



# Sky's

# the Limit

## Phase 1 Report



Changing Our Lives works in partnership with disabled people and people with lived experience of mental health difficulties to find solutions to social injustice and health inequality.

Our Values

- **People First**  
All people should be seen as people first. We should not be seen simply in relation to disability or a mental health difficulty. These things should not be used to define us as a person, segregate us or remove us from society, or limit us in any way.
- **Independence**  
We are all inter-dependent; we all need support in our lives. No one is too disabled or too affected by mental health difficulties to lead an independent life.
- **Equal rights**  
All people are citizens in their own right and have the same human, legal and civil rights as other members of society.
- **Communication**  
All disabled people, even those individuals who do not use words, communicate and have a right to be heard and supported in their individual communication needs.
- **Bravery**  
As a team and an organisation, we are brave in the work we do. We know that changing cultures, attitudes and behaviour takes time and patience but must be met with determination and a will to succeed.

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- Person Shaped Support (PSS) Wolverhampton Shared Lives Scheme
- The Priory School, Staffordshire
- Inspire Team, The Gem Centre, Wolverhampton
- Progress Care Solutions, Wolverhampton

Listen up!



To bring this report to life we have included some audio files of the people involved sharing key thoughts, comments, reflections and thinking. Please listen to what people have to say, simply by clicking the link next to the sound image.

# Summary

The Sky's The Limit pilot project emerged out of a desire to do better for young disabled people who are seen as having complex needs, and to make a good, ordinary, adult life a reality for them.

We define an ordinary life as being valued as people first, as loving family members, as rebellious teenagers, as paid employees, as community leaders, as home owners and tenants, as neighbours, as friends and partners.

Where disabled people are seen in society and have active lives in society. Not living in service land and hidden away from communities in segregated services with other disabled people.

An 'ordinary' life is faced with its challenges and responsibilities. Not kept away from any risk and being over protected. It's about taking risks, making mistakes, changing our minds and sometimes getting into trouble.

An ordinary life is one where disabled people are in control of their own lives and make their own choices about where to live, who to live with, who to have relationships with, where to work, how to spend their own money and what to do to both learn and have fun. Being in control of these things improves quality of life.

Sky's the Limit had two broad aims:

- To work with and empower young people and their families to take control over the transition process and their futures through person centred planning and choosing their own support, and
- To challenge and influence providers to raise their expectations in terms of ordinary life outcomes and become more person centred in their offer to young people.

Empower young people

Challenge and influence providers

The project was designed to pilot a model for working in coproduction with young people and their families that would put them in the driving seat of their own futures and open up more creative possibilities and wider options than traditional routes have offered in the past.

The Sky's the Limit project is a collaboration between Changing Our Lives, Wolverhampton Clinical Commissioning Group (CCG), the young people involved and their families. This process of coproduction has created a powerful driving force that has steered the direction of travel of the project throughout and extended the work beyond the original scope and into two further phases. These are currently being agreed and will be examined in two further reports.

This report presents an open, reflective and thought-provoking overview of the first phase of this work.





# Introduction

Growing up is a unique time when all young people are grappling with enormous physical, emotional and social change, and trying to make sense of themselves and the world with limited life experience and a brain that is still maturing.

Moving into adulthood can be a turbulent and confusing time, where feelings of great excitement, optimism and hope for a bright future are mixed with uncertainty, anxiety and fears about what might be ahead. Disabled young people are no different.

However, for young disabled people with complex needs there are many aspects of becoming an adult that are starkly different. Often they and their families experience a transition into adulthood that is clouded by low expectations, poor information, limited choices and opportunities, and frustrating and exhausting struggles with complex processes and a baffling system that stand in the way of good outcomes. Their contact with professionals is often characterised by attitudes that see the young person in terms of a list of needs, medical diagnoses, challenging behaviours, problems and risks, and dehumanising language that fails to reflect who the person really is as an individual.

Defining people in this restrictive way inevitably leads to the perception that they require specialist services that will compensate for their perceived deficits, but which are unlikely to result in full inclusion in society as valued and active citizens.

**"I had no transition support and when there was a transition meeting no one attended who knew Beth. I had people telling me it was college or nothing, then others telling me that Beth would not be able to go to college because of her epilepsy. I knew a woman who had a disabled son and he went to college and they both couldn't cope. I was really worried that this was our only option."**

***Sue, Beth's mum***

**"1 year ago Thomas' picture of transition was bleak. I was in a constant worry that we had no choices and no power. I was concerned that other people would make the choices and we would have no say in the matter."**

***Amanda, Thomas' mum***

Transitions into local or residential out of area colleges are assumed to be the only option after school with little thought given to how this will support the young person to move towards the life they want and little or no exploration of other options that could support them to achieve their goals. The result is often transition in to social exclusion and segregated services - anything but an ordinary life for the young adults they become.

These experiences of transition remain disappointingly common for too many young disabled people with complex needs, despite radical developments in national policy, law and guidance, and accompanying local developments. The view that some young people are too complex or too challenging to lead an ordinary life still influences the way they are supported to plan for their future.

Studies suggest that people with multiple or complex needs, people with the label of challenging behaviour, or people with profound and multiple learning disabilities are less likely to have a Person Centred Plan, and to benefit from personalisation, than people with less complex learning disabilities (NDTi 2015). However, where these approaches are taken, personalisation can produce more individualised, creative and positive outcomes for people with complex needs.

**"No one had ever explored different options with me and Beth. It was hard for me to see past Beth's behaviour and because of this the only option I thought was available was residential care. Even though I had looked into residential care I just couldn't do it. There was nowhere for me to go or no one to talk to, to help me manage Beth's behaviour."**

***Sue***

**"You are shut off from other parents...there isn't the chat on the playground like with my other children. You're isolated."**

***Amanda***

**"The professionals never talked about Thomas as Thomas. They would just read a report about him and focus on all the terrible things. Because of this I was always worried to talk about Thomas' bad days because I did not want him to be seen that way."**

***Amanda***

The Sky's the Limit pilot project was born out of a desire to challenge traditional routes through transition and work together in coproduction with young people and their families to create the future life that they really want - not a life in services. The intention was to use person centred approaches to facilitate the creation of person centred plans for each young person that would enable them and their families to be in the driving seat of the transition process.

The focus was on getting the right support rather than being slotted into services, and to stimulate providers to think in terms of the individual and their support. By shifting power to the young person and their families in this way, the intention was to establish from the start a relationship between the young person, their families and providers that would ensure that each person's support is created from a blank canvas, is individualised, flexible, and designed with only that person in mind.

# Background to Sky's the Limit

The seeds of The Sky's the Limit pilot were sown during a practice development session delivered by Changing Our Lives in Autumn 2015. Young disabled leaders co-delivering the session challenged the audience of education, health and social care practitioners, including commissioners from the CCG, to get ready to meet their expectations of an ordinary adult life. They asked people to identify what they could do differently to ensure that coproduction was embedded within their practice and to make an ordinary life happen for young people seen as having complex needs.

Wolverhampton CCG recognised that for many young people with complex needs in the city, their transition into adult life is characterised by limited choice and control and a focus on fitting them into a traditional, standard menu of services, which do not form part of a clear pathway to achieving an ordinary life. There was also a recognition that providers should respond differently and tailor support more creatively in order to help young people achieve their desired outcomes.

**"Having young disabled people tell us so passionately and clearly that what they want and expect is an ordinary life just like anyone else was a light bulb moment for us. We support many young people who have complex needs by putting them in services but we need to ask whether this helps them to achieve their goals and aspirations. We don't have to look too closely to realise that we can do better. We need to develop better ways of working with people if we are going to find solutions to the changing and increasingly complex needs of the people and communities we serve. So we were ready to take up the challenge to try something different – we have a responsibility to change commissioning, raise our expectations and make sure young people get support that helps them to have a good life."**

*Maxine Danks, Head of Service Individual Care Team, Wolverhampton CCG*

Wolverhampton CCG and Changing Our Lives set out to change this. They agreed to start small and pilot a different approach to transition with a clear aim of achieving more positive individualised outcomes for young people and their families. The focus of the pilot was on the young person as an equal citizen not as a service user, with the same rights to an ordinary life as anyone else, with dreams, ambitions and hopes for their future.

The pilot was primarily underpinned by human rights approaches and the values of an independent and ordinary life. It was also crucially set in the context of the opportunities possible through Personal Budgets, Personal Health Budgets and the NHS England Integrated Personal Commissioning programme to integrate support particularly for those with complex support needs and long term conditions.



**Jo Lake, Lead Nurse, Individual Care Team, Wolverhampton CCG, explains why the CCG approached Changing Our Lives.**



# What we did

We set out to work with 4 young people in transition and their families. The young people were chosen by commissioners at Wolverhampton CCG as individuals who are known to services and seen as having complex needs, which are likely to make them eligible for adult social care, and Continuing Care/ Continuing Healthcare Funding in the near future.

The youngest person was 17 at the start of the project, with 2 years left at school and to plan for the future beyond school. The other three young people were in their final year at school (18/19 years old) but with very little if anything in place in terms of plans for when they left. The pressure of time was therefore a factor for these young people and their families.

One young person was in the care of the local authority at the time of this work and had been for several years. As a result, photographs, direct quotes from him, his family, paid carers and support staff have not been included in this report. Another young person withdrew from the project at the end of Step 1.

**"The four young people that were chosen for The Sky's the Limit were all approaching or were in the process of transitioning from children to adult services. All of them had been referred to the CCG for an adult Continuing Health Care assessment with varying levels of need and support required. It was apparent to me at these assessments that unlike a lot of our adult caseload these young people and their families weren't concerned about funding streams, they were concerned about their future and what help and support was out there to help the young people to live a full life. On a couple of visits with these young people I heard the phrase "there really is nothing out there." This seemed plain wrong. We wanted to explore this situation for these four young people initially, but with a view to developing commissioning in the future so that there are improved opportunities for young people with varying levels of need and support to lead an ordinary life. Having met Changing Our Lives at an event they were just the obvious choice to help us with this."**

*Jo Lake, Lead Nurse Individual Care Team, Wolverhampton CCG*

An outline project plan was developed in partnership with the CCG, which had 3 discrete but simple steps:

## Step 1

**Person Centred Planning:**  
Who am I and what do I want for my future?

## Step 2

**Market Shaping Event:**  
How could you support me to live the life I want?

## Step 3

**Dragon's Den:**  
Who do I think can support me to live the life I want?

The following outlines the detail involved in each step, what happened and reflections from the families:

## Step 1

**Person Centred Planning:**  
Who am I and what do I want for my future? (February-May)

We spent time with the young person, their families and other key people in their lives to truly understand who the young person is. We explored what matters to them, their gifts, talents and passions, the things that are important to and for them, and crucially, to imagine and explore what is possible, being ambitious and bringing to life the young person's dreams, aspirations and hopes for the future.

As well as gathering information from key people, an essential part of the process was to spend time with the person in different settings and with different people to get a well rounded picture of them. Examples of where the Changing Our Lives team spent time with young people include in school, at home, out in the community, at work experience and at a session with the Inspire Team.

This process provides some of the answers to what the person wants to do with their life, but also how they want to be and need to be supported.

**"When the Changing Our Lives team came to meet me and my family we didn't quite understand what it was about. Once I did understand, it was like there was a light at the end of the tunnel. His brother and sister are more protective of Thomas. This was because we thought there was nothing out there for him; we thought he was just going to be penned up in residential college. There was a potential that he would be taken away from us and moved to a residential college far away as I was told there was only 6 places available in Wolverhampton."**

Amanda

**"It was great the way the Changing Our Lives team came out to get to know the young person and got them involved."**

Sue

**"When working with Changing Our Lives it was the first time anyone wanted to get to know Thomas for Thomas ....it gave me the hope that he can live his life to the full. It gave me hope that my son wouldn't be held down and penned up."**

Amanda

A Person Centred Plan (PCP) and Person Specifications for support staff were produced with each young person and their families from this work. The PCP was used to create an animated film for each young person that brought to life his or her character, their passions, strengths and aspirations for their future.

In addition to finding out about the young person the Changing Our Lives team explored with the young person and their families the different options and possibilities that could be ahead. This included stretching their thinking, raising their expectations and aspirations, inspiring them with stories of disabled people who live an ordinary life and explaining their rights and the mechanisms that can make it possible.

This step took place over a period of 4 months, from February to May. Time was spent with the young person in their schools, at home with families and out in the community. The team spoke with teachers, support staff and any other professionals involved in the person's life. They also worked closely with social workers as much as possible from the beginning of the pilot.\*

Two members of the Changing Our Lives team worked with each young person.

*\*For each young person, it is estimated that COL team members spent approximately:*

- 15 hours with each young person
- 12 hours with families. For the young person who lives in a children's home this is time with mum plus time with support staff
- 10 hours with other professionals
- 19 hours spent on event management and admin
- 11 hours spent on filmmaking and photography



**"It was great that someone wanted to get to know Beth!"**

Sue

**"When Changing Our Lives worked with us it was a whole new way of working and they have made me think differently now about my daughter's future. I remember one of the team coming to bingo with Beth and me. Beth was talking about how she wanted to work in a pub. The team member mentioned that maybe she could get some experience working behind the bar at the bingo club. All I could think of was how is Beth going to handle hot drinks! But now I think differently to this, I think more of what Beth can do!"**

Sue

**"I am a strong and independent young woman!"**



Step 2

**Market Shaping Event:**  
How could you support me to live  
the life I want? (April-June)

Providers and community organisations were invited to an event where the aims of the project were shared and each young person challenged them, through a short animation created from their person centred plan and their desired outcomes, to create and submit an offer of support that will enable them to achieve a life they want.

The original intention was that this event would involve a range of community organisations and networks. However, despite considerable time spent speaking to over 40 organisations they did not engage and there were no community groups or organisations at the event. This is discussed later in the report.

The young people attended with family or support staff. 10 provider organisations attended as well as commissioners and social workers. Two young disabled leaders from Changing Our Lives led the event, and they set the bar high by talking about their own lives and how they stay in control and make their own choices.



The tone of the event was deliberately relaxed and interactive with an informal dress code, whilst also designed to be motivational and inspiring, and to stimulate providers to be innovative and step out of automatic responses and thinking.

The animated films were a creative and person centred way for the young people to present themselves and their hopes for their lives. They highlighted the young person's unique strengths, passions and spirit, and represented the young person's challenge to providers to create a convincing offer!

All of those in the audience were then given the opportunity to ask questions and reflect on what they had heard with the young people, their families and the project team. This was done informally as a whole group, through open and honest discussion, and then more individually over a networking break.

**"I loved my DVD that was about me from the event."**

*Beth*

**"The slide shows (young people's animation films) were absolutely brilliant! They were such a good idea. Beth has got hers and she plays it over and over again."**

*Sue*

**"It was inspiring to see other disabled young people speaking and leading at the event. It has inspired me to challenge other parent's expectations of their children!"**

*Sue*

During the final stages of the event providers were invited to make preliminary offers of support to the young people on paper and then post them in prepared boxes that had been personalised for each young person. The offer of support could have been for some or all parts of the person's life. For example, one provider may have made an offer of support for housing, another for support to find paid work and a third to support the young person to explore leisure options.

From the market-shaping event, providers that had made preliminary offers were sent each young person's PCP and the Person Specification for support staff and given two weeks to create and submit an offer describing how they would support the young person to achieve one or more of their outcomes. This part of the process was deliberately unconventional and providers were encouraged to think about what they had learnt about the young person and to tailor their offers, and how they presented them, in personalised, creative and innovative ways.

Each young person received between 4 and 5 offers from different providers. The young people and their families examined and considered the offers and they decided which providers to shortlist and invite to the Dragon's Den stage of the process.

**"It has been a brilliant opportunity for young people to gain independence and achieve their aspirations."**

*Provider*

**"It was lovely to meet the young adults who were at the centre of this project. I think this work provides a brilliant opportunity for young people to be in control and achieve the aspirations that they want from their lives."**

*Provider*

**"I do think the videos would influence a change if they could be shown as part of the transition events in the schools."**

*Provider*



**Step 3**

**Dragon's Den:**  
**Who do I think can support me to live the life I want? (June-July)**

Chosen providers were invited to pitch their offer to 'The Dragons'; a panel of young people, their families and other key people in their lives. Young people and families determined the makeup of their panel and each one looked different. For example, one young person had their final year teacher on the panel; another had their nurse from the Inspire Team and his brother. One young person had their mum, a Changing Our Lives team member and a commissioner. There was a member of the Changing Our Lives team and a commissioner on each panel.

Following the pitch, young people and their families questioned providers and explored their offers in more depth. The young people and their families chose the questions and issues discussed, and they led this part of the event.

Following the Dragon's Den, the young person and their families and other key people took the necessary time to think through what they had heard and to decide which providers, if any, had convinced them they could offer the right support.

For all three young people, it was possible to choose providers. For example, one young person chose three providers who had offered support in three areas of her life. The second young person chose two providers, one for support and one for housing and the third young person chose one provider for support only, with a view to going back to other providers in the future.

Providers were informed by letter of the decisions, and whether they would be going forward to the next stage of support planning and working with commissioners.

The aim of the three steps outlined above was to enable young people and families to create a clear vision for the future and the outcomes that would enable them to begin to move closer to this, and to be empowered to decide who could support them to get there.

# Outcomes

It was recognised that these three steps would be taken in addition to any statutory assessments of needs and other statutory processes.

**The project team actively sought to collaborate with key professionals involved in the person's life to ensure that the three steps put young people and their families in the driving seat and enabled them to be active participants in their own journey, rather than statutory processes dominating and directing decision-making leaving young people and families being passive recipients of help.**


The pilot was designed with the following premises in mind:


- The aims of the pilot fully align with current policy and legal frameworks for people needing health and social care services and are therefore compatible with the strategic direction of both organisations. Health commissioners took a proactive approach in liaising with senior social care colleagues to reinforce this.
- All young people have eligible needs for social care now and for health funding either now or likely in the future.

- Negotiations and decisions around funding allocations and budgets would happen after the steps above. These decisions would be informed by the desired outcomes of the young people captured in the person centred planning in conjunction with other assessments of needs.
- Flexibility, willingness to try something new and an openness to learning must be a critical part of the pilot, for all involved including families, so that what works can be taken forward and built on to be rolled out to a wider group of people.

The project was overseen by two commissioners from Wolverhampton CCG and a team of three staff from Changing Our Lives. Changing Our Lives staff facilitated the practical implementation of the three steps outlined above.

The project was continuously shaped by the experiences, feedback and reactions of the young people and their families throughout.

 **Amanda, Tom's mum, talks about her experience of Sky's the Limit.**

 **Sue, Beth's mum, talks about her experience of Sky's the Limit.**

## Outcomes from Phase 1 for young people and their families

### Increased awareness amongst young people and their families:

- Of their rights as young people and families.
- That an ordinary life is everybody's right and can be achieved by everyone with the right support.

### A shift in thinking to focus on:

- A clear vision of what the young person wants from their life.
- What is possible with the right support, rather than on what can't be done.
- Opportunities beyond services and towards a real life.
- The support that would enable the young person to achieve their outcomes.

**Young people and families were empowered to take control of the process and to be central to the planning of their own futures. All the young people were able to make a decision about providers.**





**"I feel a lot more positive and raring to go and to find what is out there and to push Thomas as far as he can go instead of holding him back."**

*Amanda*

**"It's been enlightening...it's shown us that there are things out there."**

*Amanda*

**"I still think there is a long way to go, but I do feel more positive knowing that she can lead a good life. I am optimistic for the future."**

*Sue*

**"It took away the negative thoughts and worries for the future...instead of being pushed into something that you really didn't want to do and you knew was going to be wrong but you got no choice about...that they were going to have a fabulous life that they deserve instead of living an existence. It showed you all the possibilities...that they could achieve their goals in life. Never say never!"**

*Amanda*

**"It has made them individuals again, they are human beings instead of just a number that's got to be pushed here or pushed there."**

*Amanda*

**"There are different directions they can go in rather than just one direction."**

*Sue*

**"I was quite negative at the start thinking Beth can't do that, Beth can't do this...the more I spoke to the Changing Our Lives team the more I became optimistic for Beth knowing that there were other things she could do, not just go to college for 3 years and then nothing. There are other things out there."**

*Sue*

**"It gave them a voice for the first time instead of the mum having to make all the decisions...deciding what the right thing is...you're not second guessing..."**

*Amanda*

**"We didn't know what else is out there, but they can say what they want to do...it's released their dreams."**

*Amanda*

# What we learned

## About the transition process:

- The transition process for the young people we worked with was characterised by a lack of proactive forward planning, service responses to individuals rather than person centred solutions and approaches that are process-led, rather than person-led, which disempower young people and their families.
- There is inconsistency in when and how schools start planning with young people, and who is involved in this. For one young person it was common for planning meetings to take place without the young person or her mum being invited. This is concerning.
- Three of the young people in the pilot were in their final year at school and yet there were virtually no firm plans in place for what would happen for any of them upon leaving school. This is clearly inadequate and causes distress and anxiety for young people and their families, and reactive decision making for professionals involved. Only one young person was 17 when the pilot started so the planning process has and will allow him to work towards his own personal future in a thought out, considered way and at a speed that suits him.
- The extent to which individual practitioners take a person centred, outcomes approach varied. This is likely to have been a factor in the quality of relationships with young people and their families, which was variable and beyond what would be expected from taking an individualised approach.
- Professionals generally acknowledge person centred thinking and an ordinary life approach as important parts of their value base, but this isn't embraced in their practice. Person centred working was seen as a luxury or added extra that takes too much time, and is incompatible with many of the processes and systems that dominate the transition process.
- The focus of professionals is often on process, risk and needs which leads them to have conversations with people around options that are narrowly determined by the services that are available rather than what is possible.
- Personal outcomes for the young person, especially those around having a full life, are barely considered. There is a lack of developmental aspiration for young people and lack of belief that an ordinary life is possible.

**"Working in this way with young people and their families has been fantastic and an eye opener for us: really getting to know someone, rather than just focusing on a list of needs to be met by a set menu of service solutions, opens up a whole range of options and possibilities that leads to more imaginative and creative thinking about how the young person can be supported to develop their independence, achieve their goals and have better lives. For some young people this can mean the difference between a segregated life in services that are not tailored to the individual and are often very expensive, and an ordinary full life in the community."**

*Maxine Danks, Head of Service, Individual Care Team, Wolverhampton CCG*

**"I have been qualified for 8 years and I started out thinking about people first and what I could do to help. Somewhere over the years I have lost that focus and I don't know when or why. Today has really reminded me of why I started out in social work and I will make sure I see the person before the process from now on!"**

*Professional who attended the Market Shaping Event*

## About engaging with community organisations:

- Engaging community organisations and networks in the Market Shaping Event was unsuccessful. On reflection, the Project Team drew two key conclusions about this.
- Firstly, on the part of community organisations there appeared to be: In a minority of cases, but no less concerning, unhelpful and stereotypical attitudes towards disability; A lack of understanding of the aims and objectives of the project, particularly in terms of ordinary life thinking; Lack of capacity in the community sector to engage.
- Secondly, the Changing Our Lives team acknowledged that the involvement of the community sector in the Market Shaping event was actually not essential to the success of the project because the most critical element to a young disabled person living a good life is the quality of their support, both paid or natural. Good support enables the person to truly connect with others and with the community, which in turn develops wider sources of natural support and real relationships.



About the experiences and potential of young people and their families:

- Young people and families still receive very limited information about options for adult life, and have little support from professionals to understand their rights and their options.
- Young people and families are presented with narrow service solutions to needs rather than exploring the person's personal outcomes and the support they would need to achieve them.
- Families need to be supported to imagine bigger and better, hear about what is possible, and in a way that helps them believe that an ordinary life with ordinary opportunities is not just a right but achievable. Even where aspirations are high, families and young people are unlikely to have the knowledge of the health & social care system, awareness of their rights and experience of what works or skills required to enable their son or daughter to achieve an ordinary life. Without support that facilitates this families and young people will be, and are, left frustrated and disempowered.
- Families have resources, knowledge and ideas, which, if they are empowered to do so, can actively support the young person to create the future that they want and works for everyone.



About working with providers:

The Market Shaping Event and the Dragon's Den were designed to put young people at the heart of their transition and equally to stimulate and challenge providers to be creative, innovative and truly person centred in their offer to young people.

They were exposed to a new and different way of working with young disabled people, where they were required to describe how they would support the young person to achieve their personal outcomes, make the best of their strengths and abilities and live an ordinary life as well as meeting their individual needs – and to convince them of this. This is in contrast to a more traditional approach, which tends to be dominated by a person's needs and fitting young people into available services.

- In general the providers who attended the Market Shaping Event were very positive about the person centred nature of the project. They were very open and receptive to the shift in control to young people and families making decisions about what they want, whom they want to provide it, and leading their own transition process!

- One provider expressed doubt that an offer could be made to young people without traditional needs assessments and information being provided up front. The Project Team has reflected on this, and remains confident that the approach taken was appropriate and acceptable given that:

- It was made clear before the market shaping event that the young people had complex health needs, but that the purpose of the event was to inspire and challenge providers to think beyond needs and instead about how they could creatively support the young people to achieve their aspirations despite their impairments, rather than be limited by them.

- Commissioners gave a clear message at the Market Shaping Event that traditional needs assessment and information would be provided in the next stage, based on the assumption that as registered social & health care providers they have a foundation of knowledge, experience and skills that would meet a range of people's needs, and the ambition, drive and flexibility to tailor their provision towards person centred ways of working.

- The project steps (as outlined above) were specifically designed to test new ways of working that would be person centred, put young people and their families in control and stimulate new ways of thinking for all those involved.



**"The person centred nature of this opportunity was great and offered real insight into the young people and their wishes and aspirations for their future. It seems to me that this form of commissioning services is going to become more common. We chose not to bid for this opportunity because we were not a local provider at that stage and did not receive sufficient information to inform the costing of the services. Nevertheless, we remain responsive to future opportunities and will consider exploring how we can respond to young people's needs in the initial stages and work out the detail in partnership with others at a later stage."**

*Provider who attended the Market Shaping Event*

### About the implications for transition for other young people:

- The steps in the design of this pilot involved considerable resource in terms of time of professionals. This is essential for the first step of the process to ensure person centred outcomes are developed.

- Step 2 was very time-consuming and is an unrealistic as an option for every young person. Further thought is required to determine how to retain any value gained by this step but in significantly less time.
- The Dragon's Den, in Step 3, had huge value in that young people and families were in control and led the process, and as a consequence were able to make an informed choice about providers.
- Clarity around remit and responsibility of agencies involved from the start is essential, to ensure effective joint working and enable young people and families to be in control. Those key agencies, which have power as gatekeepers to funding or because of their statutory legal duties, have to be fully committed to person centred working and an outcomes approach, and to sharing power with the people they are there to support.
- Drawing on the learning from this phase and the further two planned phases, there will be on-going refinements to the way that young people with complex needs will be supported through transition.



**Jo Lake, Lead Nurse, Individual Care Team, Wolverhampton CCG, speaks about what made the project work and her learning.**

## Next Steps

It was recognised in the early stages of the pilot that further proactive input would be beneficial and would maximise the impact of the project on the lives of the young people and families involved and potential young people in the future. As a result, two further phases have been developed and agreed with commissioners for 2017

### **Phase 2: Working with young people, families and providers to embed person centred, ordinary life approaches.**

Translating person centred, ordinary life thinking and values into action and lasting change happens when there is a conscious shift in the culture of an organisation, which at its heart, empowers support staff. It is the experience of Changing Our Lives that many organisations provide very caring services where support staff are committed to supporting people to live "nice" lives, but which often resemble a life as a paying guest in a hotel service rather than an ordinary life in a real community. Their lives are lived in separate services, physically present in communities but not connected, and are characterised by a lack of engagement in meaningful activities and a lack of friendships with people other than paid staff and people in services.

**"This has been a really exciting project and a great opportunity to try a different way of working with young people to make sure they have a future that they want and that will give them a life like any other young person. This whole project has been about commissioning with people rather than for them and we now have to make sure that we take the learning from this project to improve our commissioning processes in all commissioning activity."**

*Maxine Danks, Head of Service, Individual Care Team, Wolverhampton CCG*

# Conclusion

**Phase 3: Evaluation event to showcase the progress made for each young person.**

It emerged during Step 3 of the pilot - the Dragon's Den - that it would be difficult to understand the extent to which providers were being influenced to develop their thinking and strengthen their person centred approaches. In addition, for the chosen providers, it was recognised that there is a need to evaluate the impact of their support on the young people's lives.

Hence, it was agreed to hold an event to showcase the progress made by young people. This would be an opportunity to be creative, for the young people to celebrate their progress and to disseminate the rich layers further learning gained from the project. This is planned for mid 2017.

 **Jo Lake, Lead Nurse, Individual Care Team, Wolverhampton CCG, speaks about the future of commissioning.**



This purpose of this phase of the Sky's the Limit Project was to test out a new model for working in coproduction with young people and their families that would put them in the driving seat of their own futures and open up more creative possibilities and options than traditional routes have offered in the past. There were two broad aims:

- **To work with and empower young people and their families in a way that empowers them to take control over the transition process through person centred planning and have choice about support, and**
- **To influence providers to be truly person centred in their offer to young people.**

The feedback from young people and families, highlighted in the quotes used throughout this report, indicates that the project was successful in this.

It has not been possible to get a clear picture of the extent to which the second aim has been achieved. However, it is fair to say that by being involved in the pilot, providers have been exposed to new ways of working with young people, their families and commissioners that will become more commonplace as the need to change becomes more pressing.

The further two phases planned will not only ensure the maximum impact for the young people and their families directly involved in this pilot, but will also generate further learning and wider consequences for future young people seen as having complex needs.



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