half of authorities provide training and mentoring to providers to support and enable them to understand the expectations and requirements of the authority when they apply for contracts. Despite tender documentation giving a higher weighting towards the quality of services, there is often a lack of common understanding about what 'quality' means for people with learning disabilities.
- 2.30 A positive dialogue with service providers and the third sector is a key component of the Practice Guide for Leading Integrated and Collaborative Commissioning produced by the National Commissioning Board Wales¹⁷ in August 2017. From our review we found that considerable work remains to make this vision a reality. For example, Commissioning activity could be improved by developing a common and collective understanding of capacity and long term needs working jointly with providers.
- 2.31 However, the findings of our survey shows there are opportunities to improve current working practices. For instance, whilst 17 authorities keep tendering processes as short as possible and a 17 clearly set out how tenders will be reviewed, only 11 use standard nationally available good practice forms and information to mainstream their activity. Some providers see the amount of documentation required by local authorities as overly bureaucratic. As a result, the range of providers that respond to tenders can often be limited. We found potential for local authorities to make the tendering process fairer and easier for potential new suppliers.

16 Social value is a way of thinking about how scarce resources are allocated and used. It involves looking beyond the price of each individual contract and looking at what the collective benefit to a community is when a public body chooses to award a contract. Social value asks the question: 'If £1 is spent on the delivery of services, can that same £1 be used to also produce a wider benefit to the community?'

17 The National Commissioning Board has been established with the broad purpose of improving the quality of commissioning in Wales and developing effective practice in relation to integrated commissioning between local authorities and local health boards. The Board's membership is made up of representatives from: Local Authority, NHS, the National Provider Forum, Third Sector (WCVA), Wales Procurement Officers, Social Care Wales, CSSIW, WLGA, Improvement Agencies and Welsh Government.

- 2.32 Local authorities could therefore do more to redefine their relationships with providers to commission, rather than procure services. Local authorities' procurement processes may lead to unintended consequences with unplanned preference given to those organisations who are able to write high quality bids. Whilst commissioning managers may prefer to favour local companies, they told us that current national procurement conditions, as well as the Social Services and Well-being (Wales) Act 2014, require local authorities to consider national companies regardless of the potential support to economic wellbeing of the local area and job creation.
- 2.33 Despite some local authorities considering they have a sufficient number of appropriate suppliers, others think more needs to be done to encourage local companies. For example, one authority service manager noted that the 'Impression is that lots of new providers are looking to work... It's an issue around capacity for smaller, local companies to apply.' Likewise, another commented that the 'number of providers has been relatively static... We need to be innovative in how we commission with more of a dialogue in terms of third sector provision now.' However, one acknowledged that commissioning can often be undermined by a 'Clash between social care commissioners, corporate procurement and legal officers'.
- 2.34 Local authorities' management of the provider market is slowly evolving away from the traditional 'client contractor' model towards a more collaborative approach. The National Commissioning Board (NCB) for Wales¹⁸ thinks that greater efficiency and innovation could be encouraged by authorities collaborating more effectively with providers. Partnering¹⁹ is rarely used, and incentives for improving performance are not apparent in the contract documentation we examined. Few local authorities use preferred provider frameworks. Some tender documentation ask providers for examples of how they will innovate and do things differently, but many do not. Contract lengths vary and tendering for shorter contracts can be prohibitively expensive for smaller providers. Rollover contracts and annual arrangements are common. In some areas, the choice of providers is constrained resulting in limited choice and competition. As a result, some local authorities are missing opportunities to strengthen and enhance provision to improve service quality and maximise value for money.

18 See [Commissioning for People with Learning Disability.pdf2017](#)

19 The Institute of Chartered Accountants of England and Wales define partnering as establishing a long term relationship based on mutual trust and collaboration, and on sharing of both risks and rewards. Partnering arrangement between suppliers and customers will focus on what each party does best, by integrating financial and other resources, and establishing specific roles for each participant. Please see their 2014 report [Finance Business Partnering: A Guide](#).

- 2.35 Local authorities' understanding of the capabilities and capacity of the provider market varies. A good understanding of quality and capacity is important in supporting local authorities to shape and improve the quality and cost of social care provision. Traditionally, local authorities have focused on ensuring that there is a sufficient supply of different types of learning disability services. However, with people wanting more control over their own care budgets, greater choice and better access to services, authorities now need to shift their focus towards market shaping and market facilitation. Service providers we spoke to told us about the potentially high costs of developing new services and the need to fill gaps in provision. Market shaping of learning disability services is slowly emerging but there are gaps in understanding local market capacity. The Public Policy Institute for Wales' 2015 report *The Care Home Market in Wales: Mapping the Sector*²⁰, identifies gaps in information about services, ownership, financial stability, staffing and quality of care. Poor information management can hinder the design, planning, and ongoing monitoring of social care provision.
- 2.36 There are nevertheless examples of improvement. The Joint Commissioning strategy for adults with learning disabilities in Powys 2015-2020 sets a number of intentions including greater support for social enterprise to develop the provider market, an analysis of longer-term needs, and outcomes aimed for from collaboration. The strategy also includes actions to create wider opportunities for people with learning disabilities and their carers to access complimentary support and information.
- 2.37 Likewise, the City and County of Cardiff have completed a supplier and gap analysis and identified the need to develop more supported living services. Several authorities also work with people with learning disabilities to identify any gaps in services. Wrexham County Borough Council's Social Care Market Statement sets out how it can use commissioning to improve the local care market. Some local authorities have a clear focus on developing the provider market, adding social value and improving wellbeing through commissioning. These include Devon's joint NHS Devon/Devon County Council Strategy for Commissioning Social Value²¹.

²⁰ <https://sites.cardiff.ac.uk/ppiw/files/2015/11/The-Care-Home-Market-in-Wales-mapping-the-sector.pdf>.

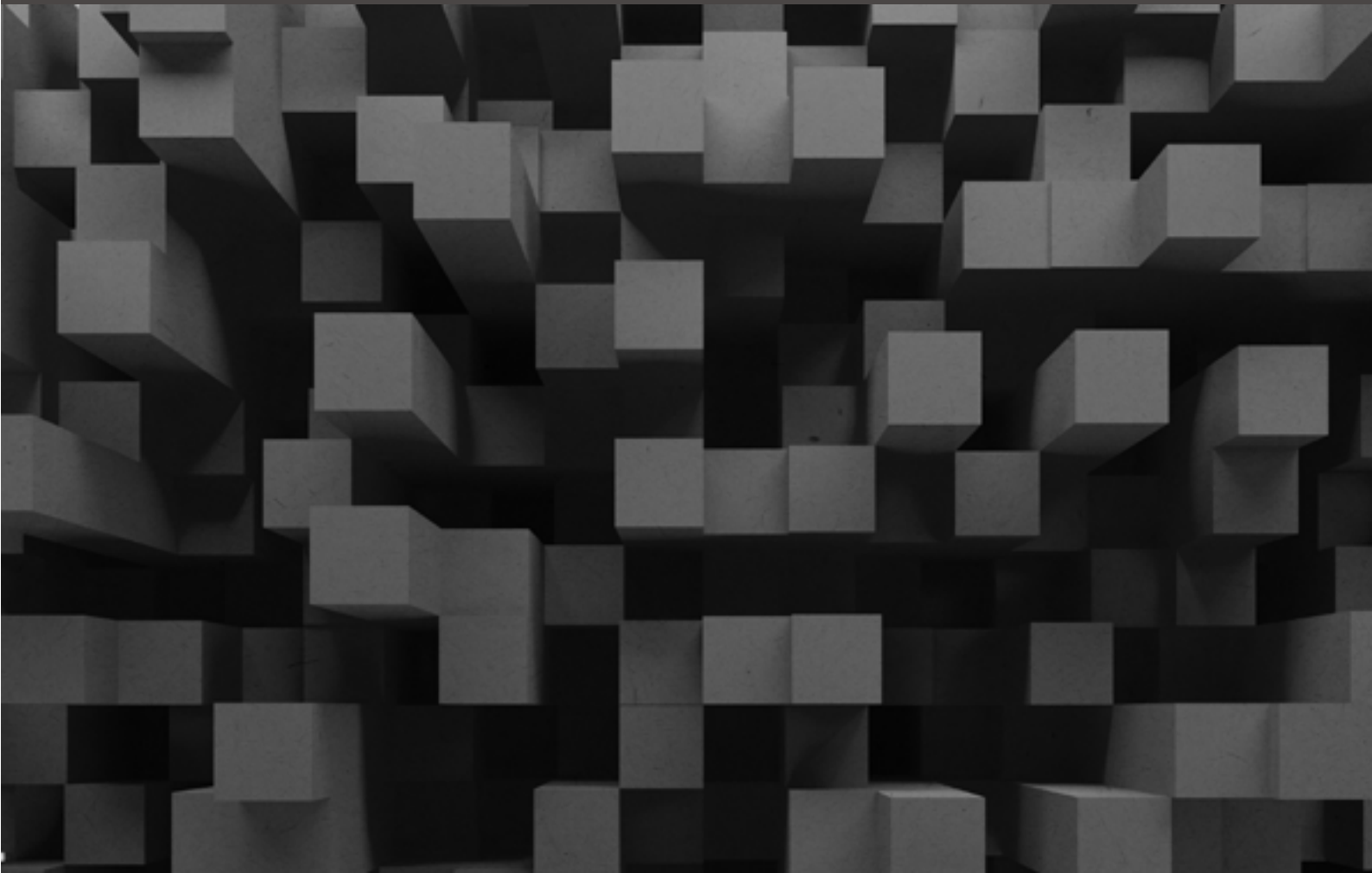
²¹ [Democracy.Devon.CIG Details and Devonhealthandwellbeing](#).

- 2.38 Market shaping is a challenge for local authorities across the UK. The Local Government Association's 2016 report Market shaping and commissioning²² sets out a baseline position in England for learning disability commissioners and notes that 'many councils identified understanding and development of the market as a key priority'. This mirrors the findings from our interviews with providers and local authority staff who highlighted the need to reach a common understanding and for local authorities to develop commissioning frameworks in collaboration.
- 2.39 Providers also note that more effective commissioning often happens when staff are given the opportunity to take well-managed risks and have more autonomy to make changes. We found that local authorities consider they have better skills than capacity with ten local authorities reporting that they do not have the capacity to commission. This suggests the skills and expertise that local authorities can draw on is more of a factor than the numbers of commissioning staff they employ.

²² www.local.gov.uk/our-support/our-improvement-offer/care-and-health-improvement/care-and-support-reform/implementation/general-duties/market-shaping

Part 3

Ineffective evaluation of outcomes for learning disability services means local authorities are not always able to demonstrate the positive impact of their accommodation commissioning choices



- 3.1 Local authorities attach importance to the data about the care needs of people with learning disabilities and the extent to which good outcomes are being achieved through the accommodation they provide. However, too often local authorities measure what is easy rather than what is appropriate. What really matters is to focus on the outcomes that services achieve for people, and having the right outcomes is key to successful commissioning. Clear conclusions about the impact of particular accommodation choices, interventions or support on wellbeing is proving elusive for local authorities because of their lack of systematic monitoring and evaluation of commissioning arrangements and review of individuals' care plans. In this Part of the report, we consider the effectiveness of monitoring and evaluation arrangements to oversee the performance of authorities in commissioning learning disability accommodation services.

Many local authorities have not set clear outcome measures to judge the impact of their commissioning activity

- 3.2 We found limited evidence of outcome based commissioning, despite local authorities often noting that they are commissioning to improve outcomes. Local authorities current approaches continue to focus too much on input and output and transactional indicators such as counting the number of accommodation based care packages, the cost of these services or the satisfaction of people with learning disabilities. Whilst these are relatively easy to track and report against, and provide a useful starting point to judge services, they do not measure what really matters for people with learning disabilities and provide little insight into the quality of services or the beneficial impact of commissioning choices on an individual or their carer's wellbeing.
- 3.3 This is partly a reflection of the difficulties local authorities experience in both understanding and defining what outcomes look like for people with learning disabilities. For example, only half of the local authorities who responded to our survey stated that they had set outcomes for learning disabilities in both corporate and service specific plans and strategies. Our review of strategic documents for learning disabilities echoed our survey findings, with many local authorities yet to set an appropriate and balanced range of outcome measures, which means that they are unable to evaluate the impact of their work.

- 3.4 Working with people with learning disabilities and their carers to find out what is working and why it is an important aspect of the commissioning. Local authorities have a duty to ensure that people with learning disabilities' care and support arrangements will meet their needs effectively and that accommodation is appropriate to meet their needs. Responsibilities and requirements for reviewing an individual's care plan are clear. Part 4 of the Social Services and Wellbeing (Wales) Act 2014 Code of Practice relating to the review of care plans²³ states that 'a local authority must prepare and maintain a care and support plan or a support plan...the plans must be kept under review'. The lack of regular reviews means a client's needs may or may not be met by current interventions, and the impact on their wellbeing may be unsubstantiated. The lack of review may also lead to people with learning disabilities not being provided with the most appropriate placements to meet their needs.
- 3.5 The Care and Social Service Inspectorate of Wales (CSSIW) in their National Inspection of Care and Support for People with Learning Disabilities report from June 2016 noted 'delays with reviews of care plans... missing detail about the substance of care plans' and 'reviews of care plans were less rigorous and ambitious where people were in relatively stable placements'. These conclusions were echoed in our fieldwork where local authority staff and provider representatives told us that the review of care plans is often not systematic or consistent. Local authorities' evaluation of care plans do not make the link between provider activity and improvements in wellbeing. Overall, we concluded that local authorities do not always systematically review care plans to evidence improvements in people's wellbeing, nor do authorities evaluate common themes and regular findings across all their care plans.
- 3.6 Strengthening engagement with people with learning disabilities and their carers about the accommodation services that they receive is acknowledged as an area for improvement by all local authorities we undertook fieldwork with. We found that only two-thirds of local authorities use service user satisfaction to review the performance of providers. One local authority service manager noted, 'the system is output-driven, and cannot quantify the importance of service user's views. How can you balance value for money with the impact of a change in provider? Also, they have lots of evaluative data from users, contract monitoring, etc. but are not very good at aggregating this to measure overall quality and impact, or drive improvements in services'.

²³ socialcare.wales/hub/reviewingCarePlans

- 3.7 Providers we spoke to identify a wide range of inconsistent approaches from local authorities in monitoring contracts. They noted the lack of systematic involvement and engagement of those using services in the scrutiny of service delivery. Local authorities that do involve users in contract negotiations, including the final provider selection process, such as the City and County of Cardiff, can point to improvements in client satisfaction and the availability of a wider range of services. However, local authorities are not always making full use of satisfaction and complaints information from people with learning disabilities. Advocacy groups we spoke to noted that from their experience local authorities could generally do more to gather feedback in a strategic way rather than conduct consultation as a 'set piece, one off conversation'.

Variable oversight and scrutiny of performance hinders evaluation

- 3.8 The benefits of effective scrutiny are well understood by local authorities and national bodies and most authorities regularly report performance of their learning disabilities services. Our survey of local authority service managers with responsibility for learning disabilities found that all authorities regularly reported performance to elected Members and that in 18 authorities' officers felt that elected members effectively scrutinised learning disability services. This is echoed by our fieldwork where we found that elected Members are taking an increasing interest in learning disabilities recognising that increasing the role and impact of scrutiny can improve the focus on outcomes for people.
- 3.9 However, we also found that scrutiny engagement continues to focus too much on current service provision rather than long term planning and evaluating the outcomes delivered for people with learning disabilities and their carers. For instance, our examination of a wide range of council Scrutiny and Committee reports about learning disabilities show very limited discussion and challenge from Members and too much focus on service inputs and outputs rather than an evaluation of impact and outcomes. One local authority service manager concluded that scrutiny of learning disabilities within their authority was 'hit and miss – in the last 18 months we have been to scrutiny twice around people with Learning Disabilities. There is more interest but if that is effective, I would not like to say... It comes down to people's own experiences and interest in some areas as to whether they can scrutinise effectively'.

Our research shows that there is no discernible pattern or rationale such as market conditions, regional issues or service model type that helps explain or justify variations in expenditure. Consequently, we consider that the cost of learning disability placements are more likely driven by other factors, in particular:



the effectiveness and approach of each authority's commissioning team, their skills and abilities to negotiate, challenge and set appropriate costs



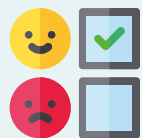
the number and range of staff employed and their engagement with and management of external care providers



the systems and approaches used to commission services, especially the link between corporate approaches to procurement and social care commissioning



the robustness of needs assessments and strategic planning which underpin the choices made by authorities



the strength of scrutiny and oversight of the commissioning system to determine what is working and what needs to improve

3.10 Better performing local authorities encourage active and regular scrutiny, and have effective systems and processes that enable oversight. Whilst some scrutiny reports such as Gwynedd Council's 2015 Scrutiny Committee report and discussion on the Changes in the Learning Disability Services show that Members are asking probing questions and seeking reassurances about the longer term sustainability of services, a number of scrutiny reports we reviewed do not cover this level of strategic consideration. For example, a number of scrutiny reviews of learning disabilities do not consider the impact of austerity, the introduction of the Wellbeing of Future Generations legislation, nor the recent changes to benefits and carers' allowance on people with learning disabilities and their carers. As a result, oversight of performance can be limited and commissioners of learning disability services are not always presented with effective challenge or up to date evidence based research.

- 3.11 Our survey found that the effectiveness of authorities in monitoring the work of providers was variable. Whilst 19 local authorities regularly review provider performance, only nine authorities widened their evidence base to draw on the findings of reviews conducted by other local authorities in Wales. Whilst monitoring financial performance and contract spending is acknowledged as important by all local authorities, only 12 benchmark the cost of commissioning learning disability services from providers with other Welsh local authorities.
- 3.12 Fourteen authorities state that they have set and regularly evaluate provider performance against agreed strategic priority targets and outcomes. We found from our review of scrutiny papers and strategy documents that evaluating wellbeing outcomes tends to be based on numbers and/or anecdotal feedback and too often reported performance does not adequately consider quality of life or changes in behaviour such as better personal resilience. The lack of clear measures of success means that authorities cannot clearly evidence financial benefits and improving quality of services resulting from their commissioning activity and choices. The Centre for Public Scrutiny's 2017 report on using scrutiny to drive outcomes and improve the quality of life for people with learning disabilities²⁴ concluded that 'people's experience of external scrutiny in relation to learning disability was very mixed... and 'Access to good data and insight is essential to be able to understand the health and social needs of people with learning disabilities'.
- 3.13 Although many local authority services have positive relationships with advocacy groups, some authorities are less successful in involving carers and support groups in scrutinising and commenting on the quality of services. Advocacy groups we spoke to want to see more regular involvement in performance monitoring and communication that is written in appropriate and accessible language and expressed concerns that current systems to oversee performance are not effective.

²⁴ www.sclid.org.uk/wp-content/uploads/2017/03/Scrutiny-Report-1.3.17.pdf

Appendices



Appendix 1: Study Methodology

Review of literature

We have reviewed a wide range of documents, including:

- Welsh Government policy and guidance documents;
- local authority procurement and commissioning guidance, as well as plans and strategies for learning disability services; and
- other relevant research and guidance produced by the National Commissioning Board, the ADSS, Welsh Local Government Association (WLGA) and research bodies.

National Interviews

We interviewed representatives of the National Commissioning Board, the Care Council for Wales (now Social Care Wales), Learning Disability Wales, All Wales People First, Mencap Wales, the all Wales forum for carers and parents and other third sector providers.

Data and statistical analysis

We have collated and analysed a wide range of performance indicator returns and budget data available online at the Office for National Statistics and StatsWales and population projections produced by the Institute of Public Care for the Welsh Government.

Local authority and housing association fieldwork

We visited five local authorities in 2016-17. The local authorities selected represented a mix of city, urban, rural and valleys authorities, which are geographically spread across Wales.. The fieldwork sites were:

- City of Cardiff County Council;
- Ceredigion County Council;
- Wrexham County Borough Council;
- Rhondda Cynon Taf County Borough Council;` and
- Anglesey County Council

During the visits, we interviewed a range of staff and elected members.

Surveys

We undertook a survey with senior managers with responsibilities within local authorities for learning disability services.

Appendix 2: Number of people aged 16 and over with learning disabilities assisted by local authority social services 2008-09 and 2015-16

The Exhibit shows that whilst the number of people with learning disabilities who are provided with social care services has increased by 8.4% in the last eight years, assistance is beginning to reduce and fell by 1.2% between 2014-15 and 2015-16. Proportionally the number of people aged 65 and over require greater levels of support.

Exhibit 9 – number of people aged 16 and over with learning disabilities assisted by local authority social services 2008-09 and 2015-16

| Year | 2008-09 | 2009-10 | 2010-11 | 2011-12 | 2012-13 | 2013-14 | 2014-15 | 2015-16 |
|---|---------|---------|---------|---------|---------|---------|---------|---------|
| Number of people aged 16 and over assisted | 11,046 | 11,578 | 11,355 | 11,803 | 12,260 | 12,272 | 12,168 | 12,014 |
| % change over time against 2008-09 base year for those aged 16 and over | N/A | 4.8% | 2.8% | 6.8% | 11% | 11.1% | 10.1% | 8.7% |
| % change comparing performance year by year for those aged 16 and over | N/A | 4.8% | -1.9% | 4% | 3.9% | 0.1% | 0.8% | -1.2% |
| Number of people aged 65 and over assisted | 862 | 931 | 934 | 1,001 | 1,046 | 1,107 | 1,129 | 1,168 |
| % change over time against 2008-09 base year for those aged over 65 | N/A | 8% | 8.4% | 16.1% | 21.4% | 28.4% | 31% | 35.6% |
| % change comparing performance year by year for those aged over 65 | N/A | 8% | 0.3% | 7.2% | 4.5% | 5.8% | 2% | 3.5% |

Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

Appendix 3: Real terms change in expenditure on learning disability accommodation services by local authority for people aged 16 and above between 2009-10 and 2015-16

Exhibit 10 – Real terms change in expenditure on learning disability accommodation services by local authority for people aged 16 and above between 2009-10 and 2015-16

| Local Authority | 2008-09 £'000 | 2009-10 £'000 | 2010-11 £'000 | 2011-12 £'000 | 2012-13 £'000 |
|-------------------|------------------|------------------|------------------|------------------|------------------|
| Anglesey | 8,892 | 11,421 | 10,967 | 10,733 | 10,124 |
| Blaenau Gwent | 9,687 | 8,429 | 9,206 | 8,880 | 9,893 |
| Bridgend | 13,746 | 14,646 | 14,232 | 14,511 | 15,305 |
| Caerphilly | 20,209 | 20,619 | 20,624 | 19,991 | 20,021 |
| Cardiff | 35,114 | 36,840 | 38,328 | 38,180 | 39,158 |
| Carmarthenshire | 20,106 | 22,587 | 23,790 | 24,691 | 27,280 |
| Ceredigion | 9,426 | 9,655 | 9,974 | 10,122 | 11,486 |
| Conwy | 14,663 | 16,263 | 17,536 | 17,306 | 16,463 |
| Denbighshire | 12,068 | 11,822 | 12,828 | 12,679 | 14,272 |
| Flintshire | 16,156 | 19,949 | 20,458 | 20,718 | 19,374 |
| Gwynedd | 12,900 | 13,934 | 14,191 | 14,135 | 14,033 |
| Merthyr Tydfil | 4,874 | 5,415 | 4,624 | 4,812 | 5,363 |
| Monmouthshire | 10,814 | 10,846 | 11,276 | 11,103 | 10,268 |
| Neath Port Talbot | 15,894 | 19,806 | 19,386 | 19,914 | 20,904 |
| Newport | 17,049 | 19,779 | 22,216 | 19,838 | 19,126 |
| Pembrokeshire | 10,895 | 12,355 | 13,584 | 14,579 | 15,786 |
| Powys | 17,481 | 16,370 | 17,488 | 18,443 | 19,461 |
| Rhondda Cynon Taf | 26,273 | 27,553 | 27,694 | 27,214 | 25,420 |
| Swansea | 19,466 | 18,928 | 17,214 | 17,052 | 17,694 |
| Torfaen | 9,268 | 9,308 | 9,600 | 8,038 | 7,651 |
| Vale of Glamorgan | 11,772 | 12,867 | 12,830 | 13,064 | 12,880 |
| Wrexham | 19,588 | 20,663 | 20,280 | 19,522 | 18,907 |
| Wales | 336,341 | 360,056 | 368,326 | 365,527 | 370,869 |

Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

| 2013-14 £'000 | 2014-15 £'000 | 2015-16 £'000 | Change £'000 | Change in real terms % |
|------------------|------------------|------------------|-----------------|---------------------------|
| 8,168 | 8,753 | 9,568 | 676 | -3 |
| 9,652 | 9,183 | 9,510 | -177 | -11.5 |
| 16,049 | 16,062 | 17,853 | 4,107 | 17 |
| 20,191 | 19,866 | 20,714 | 505 | -7.6 |
| 41,269 | 39,863 | 37,729 | 2,615 | -3.2 |
| 27,646 | 28,967 | 32,544 | 12,438 | 45.9 |
| 12,178 | 12,603 | 12,720 | 3,294 | 21.6 |
| 17,066 | 17,013 | 17,429 | 2,766 | 7.1 |
| 14,723 | 14,368 | 12,111 | 43 | -9.6 |
| 19,411 | 20,136 | 22,135 | 5,979 | 23.5 |
| 15,315 | 15,462 | 17,190 | 4,290 | 20.1 |
| 5,868 | 5,733 | 4,800 | -73 | -11.3 |
| 10,126 | 9,850 | 10,135 | -679 | -15.5 |
| 21,178 | 19,145 | 21,124 | 5,230 | 19.8 |
| 18,140 | 20,017 | 18,293 | 1,244 | -3.3 |
| 17,347 | 17,842 | 19,433 | 8,538 | 60.7 |
| 20,824 | 21,046 | 26,346 | 8,865 | 35.8 |
| 27,756 | 27,735 | 29,327 | 3,054 | 0.6 |
| 19,795 | 17,759 | 19,457 | -9 | -9.9 |
| 9,305 | 9,228 | 8,927 | -341 | -13.2 |
| 13,522 | 13,356 | 14,118 | 2,346 | 8.1 |
| 20,716 | 18,091 | 17,090 | -2,498 | -21.4 |
| 386,247 | 382,078 | 398,553 | 62,212 | 6.8 |

Appendix 4: Population projections for the number of people with a learning disability in by local authority in Wales by 2035

Exhibit 11 – The number of people with a learning disability aged 18+ years will rise in 20 of the 22 local authority areas

| Local Authority | Population aged 18yrs + with a learning disability | | Predicted change 2015 to 2035 | |
|-----------------------|---|---------------|----------------------------------|------------|
| | 2015 | 2035 | number | % |
| Blaenau Gwent | 1,305 | 1,266 | -39 | -3.0 |
| Isle of Anglesey | 1,306 | 1,282 | -24 | -1.8 |
| Monmouthshire | 1,718 | 1,721 | 3 | 0.2 |
| Conwy | 2,169 | 2,196 | 27 | 1.2 |
| Torfaen | 1,696 | 1,720 | 24 | 1.4 |
| Rhondda Cynon Taf | 4,358 | 4,422 | 64 | 1.5 |
| Powys | 2,518 | 2,575 | 57 | 2.3 |
| Neath Port Talbot | 2,633 | 2,696 | 63 | 2.4 |
| Flintshire | 2,853 | 2,925 | 72 | 2.5 |
| Ceredigion | 1,489 | 1,538 | 49 | 3.3 |
| Caerphilly | 3,327 | 3,454 | 127 | 3.8 |
| Pembrokeshire | 2,297 | 2,393 | 96 | 4.2 |
| The Vale of Glamorgan | 2,377 | 2,517 | 140 | 5.9 |
| Merthyr Tydfil | 1,116 | 1,195 | 79 | 7.1 |
| Bridgend | 2,650 | 2,855 | 205 | 7.7 |
| Denbighshire | 1,766 | 1,903 | 137 | 7.8 |
| Gwynedd | 2,340 | 2,530 | 190 | 8.1 |
| Carmarthenshire | 3,493 | 3,850 | 357 | 10.2 |
| Swansea | 4,653 | 5,208 | 555 | 11.9 |
| Newport | 2,736 | 3,134 | 398 | 14.5 |
| Wrexham | 2,587 | 3,076 | 489 | 18.9 |
| Cardiff | 6,920 | 8,657 | 1,737 | 25.1 |
| Wales | 58,308 | 63,114 | 4,806 | 8.2 |

Source: www.daffodilcymru.org.uk/index.php?pageNo=354

Appendix 5: Population projections for the number of people with a learning disability and those with moderate or severe learning disabilities in Wales between 2015 and 2035 by age group

Whilst there is a predicted decrease in the number of people aged under 65 with a learning disability or a 'moderate or severe' learning disability, there is a predicted increase in the numbers of people aged 65yrs + who have a learning disability.

Exhibit 12 – Population projections for the number of people with a learning disability and those with moderate or severe learning disabilities in Wales between 2015 and 2035 by age group

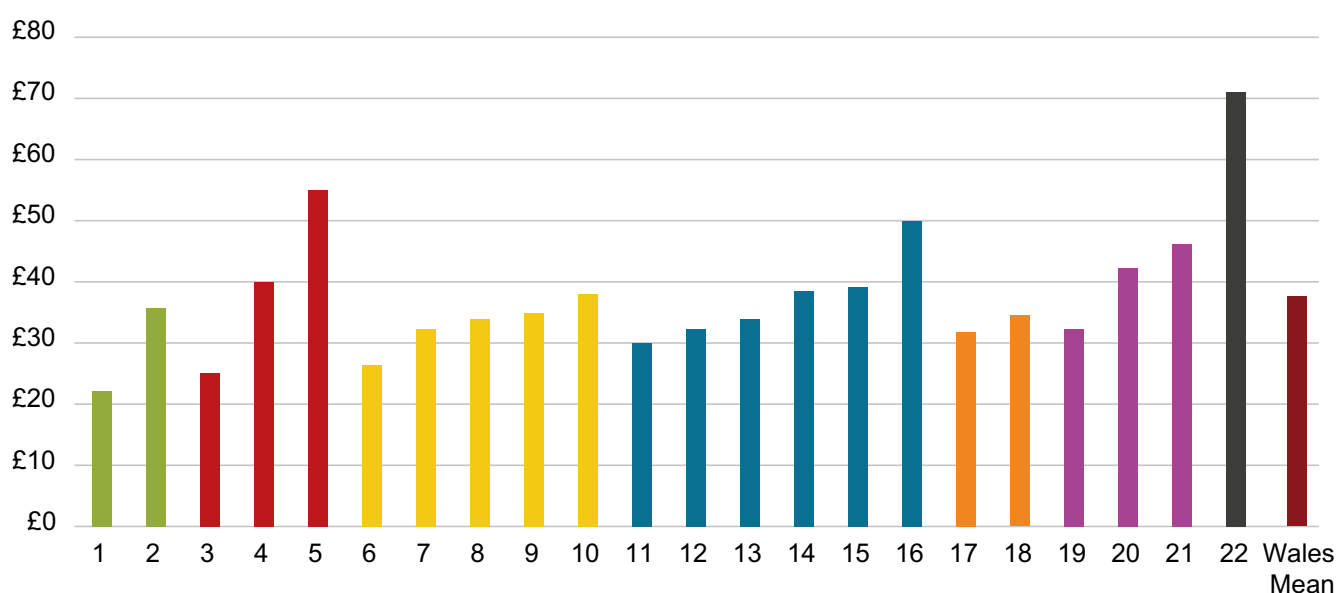
| Age range | All learning disabilities | | | | 'Moderate or severe' learning disability | | | |
|-----------|---------------------------|--------|------------------|------|--|-------|------------------|------|
| | 2015 | 2035 | Change over time | | 2015 | 2035 | Change over time | |
| | | | Number | % | | | Number | % |
| 18-24 yrs | 8,032 | 7,702 | -330 | -4% | 1,852 | 1,837 | -15 | -1% |
| 25-34 yrs | 9,632 | 9,441 | -191 | -2% | 2,069 | 2,028 | -41 | -2% |
| 35-44 yrs | 8,913 | 10,370 | 1,457 | +16% | 2,240 | 2,618 | 378 | +17% |
| 45-54 yrs | 10,104 | 9,351 | -753 | -7% | 2,265 | 2,141 | -124 | -5% |
| 55-64 yrs | 8,641 | 8,255 | -386 | -4% | 1,873 | 1,769 | -104 | -6% |
| 65-74 yrs | 7,420 | 8,653 | 1,233 | +17% | 1,210 | 1,395 | +185 | +15% |
| 75 yrs+ | 5,566 | 9,343 | 3,777 | +68% | 565 | 910 | +345 | +61% |

Source: www.daffodilcymru.org.uk/index.php?pageNo=354

Appendix 6: Average spend per learning disabilities accommodation placement for adults aged 16-65 in 2015-16 by local authority grouped on Health Board footprint

The data highlights that expenditure in some health board areas is broadly similar but in others there are wide variations in average expenditure. Overall, we conclude that there is no clear link between cost and health board area.

Exhibit 13 – Average spend per learning disabilities accommodation placement for adults aged 16 – 65 in 2015-16 by local authority grouped on Health Board footprint

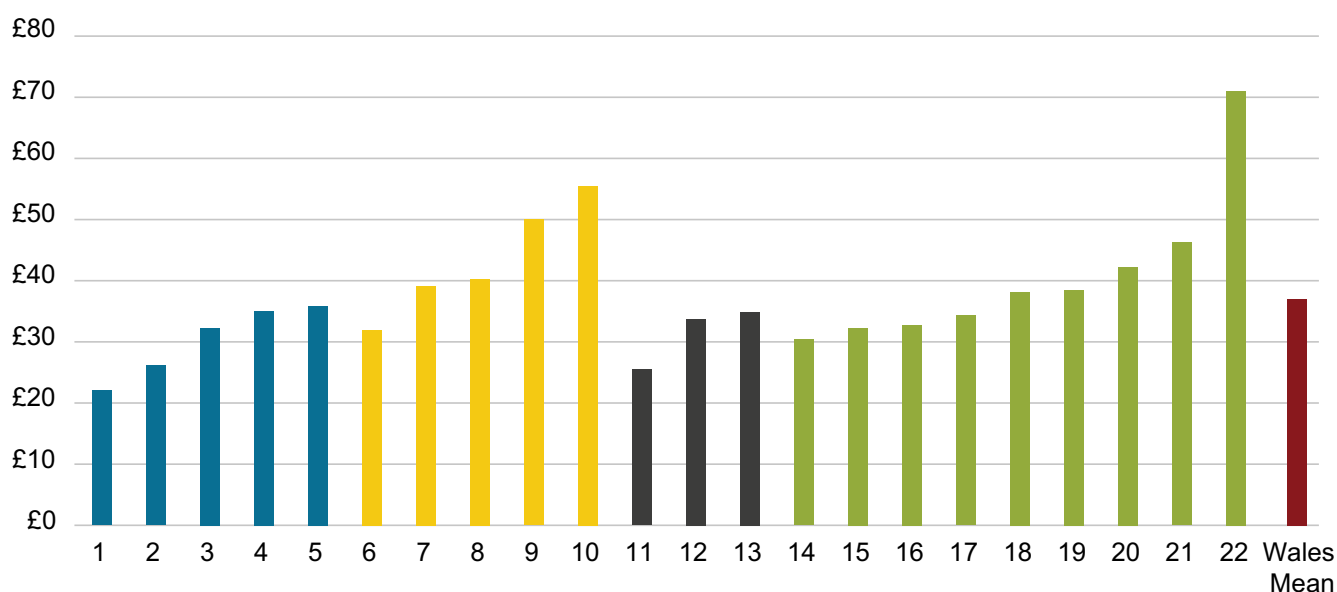


Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

Appendix 7: Average spend per learning disabilities accommodation placement for adults aged 16 – 65 in 2015-16 grouped by local authority geographical and socio-economic characteristics

The three city authorities and five valley authorities' expenditure cover a relatively small cost range. However, for the other groupings there are wider variations in average expenditure. Overall, we conclude that cost is not necessarily influenced by local authorities' socio economic characteristics.

Exhibit 14 – Average spend per learning disabilities accommodation placement for adults aged 16 – 65 in 2015-16 grouped by local authority geographical and socio-economic characteristics



Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

Appendix 8: Comparison of the three authorities with lowest and highest average cost per accommodation placement with their ranking for the use of different types of social care provision for people with learning disabilities in 2015-16

The Exhibit shows the potential link between the average cost of placements and the ranking of different types of social care placement. The ranking is based on '1' denoting the authority proportionally has the largest percentage of people with learning disabilities in this placement type and those ranked '22' the lowest percentage of usage. The Exhibit shows that there is no clear relationship between average placement cost and type of social care accommodation provided.

Exhibit 15 – Comparison of the three authorities with lowest and highest average cost per accommodation placement with their ranking for the use of different types of social care provision for people with learning disabilities in 2015-16

| Type of placement | Ranking of the three authorities with the lowest average level of expenditure per client | | | Ranking of the three authorities with the highest average level of expenditure per client | | |
|---------------------------------|--|--|--|---|--|--|
| | Authority A – average spend of £22,120 per placement | Authority B – average spend of £25,367 per placement | Authority C – average spend of £26,343 per placement | Authority D – average spend of £49,966 per placement | Authority E – average spend of £55,298 per placement | Authority F – average spend of £70,822 per placement |
| Own home | 1 | 11 | 4 | 22 | 21 | 7 |
| Living with parents or family | 17 | 8 | 5 | 3 | 11 | 21 |
| Foster home | 3 | 13 | =21 | =21 | 4 | 10 |
| Lodgings/ supported living | 21 | 5 | 18 | 7 | 16 | 1 |
| Health service accommodation | 20 | 8 | 5 | 21 | 19 | 18 |
| Local authority care homes | 2 | 3 | =21 | =21 | 7 | 20 |
| Private or voluntary care homes | 19 | 7 | 16 | 6 | 10 | 8 |
| Other accommodation | =16 | 14 | 17 | 21 | 2 | =16 |

Source: Wales Audit Office analysis of Welsh Government data taken from StatsWales.

Appendix 9: Projected expenditure on social care accommodation services for people with learning disabilities by 2035

Exhibit 16 – Projected expenditure on social care accommodation services for people with learning disabilities by 2035

| Category | Our calculation | Number |
|--|--|-------------------------|
| Population changes | We have assumed that the projected 8.2% increase in people with learning disabilities produced by Daffodil by 2035 will result in a similar proportion who will require local authority social care services in 2035 (in addition to the existing 12,014 currently receiving services). This equates 985 new people with learning disabilities requiring assistance by 2035. | 985 |
| Forecasting the value of £1 in 2015-16 at 2035 prices (real terms value) | In 2015-16 the mean (the average of the averages) learning disabilities, placement cost across all 22 local authorities' was £37,592. Using the GDP deflators at market prices to determine the value of £1 in 2035, we have compared the value of £1 in 2015 and 1995 (20 years gap) which assumes that the value of £1 will equate to roughly £0.64 in 2035. The predicted 2035 real terms cash equivalent for an average placement cost is calculated as follows: $£37,592 \times 0.64 = £58,737$ per placement. | £58,737 |
| Cost of projected population change | $£58,737 \times 985$ new people with learning disabilities. | £57.856 million |
| Existing expenditure keeping track and taking into account inflation | $£58,737 \times 12,014$ people with learning disabilities = £705.666 million. Minus 2015-16 spend of £398.500 million = £307.160 million. | £307.160 million |
| Total | £57.856 million + £307.160 million = £65.016 million | £365.016 million |

Source: Wales Audit Office.

Appendix 10: Checklist for Elected members to oversee the Strategic Commissioning of learning disability accommodation services

Exhibit 17 – Checklist for Elected members to oversee the Strategic Commissioning of learning disability accommodation services

| Key aspects of Strategic Commissioning | Characteristics of effective strategic commissioning | We are good at this | We need to improve this | We do not do this |
|--|---|--------------------------|--------------------------|--------------------------|
| Strategic Planning <ul style="list-style-type: none"> • Assessing needs • Reviewing service provision • Deciding priorities | We undertake an appropriate needs assessment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We review our own current provision as well as the provision in the wider marketplace. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We understand the needs of people with learning disabilities and carers. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We consult with people with learning disabilities and other stakeholders about current provision. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We involve people with learning disabilities and other stakeholders to gather ideas for future provision and agree expected outcomes. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We involve service providers and suppliers in gathering ideas for future provision and agreeing expected outcomes. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We have a strategy and/or framework in place, which clearly sets out our vision for current and future service provision. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We engage with other relevant sectors and providers when developing our commissioning strategies. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | We collect and analyse the right data to enable us to identify where we need to invest our resources. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Key aspects of Strategic Commissioning | Characteristics of effective strategic commissioning | We are good at this | We need to improve this | We do not do this |
|---|---|---------------------|-------------------------|-------------------|
| Commissioning services <ul style="list-style-type: none"> • Designing services • Shaping structure of supply • Planning capacity and managing demand | We ensure that our tender process is accessible for all potential collaborators. | | | |
| | We can demonstrate we have the capacity and skills to undertake the strategic commissioning process. | | | |
| | We actively look for ways to invite collaboration. | | | |
| | We consider service level and specialist input in our commissioning process at key stages. | | | |
| | We give staff the opportunity to take well-managed risks and explore innovative practices. | | | |
| | We have appropriate governance arrangements and contracts in place with providers. | | | |
| | Our planned solutions take a long-term view. | | | |
| | We actively shape the supply and provider market. | | | |
| | We use all of the information on potential demand to understand need and to drive change in service design. | | | |
| | We hold accurate and comprehensive data on people with learning disabilities to allow us to design future services. | | | |
| We commission for services that are designed to improve outcomes, not just reduce cost. | | | | |

| Key aspects of Strategic Commissioning | Characteristics of effective strategic commissioning | We are good at this | We need to improve this | We do not do this |
|--|---|---------------------|-------------------------|-------------------|
| Monitoring and evaluation <ul style="list-style-type: none"> • Managing performance • Supporting choice • Seeking public and users views | We can clearly evidence financial benefits of our commissioning process. | | | |
| | We have the metrics in place to evidence the improvements gained through the commissioning process. | | | |
| | We analyse data to evidence improvements in people's wellbeing and social outcomes. | | | |
| | We prioritise outcome based commissioning over output based commissioning. | | | |
| | We involve people with learning disabilities in agreeing what and where we need to improve. | | | |
| | Our strategic commissioning strategy clearly articulates our outcome measures. | | | |
| | Performance is effectively monitored and scrutinised internally and externally. | | | |

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