

## **Joint Protocol between National Centre for Independent Living (N.C.I.L) & Association of Directors of Social Services (A.D.S.S.) for the provision of Centres for Independent Living (CILs) and User Led Support Services.**

### **Part 1 Principles**

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The National Centre for Independent Living (NCIL) and the Association of Directors of Social Services (ADSS) are committed to promoting independent living and the social model of disability.

In January 2005 the Prime Minister's Strategy Unit published a report called "Improving the Life Chances of Disabled People". This described 'independent living' as:

"about providing disabled people with choice, empowerment and freedom."

The report recommends capacity building in existing user-led Centres for Independent Living (CILs) and the development of new CILs with the specific recommendation that:

"By 2010, each locality should have a user-led organisation modelled on existing CILs."

"Improving the Life Chances of Disabled People" also refers to the 2002 protocol, between NCIL and the ADSS in relation to independent living and the commissioning of direct payment support services. Through this protocol both organisations recognise that Support Services are key to the success of Direct Payments.

Over the past few months' representatives from ADSS & NCIL have reviewed the document in the context of recent policy developments<sup>1</sup> that set out the intention to put users and carers more in the driving seat of social care.

The Department of Health White Paper "Our Health, Our Care, Our Say" suggests that Direct Payments have a central role in the new 'Vision for Social Care':

Department of Health Direct payments guidance states that the provision of a support service is key to the successful implementation of Direct Payments and that "Support provided through voluntary/recipient-run organisations has been shown to be particularly effective and valued by recipients."<sup>2</sup>

There is a clear correlation between Direct Payments Support Services controlled and run by disabled people and successful implementation of Direct Payments. 7 out of 10 of the top performing local authorities on Direct Payments contract with a user-led support service. In 2004 Direct Payments became a key performance indicator and therefore has the potential to affect councils' 'star ratings'.

**ADSS and NCIL continue to recommend to local authorities that they support the development and expansion of local, user-led support services. We strongly recommend that local authorities develop policies that foster a level playing field for disabled people's and carer's organisations to compete in the tendering process.**

Local authorities should seek to ensure and demonstrate that their contracting procedures do not discriminate against small user and carer led organisations.

Local policies should recognise the added value which such organisations can offer in terms of credibility with users; raising the standard of quality assurance and working towards identified independent living outcomes.

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<sup>1</sup> Government White Paper on disabled people's life chances 2005, Health and Social Care and White Paper, Our Health, Our Care, Our Say 2006

<sup>2</sup> Department of Health, Policy and Practice Guidance 2003

This protocol recognises that:

- Centres for Independent Living (CILs) and other user led organisations including organisations of people with learning difficulties and mental health services users continue to be an important part of the development of independent living and have considerable expertise in the area
- Support should be commissioned locally towards enabling independent living and should embody the ethos of independent living
- Direct payments are primarily a means to independent living
- Successful use of direct payments relies on timely and high-quality access to appropriate support
- Issues raised by carers organisations need to be respected and addressed. At the same time, we recognise that disabled people like their non-disabled peers can be heavily influenced by significant people who surround them. It is therefore vital that local authority commissioning protocols includes requesting carer led organisations to embrace and promote concepts such as independent living, the social model of disability and the self-determination of disabled people.

When this protocol refers to “disabled” people, we mean how society disables people by the way that it treats and excludes whatever their impairment. The focus is on how and where society fails to include disabled people by “disabling” attitudes and barriers and not on what disabled people cannot do.

## Part 2

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### Recommendations for Contracting

**In principle NCIL and ADSS believe that support services are often best provided by local user and carer led organisations. It must be acknowledged however that some areas of the country lack local user led, voluntary sector organisations, able to take on the role of providing the local support services. In addition, where such organisations do exist, they may require support and assistance to build up their skills and capacity to become a viable competing provider. Supporting the creation and development of user led organisations would directly link in to the key target 4.3 of the “Improving the Life Chances of disabled people” White Paper (that each locality should have a user-led organisation modelled on existing CILs).**

Local disabled people’s organisations need reliable sources of funding. Local authorities should recognise the wider role of organisations of disabled people, people with learning difficulties, mental health service users and carers when carrying out their duty to promote disabled people’s equality. This will also be increasingly relevant as local authorities develop their local Disability Equality Plan (DEP), as set out in the Disability Discrimination Act (DDA) 2005 duties.

We acknowledge, however, that local authorities must also conduct contracting within the boundaries set by their procedures and Standing Orders and that they have a duty to abide by the principles of value for money.

We also recognise that as eligibility for direct payments has widened, support organisations need to be able to further develop their skills, policies and practices further, to include all users of services including carers and mental health service users who have so far been poorly represented in the take up of direct payments.

Where possible and appropriate we would encourage Local Authorities to work with CILs to support them to become more inclusive and responsive to the support needs of under-represented groups. In some cases it may be appropriate to commission specialist support services aimed at particular groups of people. Local Authorities should engage local user and carer led organisations and communities of service users in deciding how best to commission local support services. Whatever model is developed, NCIL and ADSS believe that involving

service users and carers in the design and delivery of services is of vital importance and will encourage better quality support services.

NCIL is committed to helping CILs and support organisations to increase their capacity, develop their services and become representative of all disabled people including people with learning difficulties and mental health service users. Not all disabled people are service users.

When setting up CILs and support services, we urge local authorities to:

- Ensure that such organisations and services have appropriate expertise and capacity to deliver effective support. Wherever possible, commission these services from user-and carer controlled organisations
- Consult users, carers and potential users about the nature of the support they require
- Include local representative organisations of users and carers in the consultation process
- Work with user led organisations to develop capacity: e.g. by facilitating “pump priming” or partnership working arrangements
- Ensure that local contracting procedures do not discriminate unfairly against small / new / user-led organisations
- Ensure that value for money considerations take account of the added value often contributed by local organisations representing potentially eligible users.
- Ensure that service specifications for contracts / service level agreements embody the ethos of independent living with explicit Independent living outcomes
- Consider using a restricted / selective tender list to target organisations controlled by users
- Consider effective interim arrangements where a user-led support service does not yet exist: this could include seconding a

member of staff on a short-term basis or contracting with a CIL or support scheme in a neighbouring authority.

- Where no user led organisation exists provide seed funding to cultivate their development.

We urge organisations that are considering making a bid to run a Direct Payments Support Service to make sure they are able to offer the following support to users:

- Work to the social model of disability and independent living philosophy
- Access to advocacy – we believe that independent user led advocacy is preferable wherever possible. \*
- Peer support
- Generic support that accommodates the diversity of the community
- Work on a basis of equality and inclusion
- The ability to develop responsive targeted support for excluded groups of people who are underrepresented as disabled people in the take up of direct payments e.g. mental health service users / people living in residential care

\* NCIL and ADSS support the approach to direct payments advocacy laid out in Department of Health Direct Payments guidance 2003 which states “a support service may be well placed to act as an advocate for local recipients as a group”

“However it may be preferable to separate any support role from an advocacy role on behalf of individuals to avoid any conflict of interest”  
p.11 para 36.

In practice we recognise that there may sometimes be a tension between support to use direct payments and the advocacy which service users may require to represent their interests in liaison with Social Services Primary Care Trusts and other organisations.

Wherever possible these two equally important services should be provided from different sources.

NCIL and ADSS are committed to supporting Local Authorities to honour the spirit of this agreement.

**June 2006**