

Kernow Clinical  
Commissioning Group



# Strategic Commissioning Intentions and Delivery Plan

Developing Supportive Lifestyles

V3.0  
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## **Table of Contents**

<b>1. Executive Summary</b>	<b>3</b>
<b>2. Introduction</b>	<b>6</b>
<b>2.1 Aims for Supportive Lifestyle services</b>	<b>6</b>
<b>2.2 Objectives for Community Support services in Cornwall</b>	<b>7</b>
<b>3. The Position in Cornwall</b>	<b>8</b>
<b>3.1. Health and Social Care commissioning</b>	<b>8</b>
<b>3.2. Universal wellbeing services</b>	<b>9</b>
<b>3.3. Community based care and housing solutions</b>	<b>10</b>
<b>4. Community support in Cornwall</b>	<b>10</b>
<b>4.1. Outline delivery model supportive lifestyles</b>	<b>12</b>
<b>4.2. Outreach and support activities in the community</b>	<b>14</b>
<b>4.3. Continuing Healthcare (CHC)</b>	<b>14</b>
<b>5. Our commissioning intentions</b>	<b>14</b>
<b>6. Strategic delivery plan</b>	<b>18</b>

## 1. Executive Summary

The delivery of these intentions is key to the transformation of adult health & social care services and will support the continued movement towards personalisation, giving people choice and control and working towards independent living.

The aim is to ensure community support services provide quality; outcome focussed support and promotes opportunities for individuals to engage in purposeful activities in their local communities. To achieve this aim there will need to be an increased focus on promoting independent living skills and community resilience. This includes enabling providers to have flexibility to co-design support services through a person centred approach to develop independence, utilise community resources and to reduce social isolation and improve health and wellbeing.

The strategic approach to community support and building supportive communities has been and continues to be developed through engagement, consultation and partnership working with a variety of statutory and voluntary agencies as well as the community, this includes:

- People with eligible social care needs and their families/advocates
  - people with learning disabilities, physical disabilities, autism, mental health needs and/or sensory needs
  - other client groups with eligible social care needs
- Care and Support Providers
- NHS Kernow Clinical Commissioning Group
- Carers Groups

The purpose of Community Support & Supportive Lifestyles Commissioning Intentions document is to:

- Support an understanding of the strategic direction for Community Support Services across Cornwall.
- Help plan, design and shape the market across Cornwall to ensure that there are a range of appropriate quality care and support options that promote enablement, independence, social inclusion and use of community assets.
- Enable Cornwall Council to adequately plan for future expenditure for community support services and to ensure the service delivery approach provide outcomes and innovative support solutions.
- The future approach of community support will be strength based and support individuals with daily living and independence skills
- Respond to the increasing demand upon community support services due to multiple and / or complex needs of vulnerable individuals.

These commissioning intentions have been developed with Supported Living service providers, people that use the services and health and social care partners across Cornwall. In summary, these intentions will ensure that;

- People are supported proactively to access health and social care support through effective and accessible information, advice and guidance.
- Services are delivered in partnership to deliver solutions so that individuals feel safe within their community and they maximise independence building and enable individuals to achieve identified.
- Provide quality community support services that prevent admission to residential care homes, nursing homes or specialist hospital/treatment centres.
- Ensure that effective Business Systems and tools are robust and support the aims and objectives of the Commissioning Intentions and Service Delivery Model.
- People are supported to maximise their funding options and identify support solutions that offer choice and best value for money.

**AIM:** Improve outcomes for vulnerable people through enabling choice, personalisation and independence

**COMMISSIONING INTENTIONS**

**•Benefits**

**INFO, ADVICE AND GUIDANCE:** Easy to understand and accessible information, advice and guidance is available

- Availability & accessibility of information and advice for vulnerable adults
- Options are communicated to people with care & support needs
- People with care and support needs are supported to understand their options
- Choice and control is increased

**Support and Housing Options:**  
Increase high quality community support & housing options

- A range of community based support services are available that promote independence and community participation
- Good quality accommodation across community networks
- Commissioned quality support services that provides enablement
- Reduced specialist hospital/assessment treatment admissions
- Residential care home admissions

**Personalisation**

- All services are outcome focused & person centred
- All services provide enablement and promote independent living skills
- People have a choice of how the access support, Direct Payment, Commissioned or IPC
- Arrangements are in place with providers for ISF

**Funding Solutions & Quality Assurance**

- Support people to take control their own personal budgets and support solutions
- Will support people to have more choice about support solutions
- Will ensure expectations of service provision are realistic, well managed and achievable.
- Will enable financially sustainable diverse quality service provision
- Will support skilled workforce recruitment and retention
- Will ensure support in the community offers the best quality and efficient use of available resources.

## 2. Introduction

Everybody in our community has the right to feel as healthy, safe, well and live as independently as possible. Most people will have access to a range of opportunities, services and organisations that help them to achieve these outcomes and will be protected from abuse and neglect. This might be through their social network, family or employment circumstances, and through access to universal services or more targeted services.

The Commissioning Intentions for Supportive Lifestyle services have been developed with a range of stakeholders including people accessing services, carers, health and social care commissioners, other professionals and providers in Cornwall. It draws conclusions from evidence including the Joint Strategic Needs Assessment, data and feedback from individuals accessing these services.

### 2.1 Aims for Supportive Lifestyles Services



#### Our Aims

We will help adults with support needs to find services that promotes their health and wellbeing so they can live as independently as possible.

We will ensure services are safe and effective and delivered in ways that improve people's life experiences and outcomes.

We will protect the most vulnerable and ensure people are supported to live the lives they want in their communities, with the best possible opportunity to improve their physical and mental wellbeing and to stay safe.

**In scope:** The focus for future of Supportive Lifestyle Services is the development and use of a wide range of flexible support services that promotes independence, social inclusion and community assets. Support

services will include a strength based approach providing quality support for adults with assessed eligible health and social care needs delivered in the community. These services may be a few hours per day or week or up to 24 hour wrap around support. The level of support will be determined by a person's assessed need. This includes:

- ✓ people with learning disabilities and/ or physical disabilities and/ or autism and/ or mental health needs and/ or sensory needs
- ✓ people with age related illnesses, including dementia
- ✓ people in transition from children's to adult services
- ✓ other client groups with assessed eligible social care needs

**Out of scope:** It is essential that all preventative, care and support and housing services are seen as a component of a whole system approach to the provision of care and support, from low level early intervention services to residential care homes. However, this document does not cover strategic commissioning intentions related to:

- ✗ Residential care homes
- ✗ Community solutions, such as Day Services
- ✗ Prevention and early intervention services (including homelessness)
- ✗ Children's and family services

## **2.2 Objectives for Community Support Services in Cornwall**

Community Support services are designed to help people to remain independent within their own communities, for as long as they choose. This aim will be achieved through the following objectives:

- Support people to live in their own home within their community
- Create a diverse, stable, sustainable market that will offer people that use services choice and control over their lives
- Embed key principles and drivers to meet the requirements set out in national and local legislation, guidance and directives.
- Ensure consistent, good quality Community Support services, which are fit for purpose, flexible and responsive to crisis
- Ensure a quality Provider market for Community Support across all sectors
- Introduce standardised service specifications for Community Support services for Health and Social Care
- Ensure effective, robust contract and performance monitoring methods for Community Support services are aligned across sectors

- Encourage innovation through co-production, joint working and investment into sustainable solutions that enable independence and creative support solutions
- Encourage increased use of Assistive Technology and other creative alternative delivery models to support people to be as independent as possible
- Join up Health and Social Care commissioning to ensure “whole system” solutions are realised including internal processes
- Reduce avoidable specialist hospital and assessment and treatment centre admissions
- Reduce barriers to cross-sector information pathways and improve access to shared care and support plans.
- Embed personalisation through co-production of person centred, outcomes focussed services that build social capital and include strategic stakeholders i.e. voluntary and community sector
- Ensure active encouragement for people to take responsibility to improve their own health and wellbeing, including meeting their daily needs and social and emotional well-being
- Implement robust procedures to protect people from abuse or neglect

These aims and objectives link closely with other strategic partners such as Cornwall Housing, Cornwall Council and Isles of Scilly Safeguarding Adults Board, Devon and Cornwall police, Primary Care Trusts, Acute Hospital Trusts, other Cornwall Council service areas, other NHS service areas and the Voluntary Sector.

### **3. The Position in Cornwall**

#### **3.1 Health and Social Care Commissioning**

There are four principal routes to accessing health and social care support:

- Children who currently receive services through Children, School & Families become an adult, this is called transition.
- When people are discharged from hospital following a period of ill health, medical crisis or trauma
- GP or Medical Professional referral.
- When people, either through age or disability, realise they need additional support.

**Assessment:** For the majority of people requiring social care services in their homes, Cornwall Council’s Access Team will be the first contact with Adult Social Care. Anyone can make a referral on behalf of someone who needs care and support. An individual’s health and social care needs are assessed in line with legislative requirements and they will be advised how



they can access support to meet their needs. People who are assessed for social care support but fall below the threshold of needs eligibility, as set out in the Care Act 2014, will be sign posted to information and advice to enable them to access support to meet their needs in other ways.

**Charging:** If an individual is assessed as meeting the threshold for social care support a detailed conversation will follow. This will help the individual work out what support would help and will include a financial assessment to identify any financial contribution the individual may be legally obliged to make towards the cost of their care. People eligible for healthcare support from NHS Kernow are not required to contribute to the costs of their care.

**Joint Commissioning:** By NHS Kernow and Cornwall Council working together there is potential to deliver additional benefits to the people that use these services, such as:

- streamlined procurement
- reduction in duplication
- cost effectiveness
  
- aligned systems person centred outcomes
- Joint investment in innovation
  - Rationalisation of commercial arrangements
  - Alignment of pricing structures and contractual requirements
  - Collaborative market shaping
  - Improved choice, control and continuity of support
  - Continuous improvement of personalised support services
  - Coproduction of a modern workable 'whole system' approach
  - Growth and sustainability of high quality service provision

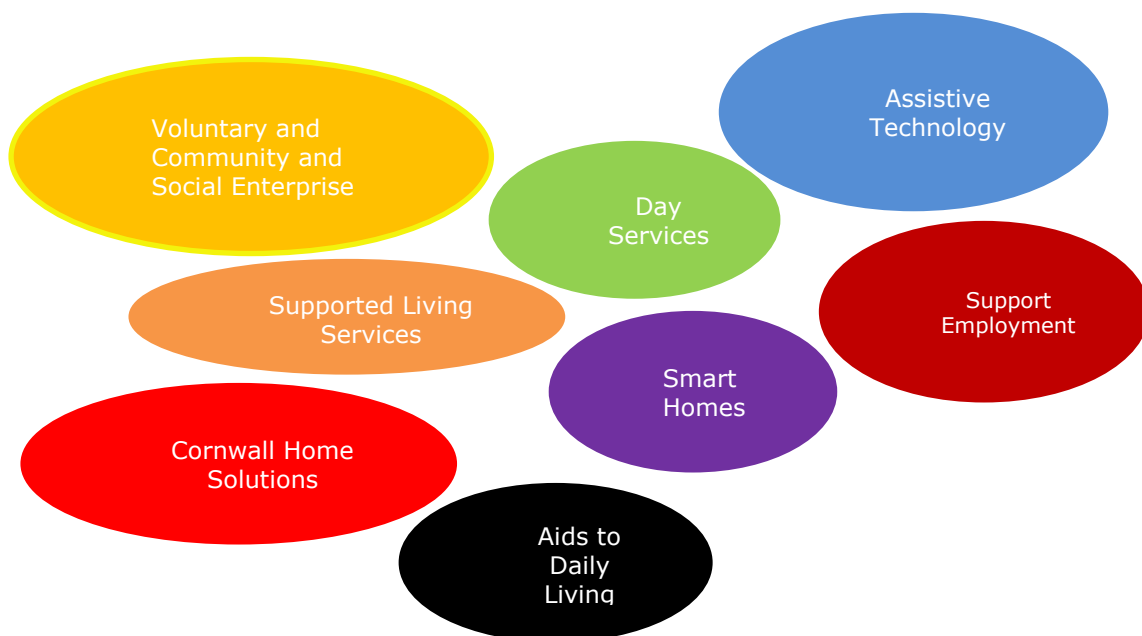
NHS Kernow and Cornwall Council are committed to working jointly to commission Community Support services that have aligned contract requirements, charge rates and monitoring procedures as part of the continued development of strategic commissioning for the whole system

### **3.2 Universal Wellbeing Services**

This area of provision includes all people living in our communities. The focus is on maintaining independence, improving physical and mental health and promoting wellbeing. Factors include appropriate housing, universal access to good quality information and advice, supporting safer neighbourhoods, promoting good health and active lifestyles and combating discrimination.

Services and policies that promote wellbeing focus on the importance of living healthy lifestyles and recognise the important link between work and health. Good employment and meaningful opportunities and healthy environments help to prevent deterioration of mental and physical wellbeing and enable people to remain independent as possible. Health Promotion services encourage healthy life styles through assistance to stop smoking, reduce alcohol intake, increase healthy diet and exercise, and awareness raising regarding conditions such as diabetes.

### 3.3 Community Based Care and Housing Solutions



## 4. Community Support in Cornwall

Community Support services assist vulnerable adults with eligible social care needs to live ordinary lives. A key outcome of Community Support services is to enable working age adults to have some form of paid supportive employment, learning or other purposeful activity and to live in a home of their own.

A more flexible approach to commissioning and contracting these services will assist providers to deliver more dynamic services that allow fluidity to deliver appropriate and proportionate support in response to fluctuating needs. Community Support enables individuals to have choice about the support they receive and how they receive it. This could be through a local authority commissioned support package, using a Direct Payment or through an Individual Service Fund or Individual Personalised Commissioning approach.

This care and support may be for periods of time in the day or night but also may include support for 24 hours a day, 7 days a week on an individual

basis or in shared accommodation. This provision is available to all eligible adult social care groups but the majority of people accessing Supported Living Services are people with Learning Disabilities and/or Autism. Providers are commissioned to offer flexible and solution focussed support to meet individual's needs. Providers offer support that promotes independence by encouraging people to take greater responsibility for their own needs and to develop their daily living skills as far as possible.



These services are funded through a pooled budget with NHS Kernow and delivered by external providers through the current framework agreement. The current service provider market consists of commercial, charitable and voluntary organisations. NHS Kernow also separately commission alternative providers on occasions for fully funded health packages. Each organisation has separate contract requirements, price structure, brokerage processes and monitoring procedures. However, both organisations are committed to jointly commissioning these services in the future.

**Health Buyers and Brokerage:** Support planning for social care is undertaken by Children's Families and Adults (CFA) as part of the care management role. Brokerage is also undertaken by CFA through the in-house brokerage team who contact service providers to place packages of care using a process agreed with contracted Providers.

NHS Kernow approach the Community Support market through the Health Buyer Team. Health Buyers negotiate the terms and pricing of an award of a packages of care dependent on a person's needs and the complexity of the service and skills needed to support the individual.

NHS Kernow and Cornwall Council have expressed commitment for these two service teams to align their processes and work collaboratively to support their future agreed commissioning intentions.

**Direct Payments:** In Social Care people can choose to take their assessed Personal Budget as a Direct Cash Payment and can undertake their support planning and purchase services directly themselves. Support to manage the financial requirements of purchasing services through a Direct Payment

can also be obtained from independent organisations set up to deliver this role.

Currently, the option of a Direct Payment is restricted to people that have the capacity to manage their own support planning and budget, however, with the development of Individual Managed Funds (IMF) or Individual Support Funds (ISF) and Individual Personalised Commissioning (IPC) being progressed elsewhere in the UK, Cornwall Council will review the option to appoint independent organisations to directly support and manage finances of individuals who lack capacity to manage their own Direct Payment in the future. This would provide more choice and control to the individual requiring support.

It is anticipated that increased use of Direct Payments that enable more choice and control for individuals purchasing their own support is likely to continue to increase year on year in Cornwall. Cornwall Council will continue to review and consider systems available to streamline and implement smooth application of Direct Payments, such as but not limited to, pre-paid cards and managed account options.

In March 2017 there were c.1600 people in Cornwall in receipt of a Personal Budget in the form of a Direct Payment.

**Personal Health Budgets:** In Health Care, patients can choose to receive funding for their care through a Personal Health Budget (PHB) and can undertake their own support planning and purchase services directly themselves. NHS Kernow is supporting more people to access PHBs and this is a clear direction for the future.

**Quality Assurance:** Cornwall Council and NHS Kernow utilise preventative, reactive and development measures in respect of improving community support services commissioned. Information about performance, concerns and issues are shared across both commissioning bodies and with the Care Quality Commission (CQC).

Preventing poor performance may include carrying out quality assurance assessments and informing and consulting the market on best practice and legislative requirements. Reactive measures may include working with service providers in respect of responding to any incident reported to each body or working with providers in respect of any safeguarding incidents reported. Developing improved services may be achieved by setting actions to improve standards, develop learning and sector-wide standards, work collaboratively and support service providers.

#### **4.1 Outline delivery model Supportive Lifestyles**

##### Scheme/Core & Cluster Accommodation & Support

- Supported Living Schemes/&/ or Core & Cluster Accommodation will comprise of individual flats for each occupant and a shared communal area where activities may be delivered & tenants have an opportunity to socialise with other tenants.

- When an individual has made a choice to move into a Supported Living Scheme commissioned by Cornwall Council the support element of a person's offer involves 'core hours' (or shared hours). Everyone living in that particular building receives support hours from staff to enable them to meet identified outcomes and to ensure they are kept safe.
- If an individual chooses a specific Supported Living Building they will not have a choice of provider for their 'Core Hours'. Individuals will be supported to choose the service they wish to meet their identified needs in line with Care Act requirements.
- Additional support requirements that a person may need will be delivered through a Direct Payment or Individual Service Fund, via which they may choose which provider(s) they would like to use to meet their preferred outcomes.
- Individuals will have a tenancy agreement with a social housing provider and their support will be delivered by a separate support provider

#### Individual Service Funds

An Individual Service Fund (ISF) is a different way for an eligible person to purchase their care from a home care provider. Using an ISF, the person has choice and control over the support they need without having to take on the responsibility of managing the money.

The ISF gives the person with needs much greater flexibility and choice with the agencies that actually provide the service.

Cornwall County Council will give the money (the agreed personal budget) directly to the home care provider, on a monthly basis. We would then expect the agency to work directly with the person to agree how they would like their care and support arranged.

#### Integrated Personal Commissioning

Integrated Personal Commissioning (IPC) is a nationally led, locally delivered programme that is supporting healthcare empowerment and the better integration of services across health, social care and the voluntary and community sector.

The programme aims to ensure that services are tailored to people's individual needs, building on learning from personal budgets in social care and progress with personal health budgets. Through IPC, people, carers and families with a range of long-term conditions and disabilities are supported to take a more active role in their health and wellbeing, with better information and access to support in their local community, and greater choice and control over their care. They will receive the money to meet both their health and social care needs as an integrated budget and be supported

to identify both their health and social care needs and be supported to meet both sets of needs in a seamless and integrated way.

## **4.2 Outreach and Support Activities in the Community**

Outreach and Activities in the Community are activities which a person may participate in so as to meet their agreed Outcomes. These activities may require the support of a care provider in order for the person to participate. For example, a care provider may need to accompany a person to an activity run by a community group in order for them to remain safe and supported. Activities are not funded by a Personal Budget but the support provided in accompanying the person to the activity is included in the scope of Home Care services.

## **4.3 Continuing Healthcare (CHC)**

When an individual has an identified ongoing Primary Health Care Need their support can be funded through NHS Continuing Health Care (CHC). This is care provided outside of hospital that is arranged and funded by the NHS and is exempt from charge to the individual using the service irrespective of their financial position. It is only available for people who need ongoing healthcare, meet the eligibility checklist criteria for consideration and are approved for funding by the CHC panel through the application of a Decision Support Tool. Further information about CHC eligibility, applications and funding can be found at <http://www.nhs.uk/Conditions/social-care-and-support-guide/Pages/nhs-continuing-care.aspx>

If NHS Continuing Health Care status is awarded in someone's own home, it will cover social and health care costs. Currently, care provided at home and funded through CHC can be provided through a care provider commissioned by NHS Kernow or purchased directly using a Personal Health Budget.

If an individual has a disability, or is diagnosed with a long term illness or condition, this does not necessarily mean that they will be eligible for CHC. The individual must have a primary health need, where, taken as a whole, the nursing or other health services required by the individual cannot lawfully be provided by social services or are beyond those that a local authority can be expected to provide. (Department Of Health, 2010)

There is an assessment process that must be applied to all people accessing CHC funding. Four key areas relating to the individual's health needs are assessed. These include nature, complexity, intensity and unpredictability. Healthcare staff use a Decision Support Tool in order to consider these areas, and assess the individual's eligibility for CHC funded care.

## **5. Our Commissioning Intentions**

Legislation, national policy drivers and local strategies and plans have also been analysed in order to inform the development of our Intentions.

**Our Aim:** Improve outcomes for vulnerable people through enabling control, personalisation and independence

**Information, Advice and Guidance:** Easy to understand and accessible information, advice and guidance is available

- People and other stakeholders have told us that they wanted more support to navigate their way through health and social care systems.
- Clear concise easily understandable information about available services, costs and pathways are required to enable people to make informed decisions about how they may choose to meet their care and support needs.
- Information about local clubs and activities that support vulnerable community members should be provided. Support for enabling local areas to develop their own community assets building resilience and promoting neighbourliness will promote good health and wellbeing provide alternative choice and care and support solutions.

**Partnership Solutions:** Commission services that work in partnership to develop the market to deliver solutions that maximise independence and enable individuals.

Care assessment and support will focus on what a person can do rather than what they can't. Often encouraging and enabling people to use their own assets, e.g. family, friends and community support delivers a longer term solution that empowers people to achieve positive outcomes through maximising their own levels of independence.

Supply markets should be encouraged to be diverse in their approaches to providing support and to make use of alternative types of support that enable positive outcomes for people in receipt of their services.

Moving towards outcomes and enablement, embracing and encouraging new technology and innovations developed as health and social care solutions will ensure that people that need support with personal care, daily living skills and healthcare tasks have an available skilled workforce to respond effectively to these demands in a more proactive way.

Multi-agency joint working will be required; working in partnership will streamline back office process and enable the delivery of support services that meet the outcomes and goals of individuals receiving services

**Whole System Solutions:** Commissioning services in a truly integrated way will reduced drift and delay in decision making and ensure shared accountability to meet the needs of vulnerable adults.

Stakeholders in the health and social care system in Cornwall have consistently reported that poor communication across the health and social care system disadvantage people in need of support receiving fit for purpose services. By enabling a sharing of information between those people caring for individuals whether in a professional or informal capacity

will ensure that planned support interventions are timely and effective delivering rapid responsive services that can achieve a person's enablement potential quickly.

Improved sharing of information, commissioning of flexible services and joint working to develop effective support plans will enable better outcomes for vulnerable individuals and prevent placement in residential care settings.

Working in partnership will encourage a positive transfer of knowledge and skills of best practice approaches between workers in the community and across the care and support sector in Cornwall.

Support levels need to be flexible to adapt to the fluctuating needs of individuals, working in partnership will enable more responsive services that ensure people receive the right level of quality care and support in the right setting and that it is person centred.

**Business Services:** Health and social care contracts and business systems and Service Providers business approaches will be robust, enable collaborative working and support delivery of the Commissioning Intentions and System Delivery Models.

Improved use of technology and more effective resource utilisation will support business functions minimise duplication and promote more effective service delivery.

Market development and workforce sustainability will be a focus to ensuring that supply and demand are managed effectively and that provision and resource is maximised.

Knowledge of local community assets and whole system care and support solutions will support joined up thinking and improve choice and control for individuals, as well as building individuals' resilience.

Stakeholders report a lack of consistency in approach from public sector commissioners and system controls and processes make it difficult with business sustainability planning and resilience building. Public service commissioners are committed to ensuring cross-sector consistency for Community Support services with alignment of processes and requirements and by working together to drive good performance standards across the care sector.

**Funding:** We must ensure funding is effectively utilised across the whole system enabling Community Support services to offer best value.

People will be supported to take control of their own personal budgets so they have more choice about support solutions. Information about support and care services in local communities will be easily accessible and understandable. This will ensure that support chosen offers the best value solution.

Supply market development, optimisation of business costs and commitment to growth of good quality, diverse services will enable financial sustainability of the provider market.



Co-production of an operating model and funding methodology for Community Support services in Cornwall will achieve best quality and value solutions.

A commitment to the development of career pathways and attractive employment terms and conditions for care and support workers will aid recruitment and retention of the Community Support workforce in Cornwall.

## 6. Strategic Delivery Plan

		Commissioning Intentions for Community Support Services	Delivery Method
<b>COMMISSIONING INTENTIONS</b>	Information and Advice	<ul style="list-style-type: none"> <li>• Accessibility &amp; availability of information &amp; advice is improved</li> <li>• Options are communicated to people with care &amp; support needs so they can make informed decisions</li> <li>• People have easy to understand information on support, community opportunities &amp; housing options so they can make informed decision's</li> </ul>	<ul style="list-style-type: none"> <li>• Support pathways embedded in health and social care systems</li> <li>• Care and Assessment workers enabled with care solutions information</li> <li>• Operational staff have a range of easy read/accessible resources to support individuals to make informed choice</li> <li>• Service Providers commissioned to empower people to access community assets and support solutions available to them</li> <li>• VCSE provider commissioned to develop Third Sector</li> <li>• Providers use a range of communication AAC methods</li> </ul>
	Housing & Support Solutions	<ul style="list-style-type: none"> <li>• A range of community based support is available that promotes community participation and independence</li> <li>• Good quality housing accommodation</li> <li>• Quality commissioned support services that provides enablement</li> <li>• Reduced specialist hospital/assessment &amp; treatment admissions</li> <li>• Reduced residential care home admissions</li> </ul>	<ul style="list-style-type: none"> <li>• Housing &amp; Support Project links with housing partners &amp; social landlords</li> <li>• Three conversation model for care and assessment will be implemented.</li> <li>• Development of assistive technology to support enablement</li> <li>• Effective co-production/ engagement methods will be adopted for development of community support approaches</li> </ul>

<b>Personalisation</b>	<ul style="list-style-type: none"> <li>• All Services are outcome focussed &amp; Person centred</li> <li>• All services provide enablement &amp; promote independent living skills</li> <li>• People have a choice of how to they access support, Direct Payment, Commissioned Service or IPC</li> <li>• Arrangements are in place for Individual Service Funds (ISF)</li> </ul>	<ul style="list-style-type: none"> <li>• Development of shared information tools such as Care Passports, etc.</li> <li>• Development of a Shared Data Platform for Health and Social Care</li> <li>• Aligned contract terms and service models will be commissioned by health and social care partners</li> <li>• Development of responsive systems that enable shared accountability for delivering person centred services</li> <li>• Opportunities for training and knowledge sharing solutions will be improved</li> </ul>
	<b>Funding Solutions &amp; Quality Assurance</b>	<ul style="list-style-type: none"> <li>• Support people to take control of their own personal budgets &amp; support solutions</li> <li>• Support people to have more choice about support solutions</li> <li>• Ensure expectations of service provision are realistic &amp; monitored</li> <li>• Ensure support in the community offers the best quality &amp; most efficient use of available resources</li> </ul>

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Adults Transformation and Commissioning Service

Children's Families and Adults

August 2017

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