

VALUING PEOPLE NOW

Local Learning Disabilities Partnership Board **annual self assessment report**

2010/11



Background

- In the Valuing People Now summary report (DH 2010) for 2009/10 the Care Services Minister said the report gave clear information so that local people can see what progress has been made and improve services for people with learning disabilities.
- All 152 partnership boards completed the report. This showed that partnership boards wanted to improve services everywhere. There were many examples of best practice.
- Good practice examples were in the summary report. They showed how people's lives could improve and how efficiencies could be made.

Why complete an annual self assessment report ?

- Local partnership boards can use information from their annual reports to make sure people with learning disabilities are represented in the new health and social care structures.
- The report will help partnership boards give clear information to the new local Health and Wellbeing Boards, HealthWatch, GP commissioners and the new health and social care outcomes frameworks.
- The reports will also make sure that key partners including people with a learning disability and family carers, their support organisations and a wide range of local agencies and providers work together to make sure that the local delivery of Valuing People Now continues to be strong.

Changes to 2010/11 template

- You told us that you wanted some changes to the annual report form. This was to make it easier to complete. This would also mean that partnership boards and local authorities did not have a lot of extra work to do. The 2010/11 form concentrates on collecting information on **health, housing and employment**.
- The key questions are more straightforward and ask for less detail. This means the form is shorter. Local areas can add more information if they wish.

Benefits of local self assessment

- There is clear information on progress locally and where more action is needed on health, housing and employment.
- There is up to date information to use in local learning disabilities delivery plans.
- Information is available for Health and Wellbeing Boards to use in setting local targets and commissioning.
- There is evidence in each area for health and social care outcomes frameworks.
- Information is clear and available to everyone.

What Information to collect

- All information is about the financial year 1 April 2010 until 31 March 2011 unless the report says otherwise.
- Most information asked for will already be collected by councils and health services, so ask local learning disability leads in councils and PCTs first.

Who can access the annual self assessment reports?

- All local partnership boards are being encouraged to send their reports to the Learning Disabilities Observatory. The Observatory is funded by the Department of Health for three years (March 2010 to March 2013) to collect and publish information on the health and care of people with learning disabilities.
- All partnership board reports received by the Learning Disabilities Observatory will be published on the Observatory's website – www.ihal.org.uk
- The Department of Health is talking to the Observatory whether it will also be possible for the Observatory to publish an analysis of the reports received.



Name of learning disability partnership board: Wakefield Learning Disability Partnership Board

Website address (if available): www.wakefielddpb.org.uk

Name of Local Authority: Wakefield Council

Name of Primary Care Trust/s: NHS Wakefield District

Name and contact details of partnership board lead officer: Jayne Gilmour, Service Manager Care and Support Transformation – jgilmour@wakefield.gov.uk – 01924 307755

1. Local picture



1.1 Does your JSNA contribute to your understanding and commissioning plans for achieving Value for Money?

If yes, state the key actions that are planned to achieve value for money in services commissioned / planned for people with learning disabilities:

| | | | |
|-----|--|----|--|
| Yes | | No | |
|-----|--|----|--|

This is quite a confusing question and we would be grateful for clarification on its precise meaning. The JSNA is however currently being refreshed so there is an opportunity to influence that in respect of learning disability services and value for money.

Achieving value for money is integral to all commissioning processes as follows:

- Balanced scorecard approach to tendering, which brings together cost and quality within the assessment process.
- Approved provider list based on quality/cost ratios.
- Significant savings during 2010/11 through review of high cost placements and agreeing efficiencies with all providers.
- Decommissioning of services and reinvesting into services that represent better value for money.
- Creative partnerships and a cost neutral approach to new developments.

1.2 Number of adults with a learning disability who are known to the Local Authority

| | Number |
|--------------|--------|
| Age 18 to 64 | 1038 |
| Age 65+ | 110 |
| Male | 656 |
| Female | 492 |

1.3 Number of young people (aged 14-18 years) with a learning disability

21 young people between the ages of 14-17 were referred between 01.04.10 to 31.03.11.

1.4 What are the top 3 priorities relating to people with learning disabilities highlighted in your JSNA?

1. Housing
2. Employment
3. Health

1.5 What is the local budget for services for adults with a learning disability?

| | 2010/11 £'000 | 2011/12 £'000 |
|--------------|----------------|----------------|
| Social care | £29,260 | £26,197 |
| Health care | £3,624 | £3,568 |
| Joint | £8,388 | £8,388 |
| Total | £38,655 | £38,153 |

1.6 Personalisation

How many adults with learning disabilities (known to social care) have a personal budget?

2009/10

73

2010/11

114

1.7 Do children's services offer personal budgets?

| | | | |
|-----|---|----|--|
| Yes | ✓ | No | |
|-----|---|----|--|

1.8 How many young people aged 16-18 receive Direct Payments?

2009/10

14

2010/11

18

2. The health of people with learning disabilities



2.1 Have you completed the regional health self-assessment and performance framework for 2010/11?

| | | | | |
|-----|--|----|--|-------------|
| Yes | | No | | In progress |
| ✓ | | | | |

Where can it be found? Please provide website or lead contact details:

It can be found on the Wakefield Learning Disability Partnership Board website www.wakefieldldpb.org.uk or click on the following link http://www.wakefieldldpb.org.uk/NR/rdonlyres/2C557858-8893-4E46-B8CF-CB232F1680C2/0/LD_SelfAssessment_finalreport_April2011.pdf

2.2 If you have answered 'in progress' or no, indicate when you expect this assessment to be started or completed

| Started Completed

2.3 If you have answered yes, please complete the following summary table based on the most recent results of that assessment.

| RAG rating | Red | Amber | Green |
|---|-----|-------|-------|
| NHS campus closure | | | ✓ |
| Addressing health inequalities | | ✓ | |
| Making sure people are safe | | | ✓ |
| Continuing to achieve other Valuing People Now health commitments | | | ✓ |

2.4 How many adults with learning disabilities got an annual health check?

2009/10

625

2010/11

544

Please note: 544 is a conservative figure as not all GP practices have submitted claims for performing health checks in 2010/11.

2.5 Please give details of the overall headline health needs of people known to services - from regional health self-assessment and performance framework.

Actions contained in self assessment submission 2011 to reduce health inequalities and improve health outcomes:

- Increase carer assessments.
- Improve follow up of health needs identified from health checks.
- Increase uptake of health checks.
- Improve uptake of cervical screening.
- Better intervention to reduce the level of obesity among people with learning disabilities.
- Better follow up support of identified needs from health checks.
- Improve access with AHP services in mainstream acute and primary care.
- More targeted training of health staff and independent providers.
- Better linkages between specialist learning disability services and primary care to increase effectiveness of the Directed Enhanced Service (DES).
- Embedding good practices around key protective characteristics which include disabilities (New Equality Act).
- Improve access to mainstream services.
- Better recording and utilisation of primary and secondary care data by provider services.
- Improve engagement of BME community with the Partnership Board by establishing links between the BME carers group and the Carers Delivery Group.
- Improve attendance and involvement of BME families in transitions reviews and the transitions process.
- Better management of pathways for people with complex needs.

2.6 Local programmes/developments supporting better health which have had the most positive outcomes (include lead contact details to share best practice):

- Production of good quality accessible patient information leaflets within Mid Yorkshire Hospitals (accessible information is produced using expert consultation from our user group and learning disability champions). Leaflets completed so far include Having a Blood Test, Let Us Know What You Think, Having an X ray, DXA Scan and Day Surgery, What You Need to Know.
- Mid Yorkshire Hospitals NHS Trust have in place a bespoke service that identifies and manages individual patient requirements regarding appointment letters and making them accessible.
- Effective use of best interest meetings and the development of person centred pathways which includes agreed reasonable adjustments.
- Mid Yorkshire Hospitals NHS Trust has had a successful drive to increase the number of LD champions who receive LD awareness training and are empowered to act as a ward and department based resource for patients, families and professionals.
- All patients identified as having a learning disability, Health Action Plan (HAP) and/or Vulnerable Inpatient Card (VIP) are flagged at the point of entry to Mid Yorkshire Hospitals NHS Trust. This ensures effective case management, consideration of reasonable adjustments required and the need to develop person centred pathways.
- Successful year 2 launch of 'It's My Health Day' hosted by Wakefield, Kirklees and Calderdale learning disability partnership boards. The day is very well supported by partners including Wakefield PCT, Mid Yorkshire Hospitals and SWYPT. This engagement and feedback event is very interactive. It also gives service users and carer's the opportunity to find out what health promotion activity is available in the areas where they live. This year the event doubled in size with approximately 300 people attending. Wakefield was very well represented with over 140 people attending, 120 of which were service users and carers.

For all of the above contact: Marie Gibb, Strategic Health Facilitator, South West Yorkshire Partnership NHS Foundation Trust, 01924 543691

Marie.Gibb@midyorks.nhs.uk

- Enhanced learning disabilities training for GP practices carried out to improve the effectiveness and quality of annual health checks.
- Evaluation of the DES carried out to assess its impact on identifying and treating previously detected and undetected health conditions and providing recommendations to increase its effectiveness. Report available.
- Health equity profile of cervical screening programme to provide baseline data as part of supporting evidence-based interventions.
- Inclusion of chapter on vulnerable groups (including learning disabilities) to build on the original Joint Strategic Needs Assessment.

For all of the above contact: Stephanie Gibson, Public Health Commissioning Manager, Health Inclusion Team, NHS Wakefield District 01924 317692, Stephanie.Gibson@wdpct.nhs.uk

3. Where people live



3.1 Do you have a comprehensive learning disability housing needs analysis that is part of the local authority housing strategy?

| | | | | | |
|-----|--|----|--|-------------|---|
| Yes | | No | | In progress | ✓ |
|-----|--|----|--|-------------|---|

3.2 If you answered yes, is this part of the local Joint Strategic Needs Assessment (JSNA)?

| | | | |
|-----|--|----|--|
| Yes | | No | |
|-----|--|----|--|

3.3 The proportion of people with learning disabilities living in their own home or with family

| % 2009/10 | % 2010/11 | % 2011/12 (projected) |
|-----------|-----------|-----------------------|
| 71.2% | 72.24% | 74% |

3.4 Percentage of overall learning disabilities social care spend used to fund residential and nursing home placements: Residential and Nursing budget only not specialist.

| 2009/10 | 2010/11 | 2011/12 (projected) |
|---------|---------|---------------------|
| 5% | 3.6% | 3.9% |

3.5 Please give data to show numbers of people (known to health and social care) living outside the local authority area:

| Type of accommodation | Numbers | Cost |
|------------------------------|----------------|-----------------------------------|
| In residential settings | 78 | £4,581,512 (Costs for 64 clients) |
| In nursing home placements | - | |
| In supported living | 16 | £969,020 |
| Other please state | 9 | Not available |
| Totals | 103 | £5,550,532 |

3.6 Number of young people (aged 14-25 years) in out of area specialist education placements

There are 13 young people in Wakefield between the ages of 16 and 25 attending independent specialist colleges in 2010/11. Most of these are over the age of 18.

In 2011/12 we are projecting a figure of about 18 young people between the ages of 16 and 25 attending an independent specialist college. 13 of these will be new learners to attend this type of college.

3.7 Ordinary residence disputes (social care and health)

There are no disputes but we do have 5 ordinary residence negotiations ongoing with other local authorities at present.

| Ordinary residence disputes total | As a placing authority | As a host authority |
|--|-------------------------------|----------------------------|
| 0 | 0 | 0 |

3.8 What percentage of your market (in terms of expenditure) is provided by:

| | % |
|---|------|
| In house (Local Authority) | 21.5 |
| 3 rd sector / charities (not for profit) | |
| Private/ independent sector (for profit) | |
| Other please state (both not for profit and for profit) | 78.5 |

3.9 Do you have a current local housing plan to support more people into supported living?

| | | | |
|-----|---|----|--|
| Yes | ✓ | No | |
|-----|---|----|--|

If yes how many people will move into supported living during the next 3 years?

| |
|-----------|
| Approx 30 |
|-----------|

3.10 Describe your local housing plans for people with learning disabilities during the next 5 /10 years:

- | |
|---|
| <ul style="list-style-type: none"> • We will consider more partnerships such as the examples of good practice highlighted in this report. • We will review people in residential care and consider alternatives for offering people settled accommodation. • We will ensure that older people with learning disabilities have access to Extra Care Services. • We will continue to work with strategic housing to ensure general needs schemes meet the needs of people with learning disabilities. |
|---|

3.11 Summary of best practice and/or plans to support changes in local housing provision and use of resources (including lead contact details for sharing best practice):

- **Aaron Wilkinson Court** in South Kirkby houses 8 people in modern apartments over 3 floors and was purpose built recently to a high standard by Chevin Housing Association. There is a communal room and the new tenants are making plans about how they want to use this space to enhance their social lives and get to know each other.

- **Jubilee House** in Featherstone was an empty Victorian hotel until renovated by private developers and converted into 12 individually styled apartments and leased to Chevin Housing to provide the registered social landlord function. The layout gives people considerable privacy and separation if they choose, or there is enough space in each flat for visitors.

In both developments there is also a staff flat with links via assistive technology to the other apartments. In this way one sleep-in member of staff can cover a number of service users, providing a cost-effective solution to any anxieties about being left alone overnight. The support is provided by Choice Support, and their experienced team managers are pleased to be providing support in this way, encouraging maximum independence for people in their own individual homes. Both of these schemes resulted in efficiencies.

Contact Modernisation and Development: 01924 303573

4. Employment



4.1 Please show the proportion of people with learning disabilities in paid employment (including being self-employed) known to local authorities

| Category | Total % | 2009/10 | 2010/11 | 2011/12 (projected) |
|---|---------|-----------|----------------|---------------------------------------|
| Working as a paid employee or self-employed (Less than 16 hours per week) | | 39 | LD=51 ASC=3 | Increase to 10 for people with an ASC |
| Working as a paid employee or self-employed (16 hours or more per week) | | 10 | LD=14 ASC=3 | Increase to 10 for people with an ASC |
| Total | | 49 | 71 | |
| Working as a paid employee or self-employed and in unpaid voluntary work | | 8 | LD=1 ASC=0 | As 2010/11 |
| In unpaid voluntary work only | | 40 | LD=36 ASC=3 | Increase of 20% |

LD = Learning Disabilities
ASC = Autistic Spectrum Conditions

4.2 Do you have an up-to-date local employment strategy for people with learning disabilities in line with Valuing Employment Now: real jobs for people with learning disabilities?

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

4.3 Are you implementing a plan for each young person aged 14-25 to get a job when they leave education? Evidence for this could include:

- **People getting paid jobs or self-employment when they leave education;**
- **Young people doing meaningful work experience in community-based settings;**
- **Support for young people to do paid evening and weekend jobs;**
- **Supported employment agencies working with schools for age 14;**
- **Person-centred transition planning with an employment focus as per ‘How to guide: learning from the Valuing People Now employment demonstration sites’, HMG, March 2011 (www.valuingpeoplenow.dh.gov.uk/webfm_send/463)**

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

There has been a much increased focus on employment as an outcome of education and training over the last year. Evidence and illustration of this includes:

- Person Centred Planning (PCP) that has employment and independent living within it as key elements has been rolled out to all Wakefield mainstream schools in the last year. This follows the adoption of PCP in Wakefield’s special schools.
- There has been extensive training conducted on Person Centred Planning through the year with a mix of half day and whole day events. Employment and independent living have strong elements within this. Trainers have included the foster mother of 2 disabled teenagers who has been able to share through her direct experience the value of employment as an achievable goal, and how challenges have been overcome. Various groups have undergone training: Special Educational Needs Co-ordinator’s (SENCO), staff that support SENCO, senior managers from schools, parents, Connexions, PA’s, health staff and Local Authority Special Educational Needs staff, with an open session being made available to a range of professionals from across Wakefield.
- Wakefield’s Section 139a documentation has been significantly revised to ensure that aspirations towards work, goals to be achieved in education and training, and the steps to get young people there, are central to the assessment. Moving to an

outcomes approach is significant to provide challenge in terms of increased aspirations.

- Young people that are to be placed at independent specialist colleges are being assessed, and learning programmes are being designed with employment as a desired outcome of the placement. Providers are clearly aware that employment is a Wakefield Council priority for its learners.
- Wakefield continues to mount major Information Advice and Guidance events for young people and their families every year that looks to the future, where employment (and independent living) is one of the aspects covered. In the 2010/11 event, work had a special focus and the father of a young man with learners and learning difficulties and/or disabilities, spoke about the need for parents to focus on employment positively as an outcome, and to do this early in a young person's life. This was supported by a Wakefield Officer who talked about employment and the support for employment.
- Wakefield's Day Opportunities programme continues to develop a work orientated focus for individuals.
- Wakefield has been active in reshaping professional practice in the area of social work to include a new work-focus within assessments and reviews of clients. The purpose is wholly directed at raising employment as an opportunity and prospect.
- Wakefield is developing Individual Budgets for young people and it is hoped that soon these will be used for job coaches or something similar.

4.4 Total local authority spend on day services (external and internal provision)

| |
|------------|
| £3,710,975 |
|------------|

4.5 Total local authority spend on supported employment

| |
|----------|
| £100,000 |
|----------|

4.6 Local models/ programmes used which have successfully supported people into employment (include lead contact details to share best practice)

- In Wakefield the Back in Touch service, part of the national charity Mental Health Matters, has supported individuals with mental health needs for over 10 years. Their approach is similar to the IPS model. It works with individuals in a person centred way largely on a one-to-one basis to tailor an individual action plan that identifies each person's route back to work.
- In July 2009 a new service was created called Hidden Talents through grant funding, to support individuals with Autistic Spectrum Conditions and other hidden disabilities to gain and retain employment. This was managed by Mental Health Matters and worked with clients in the same way as described above. Between July 2009 and March 2011, 10 job outcomes were achieved.
- In November 2009 a second new service was created called Aspire to Work, through grant funding to work with individuals with moderate to severe learning disabilities. Again this was managed by Mental Health Matters, and a similar approach to that described above was adopted. Many service users referred to this scheme had never worked therefore everyone was offered the opportunity to undertake a 12 week work placement in the sector of their choice. Support was provided by Employment Coaches from Mental Health Matters and in-work support was provided by the local authority Employment Team. Between November 2009 and March 2011, 11 job outcomes were achieved.
- Social Enterprises, Sparkling Clean and Multi-Taska have employed over 40 people on a casual basis with 18 people undertaking regular work. Seeking reserved contracts from statutory agencies to support sustainability has been challenging but two contracts have now been reserved.
- Mental Health Matters lead contact for Wakefield Employment Services is Julie Darnbrough. E-mail jdarnbrough@mentalhealthmatters.co.uk.
- Sparkling Clean Project Co-ordinator – telephone number Dimensions Community Enterprises 01924 205434 or visit the website www.dimensions-uk.org/sparklingclean.

5. Other local developments/ good practice of note



Briefly highlight any other developments/good practice that you would like to include for sharing, including lead persons contact details (this may include regional and locally agreed priorities). It would be very helpful to show good practice which involves family carers:

- **Self Advocacy** – We have 6 self advocacy groups across the Wakefield District. These groups share personal experiences and talk about things they are not happy with or things they want to change. This information is then taken to the Rainbow Group which is a group of service user representatives of the Learning Disability Partnership Board. The representatives raise these concerns at the Partnership Board. Service users and advocates are currently looking at how they become more independent with self advocacy.
- **Citizen Advocacy** – This form of advocacy is focussed on developing a longer term relationship with a person with learning disabilities. Citizen Advocacy is carried out by volunteers and is about supporting people with learning disabilities to develop skills and empower them to advocate for themselves over a period of time. Citizen Advocacy is not about working with people in crisis situations but trying to work with people in a more proactive way to avoid crisis situations occurring.
- **Autism Advocacy** – We have a specialist Autism advocate who supports adults with Autistic Spectrum Conditions and/or learning disabilities. This Autism Advocate also provides training and awareness raising sessions to professionals around the district regarding working with people with Autistic Spectrum Conditions.
- **Peer Advocacy** – We have trained people with learning disabilities to act as peer advocates for people with profound and multiple learning

disabilities. They give them the chance to have their voice heard by professionals on issues that affect their day to day lives.

- **Parents with Learning Disabilities Advocacy** –A pilot advocacy scheme to support parents who are already or soon to be going through legal proceedings regarding their children. They provide support before, during and after professionals meetings and help them to access legal representation, understand reports, assessments and correspondence regarding their children. They challenge professionals to ensure parents are included in decisions being made about them or the care they give their children. They also hold a self advocacy group for parents so they can share experiences or talk about any problems they are facing with other people who were in similar situations.
- **Transitions advocacy** – They support people with learning disabilities who are aged 14 – 18 with a statement of special education need. They work with young people who need support to express their needs and wishes about their future. They also work with people with complex care needs and/or people who have difficulty communicating their life choices, ensuring their views are central to the decision making process. They support young people to become more independent and to exert more control over their lives.
- **Shared Lives** – We held a service user 'focus group' which has given us lots of good ideas about a variety of topics. In particular this helped us to put together appropriate 'Carer Portfolio's'. These are small, photo based booklets, about our carers homes and family. We take these out to service users as part of the introductory process, so they can get an idea of what their potential respite place looks like. For example the house, pets, family members. They also contain a section about current service users who use the placement and show pictures of trips and activities undertaken. Service users really like them.

We now have two service users on our 'Shared Lives Panel' which takes the final decision about whether new carers should be approved.

As part of the assessment process of new carers, the latter now visit an existing service user who is the able to give their views about the applicant's suitability.

We have a new Service User Guide. This is a small glossy booklet which gives lots of detailed information in easy read format, about Shared Lives. A copy is given to all new service users.

- **Carers Development Day** – On Wednesday 2nd March 2011 around 30 family carers attended the 4th Carers Development Day at the Alice Bacon Centre in Normanton. It was facilitated by Inclusion North.

The day opened with discussions around national changes and developments which had or were planned to happen. A senior manager from Wakefield Council explained how the changes would impact locally although a lot still had to be decided.

Some matters raised on the day were highlighted as areas for action and will be discussed further by the Carers Delivery Group.

Carers appreciated the chance to find out what was happening locally and they admired how Inclusion North encouraged discussion and opinion.

6. Declaration/ agreement



Wakefield Learning Disability Partnership Board:

We confirm that we have been engaged in the completion of the annual report and confirm the data and information given in this report are accurate (as far as is known) and that this report has been agreed by Board members.

It was formally agreed at a meeting of the Partnership Board on:

Signed (Co- chairs):

K Brown
.....

Print full name

Karen Brown
.....

On behalf of members with a learning disability:

Signed: As above

Print full name:

Comments:

On behalf of members who are family carers :

Signed : *Barrie R. Warner*

Print full name *BARRIE R. WARNER*

Comments: This has been a year when much has been achieved. It will be a sad loss that the Board is unable to continue in its present form due to financial constraints.

To improve access to information and to share best practice you may wish to publish your report on the Learning Disabilities Observatory funded by the Department of Health to collect information on the health and care of people with learning disabilities. The website is at www.ihal.org.uk.

Please send your completed report or a link to the report on a local website to the following email address: partnershipboardreport@ihal.org.uk

If you have any queries, please send a message to this email address, or contact Professor Gyles Glover, Director of the Observatory on: 0191 334 0400.

Please send your report by 29 July 2011.