



## **ADULT LEARNING DISABILITY STRATEGY**

**2018-2023**

*“Working together to deliver better outcomes for people with learning disabilities, and their families and carers”*

**May 2018**

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## Introduction

It is estimated that around 2,500 people with a learning disability live in East Dunbartonshire, using traditional prevalence rates (Dept of Health, 1995). Many of these individuals will not be in regular contact with specialist health or social care services, but live largely independently or are supported by family. From our own figures we know that 460 adults with a learning disability do receive formal support, ranging from low-level advice and support to extremely intensive round-the-clock care and support with specialist health input.

The advent of the NHS and Community Care Act in 1990 heralded a major change in the way that people with learning disabilities were supported, with a focus on community-based care and support and the closure of long-stay hospitals, such as Lennox Castle. Since that time, successive national and local policy has been focused on improving the quality of life, choices and personal outcomes for people with learning disabilities and for the people who care for them. A wide range of residential, specialist health care, day-activity and personal care and support services has developed over the intervening period by statutory and non-statutory providers.

During the 25 years since Community Care was implemented, expectations and aspirations have rightly increased by service users, carers, successive governments and professionals, with ongoing demands for better services, support, choice and control, equality of opportunity and human rights. This has happened during a period when the number of people with complex support needs has increased, and available resources have been under severe pressure.

In June 2015, the East Dunbartonshire Health and Social Care Partnership was established, bringing together a range of health and social care functions under a joint Board with wide-ranging stakeholder representation, a single Chief Officer, a single strategy and utilising a single combined budget.

Our Adult Learning Disability Strategy reviews all of the national and local policy expectations, together with the expressed views of local people, staff and other stakeholders in order to:

- Consider how well we are meeting the needs of local people with learning disabilities and their carers;
- Set out the priorities for improvement and development, in order that the Health and Social Care Partnership can ensure the provision of high quality, effective, sustainable services in the future.

This Strategy will be followed-up by the development of an Implementation Plan, which will be supported by a full process of stakeholder consultation.

## Vision and Outcomes

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In 2014, the Scottish Parliament introduced integrated health and social care authorities through the Public Bodies (Joint Working) (Scotland) Act. These bodies, called Health and Social Care Partnerships, are now responsible for deciding how the combined NHS primary and community health and local authority social work budgets should be used, and have oversight of the quality of these services. In practice, this means that services will work more closely together to deliver streamlined, better coordinated and effective support to people that need it.

The East Dunbartonshire Health and Social Care Partnership was established in June 2015. It is governed by a Board that includes local elected members, NHS Board members, and representatives of service-users, carers, staff, and service providers. Together they agree a Strategic Plan that sets out how the joint budget should be used to meet national and local health and wellbeing outcomes. This Learning Disability Strategy sits beneath the Partnership's overarching Strategic Plan.

### Learning Disabilities: Our Vision

The national Learning Disability Strategy is called "Keys to Life". Launched in 2013, it built on the success of the previous strategy called 'The same as you?', which was published in 2000 following a review of services for people with learning disabilities. East Dunbartonshire's HSC Partnership is fully committed to the ambitions and recommendations of Keys to Life and sets out a vision that is simple, but is at the heart of its ethos:

*"Working together to deliver better outcomes for people with learning disabilities, and their families and carers"*

### Outcomes for People with Learning Disabilities, their Families and Carers

The Scottish National Learning Disability Strategy "*Keys to Life*" makes 52 recommendations for improving services, experiences and outcomes for people with learning disabilities, their families and carers. The strategy has four strategic outcomes which the 52 recommendations are designed to improve. East Dunbartonshire Health and Social Care Partnership fully adopts these outcomes as the ones that will underpin our own local vision and strategy. They seek to ensure:

**A Healthy Life:** People with learning disabilities enjoy the highest attainable standard of living, health and family life.

**Choice and Control:** People with learning disabilities are treated with dignity and respect, and protected from neglect, exploitation and abuse.

**Independence:** People with learning disabilities are able to live independently in the community with equal access to all aspects of society.

**Active Citizenship:** People with learning disabilities are able to participate in all aspects of community and society.

## National Health and Wellbeing Outcomes

The Partnership aligns its high level Strategic Plan to the National Health and Wellbeing outcomes. The overarching principles are that:

- (ii) Health and social care services should focus on the needs of the individual to promote their health and wellbeing, and in particular, to enable people to live healthier lives in their community.
- (iii) Key to this is that people's experience of health and social care services and their impact is positive; that they are able to shape the care and support that they receive; and that people using services, whether health or social care, can expect a quality service regardless of where they live.

There are nine national health and wellbeing outcomes which apply to integrated health and social care. Health Boards, local authorities and the Health and Social Care Partnerships must work together to ensure that these outcomes are meaningful to people in their area. These also fully apply to people with learning disabilities and the people who support them:

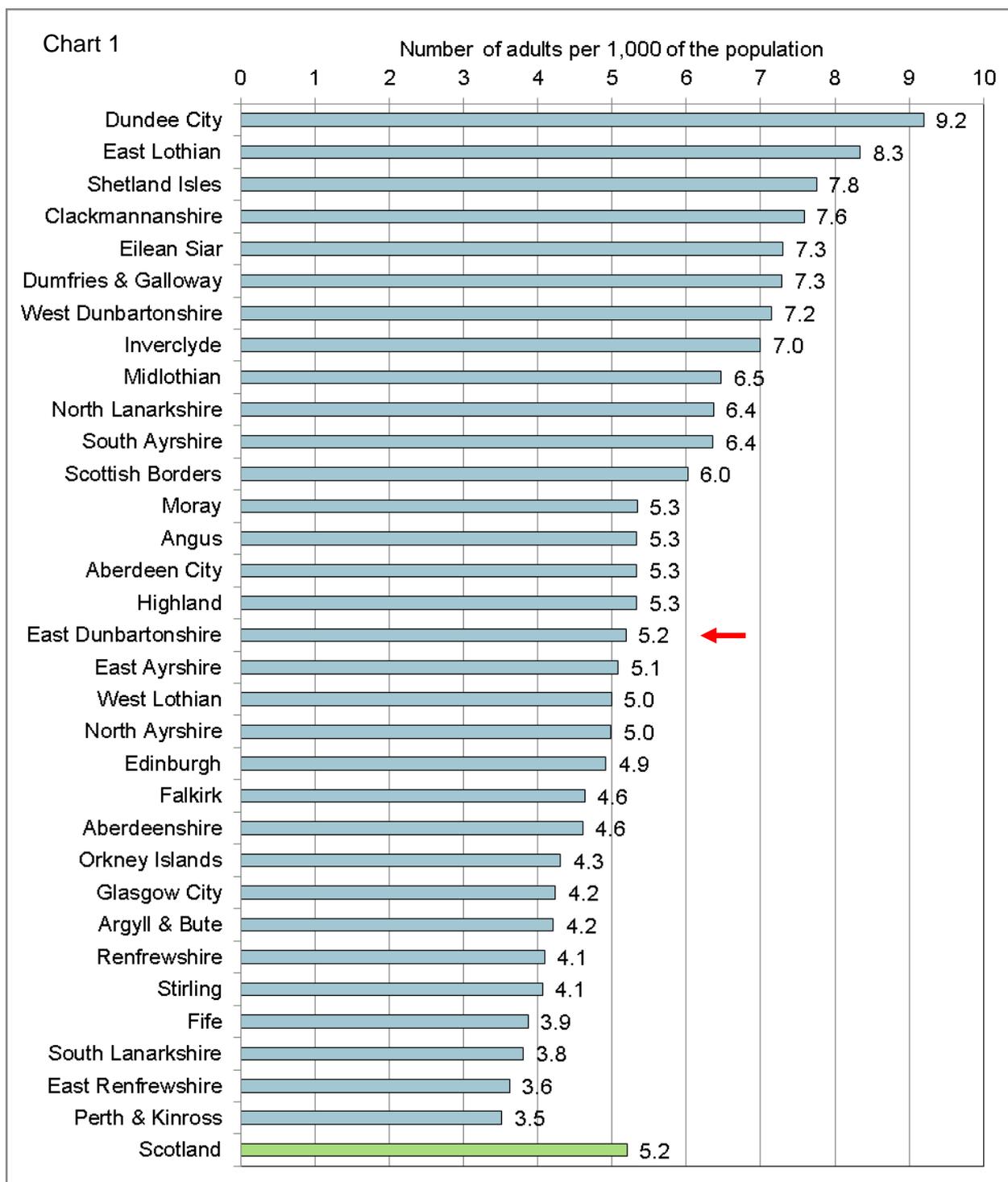
- People are able to look after and improve their own health and wellbeing and live in good health for longer.
- People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
- People who use health and social care services have positive experiences of those services, and have their dignity respected.
- Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
- Health and social care services contribute to reducing health inequalities.
- People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.
- People who use health and social care services are safe from harm.
- People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
- Resources are used effectively and efficiently in the provision of health and social care services.

# People and Services

The statistical information provided in this section has been obtained from *Learning Disability Statistics Scotland, 2017* published by the Scottish Commission for Learning Disability.

## 1 PREVALENCE

Table 1 demonstrates that the number of adults with learning disabilities known to the Partnership’s Joint Learning Disability Team in East Dunbartonshire is exactly consistent with Scotland as a whole (5.2 per 1,000 of the population).



It is estimated that around 2,500 people with a learning disability live in East Dunbartonshire, using traditional prevalence rates (Dept of Health 1995). Many of these individuals will not be in regular contact with specialist health or social care services, but live largely independently or are supported by family. From our own figures we know that 460 adults with a learning disability do receive formal support, ranging from low-level advice and support to extremely intensive round-the-clock care and support with specialist health input. Of the people known to the Joint Learning Disability Team with a learning disability, men outnumber women 60:40.

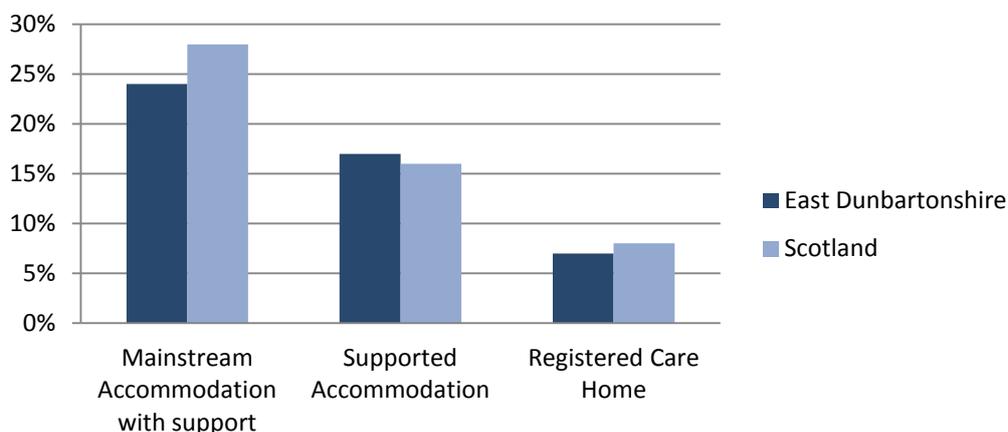
Of the 460 adults with a learning disability known to the Joint Learning Disability Team, 40% also have a diagnosis of autism.

## 2 LIVING CIRCUMSTANCES

211 (46%) adults with a learning disability known to the Joint Learning Disability Team live with a family carer. This is one of the highest percentages in Scotland.

115 (25%) adults with a learning disability known to the Joint Learning Disability Team live in shared accommodation with at least one other adult with a learning disability. This is generally provided through commissioned group-tenancies or care homes, where a care organisation provides care and support, often on a 24/7 basis. This number may also include families where more than one adult with a learning disability lives at home. Chart 2 below compares the supported living arrangements in East Dunbartonshire, which demonstrates that our configuration of different support arrangements is closely in line with the Scottish average.

**Chart 2: Accommodation & Support Arrangements**



## 3 EMPLOYMENT AND DAY CENTRE SUPPORT

In East Dunbartonshire 161 (35%) adults with a learning disability known to the Joint Learning Disability Team attend a day centre. This is one of the highest rates in Scotland, which records 19%, as an average.

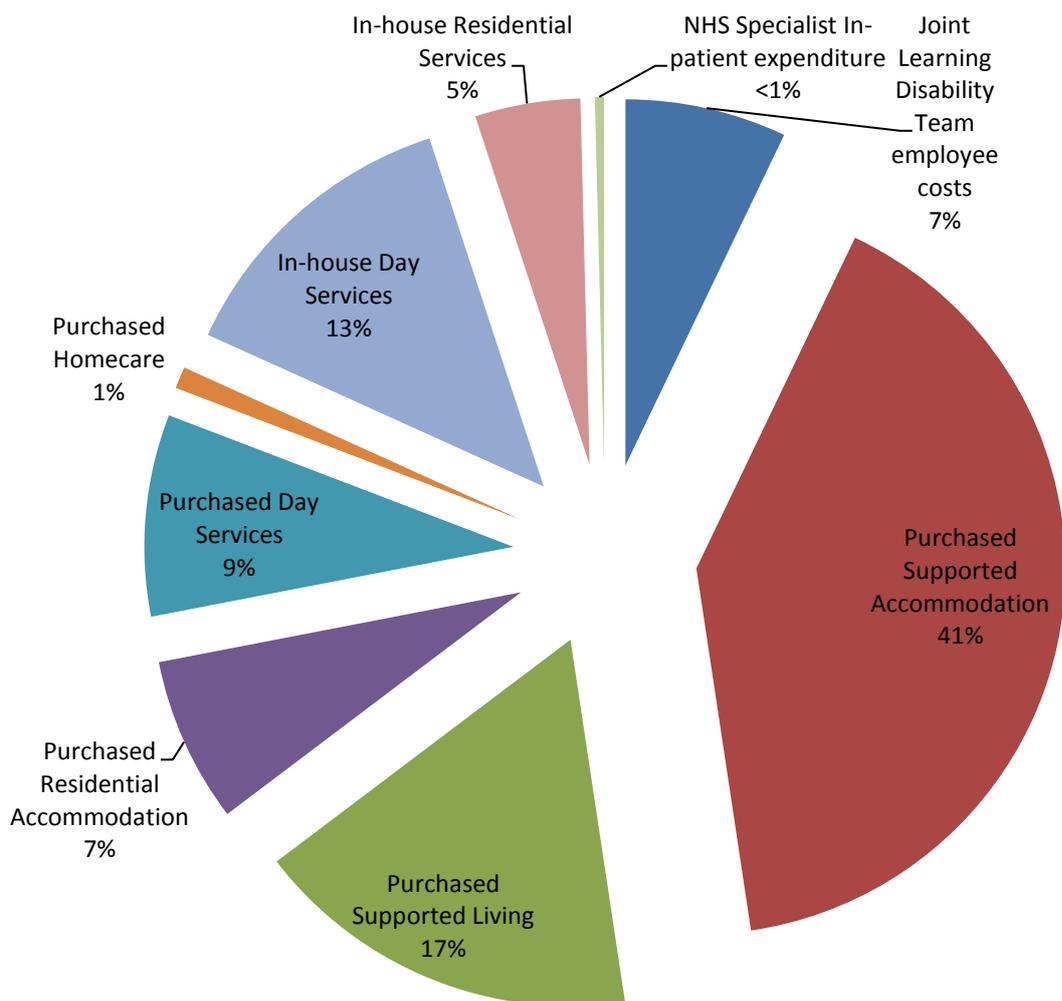
In East Dunbartonshire 63 (13.7%) adults with a learning disability known to the Joint Learning Disability Team are engaged in some type of employment, which is the second highest level in Scotland, which records 5.3% as an average.

# Budgets and Spend

## 1 LEARNING DISABILITY SPEND IN EAST DUNBARTONSHIRE

The total budget for adult Learning Disability services in East Dunbartonshire for 2017-18 is approximately **£15.5 million**. This does not include central management or other common overheads. Chart 3 shows the breakdown of how this money is spent (source LDSS Survey 2017).

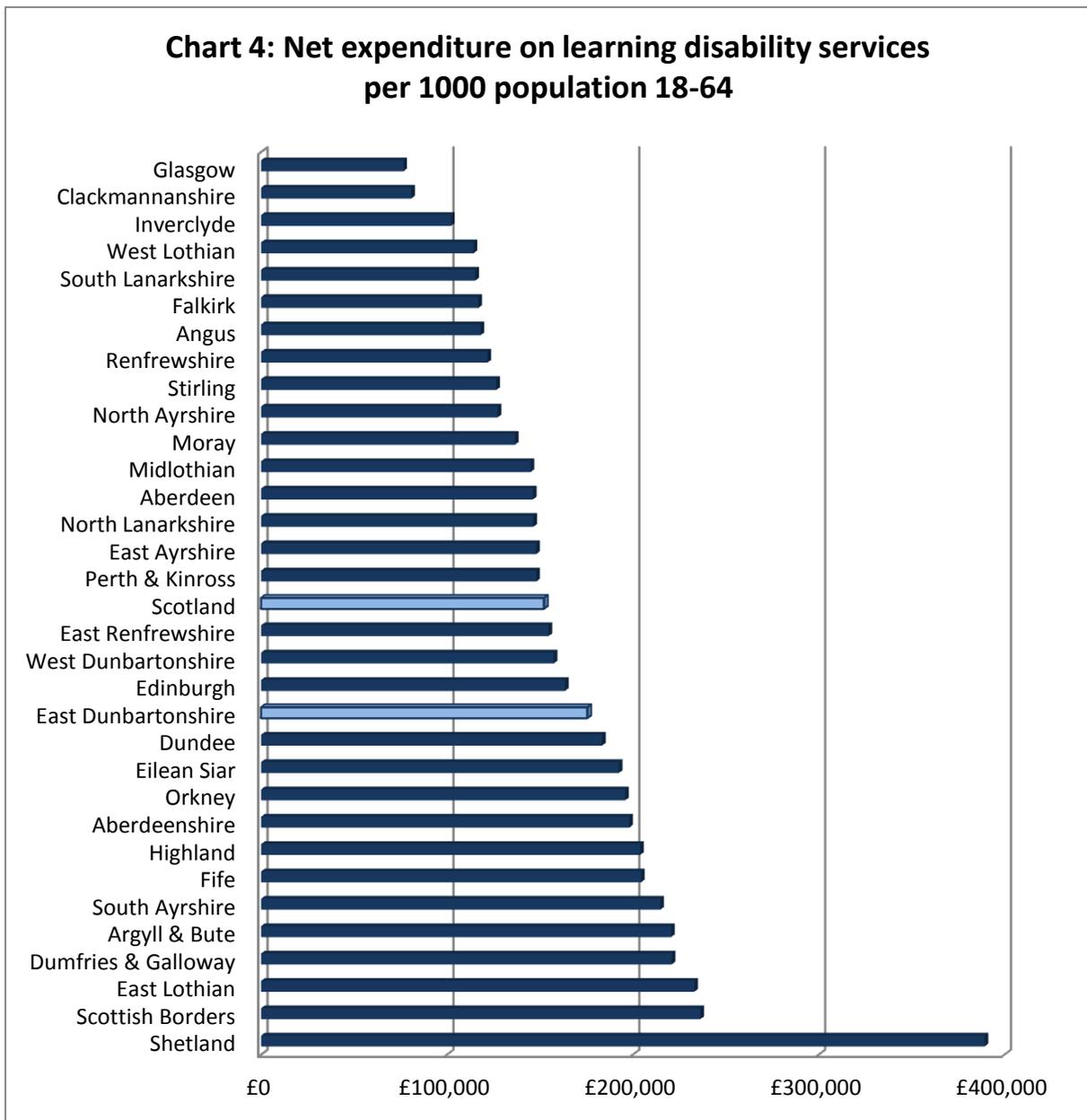
**Chart 3: Learning Disability Spend: East Dunbartonshire**



## 2 HOW WE COMPARE NATIONALLY

Chart 4 overleaf shows how we compare with other Partnership areas in terms of our overall spend on Learning Disability Services (Source: CIPFA, 2016). We know that our prevalence of adult learning disability is the same as the Scottish average, at 5.2% of the population. Chart 4 demonstrates that we spend marginally more than the Scottish average, and more than other Partnership areas in Greater Glasgow and Clyde. This means that we spend an average of approximately £24,000 per

person per annum we support, inclusive of assessment, service and transactional costs compared to the Scottish average of approximately £22,000.



(Chart 4 is net of income, including Resource Transfer)

## **The Context for Change**

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Over the past few years, there has been a significant amount of new legislation and national and local policy that has had a considerable effect on how people with learning disabilities and their carers are supported. Demands and expectations from people have increased in terms of the quality and choice of services available, which have also come to bear on the changed policy landscape, both nationally and locally:

### **1 LEGISLATION**

#### **Adults with Incapacity (Scotland) Act 2000**

This Act provides a framework for safeguarding the welfare and managing the finances of adults (people aged 16 or over) who lack capacity due to mental illness, learning disability or a related condition, or an inability to communicate.

#### **Mental Health Act (Care and Treatment) (Scotland) Act 2003**

This Act increased the rights and protection of people with: mental illness, learning disability and personality disorder. It introduced changes to develop community-based mental health services, involvement of service users and unpaid carers in decisions concerning treatment, and respect for the human rights of people with what are referred to as “mental disorders”. The act is currently being reviewed.

#### **Adult Support and Protection (Scotland) Act 2007**

The Adult Support and Protection (Scotland) Act 2007 was introduced to identify and protect individuals who fall into the category of adults at risk. Measures of the Act include:

- requiring councils to make the necessary enquiries and investigations to see if action is needed to stop or prevent harm happening;
- requiring specific organisations to co-operate with councils and each other about adult protection investigations;
- the introduction of a range of protection orders including assessment orders, removal orders and banning orders; and
- a legislative framework for the establishment of local multi-agency Adult Protection Committees across Scotland.

The Act defines adults at risk as people aged 16 years or over who:

- may be unable to safeguard their well-being, rights, interests, or their property
- may be harmed by other people;
- because of a disability, illness or mental disorder are more at risk of being harmed than others who are not so affected.

Having a particular condition such as a learning disability or a mental illness does not automatically mean an adult is at risk. Someone can have a disability and be perfectly able to look after themselves. For an adult to be considered at risk, all three parts of the above definition must be met.

## **Equality Act 2010**

The Equality Act 2010 brings together over 116 separate pieces of legislation into one single Act. Combined, they make up the 2010 Act that provides a legal framework to protect the rights of individuals and advance equality of opportunity for all.

The Act simplifies, strengthens and harmonises the current legislation to provide Britain with a discrimination law which protects individuals from unfair treatment and promotes a fair and more equal society.

## **Welfare Reform Act 2012**

The Welfare Reform Act 2012 includes:

- the phased introduction of Universal Credit – an integrated, working-age benefit which will (when fully implemented) replace six existing means-tested benefits (Income-based JSA, Income-related ESA, Income Support (IS), Working Tax Credit (WTC), Child Tax Credit (CTC) and Housing Benefit (HB), and;
- the phased replacement of Disability Living Allowance (DLA) with the Personal Independence Payment (PIP) for working-age adults. Central to the PIP system is a change to eligibility for the benefit with tighter criteria backed by ‘descriptors’ and a points-based approach to entitlement. An assessment for the benefit by an independent healthcare provider is a central aspect of the approach.

## **The Social Care (Self-directed Support) (Scotland) Act 2013.**

The Act came into force on April 1, 2014 and places a duty on Partnership social work services to offer people who are eligible for social care a range of choices over how they receive their support.

Self-directed Support (SDS) allows people, their carers and their families to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes.

SDS is underpinned by the core principles of personalisation (people and families having choice and the ability to shape and control the public services they require) and co-production (equal and collaborative relationships between people, professionals and communities).

## **Public Bodies (Scotland) Act 2014**

This is the legislation that sets out the arrangements for the integration of certain NHS and local authority social work functions. More detail on this can be found in the preceding Vision and Outcomes section of this document.

## **Carers (Scotland) Act 2016**

The Carers (Scotland) Act 2016 is designed to support carers’ health and wellbeing. The provisions in the Act include:

- a duty on local authorities to provide support to carers, based on the carer's identified needs which meet the local eligibility criteria;
- a specific Adult Carer Support Plan and Young Carer Statement to identify carers' needs and personal outcomes; a requirement for each Partnership area to have its own information and advice service for carers;
- a requirement for the Scottish Government to prepare a carers' charter that sets out the rights of carers;
- a requirement to consider whether support to carers should take the form of a short break, and there must be a wide range of breaks available to carers; and
- the joint preparation by local authorities and health boards of local carers' strategies. A Carers Strategy for East Dunbartonshire is in development at the time of preparing this document, which will coincide with the Act coming into force in April 2018.

## 2 NATIONAL POLICY

### **Achieving Sustainable Quality in Scotland Healthcare – a 20:20 Vision 2011**

The Scottish Government's 20:20 Vision is that by 2020 everyone is able to live longer, healthier lives at home, or in a homely setting and, that we will have a healthcare system where:

- We have integrated health and social care;
- There is a focus on prevention, anticipation and supported self-management;
- When hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm;
- Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions; and
- There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of re-admission.

### **The Scottish Strategy for Autism 2011**

This strategy places autism as a national priority advocating a holistic, joined-up approach and emphasising that people with autism and their carers need to be supported by a wide range of services including social care, education, housing, employment and other community-based services. The strategic vision is that *“individuals on the autism spectrum are respected, accepted and valued by their communities and have confidence in services to treat them fairly so that they are able to have meaningful and satisfying lives”*.

In 2015, the strategy's recommendations were reframed as four strategic outcomes:

- A Healthy Life: People with autism enjoy the highest attainable standard of living, health and family life and have timely access to diagnostic assessment and integrated support services;

- Choice and Control: People with autism are treated with dignity and respect, and services are able to identify their needs and are responsive to those needs;
- Independence: People with autism are able to live independently in the community with equal access to all aspects of society; and

Active Citizenship: People with autism are able to participate in all aspects of community and society.

### **The Keys to Life Strategy 2013**

'Keys to Life' is Scotland's learning disability strategy. Launched in 2013, it builds on the success of 'The same as you?', the previous strategy which was published in 2000 following a review of services for people with learning disabilities.

This 10 year strategy makes more than 50 recommendations, the majority of which relate to health access and quality. The strategy aims to address the health inequalities facing people with learning disabilities. It has a strong focus on improving health outcomes in the widest sense including prevention, health improvement activities and equal access to health services.

The strategy also aspires to improve the life choices and quality of life of people with learning disabilities by ensuring they are included in every aspect of community life as equal citizens and that the voice of every person with learning disabilities is heard and respected.

The "Keys to Life" implementation framework and priorities for 2015-2017 identifies four strategic outcomes;

1. A Healthy Life: People with learning disabilities enjoy the highest attainable standard of living, health and family life;
2. Choice and Control: People with learning disabilities are treated with dignity and respect, and protected from neglect, exploitation and abuse;
3. Independence: people with learning disabilities are able to live independently in the community with equal access to all aspects of society; and
4. Active Citizenship: People with learning disabilities are able to participate in all aspects of community and society.

### **Scotland's National Action Plan for Human Rights 2013-17 (SNAP)**

Scotland's National Action Plan for Human Rights (SNAP) aims to ensure that everyone, including people with learning disabilities, has their human rights respected and protected. SNAP aims to build a better human rights culture, help improve people's lives through human rights and contribute to a better world by giving effect to Scotland's international human rights obligations. The SNAP encompasses the UN Convention on Rights of Disabled People and reinforces the Scottish Government's commitment to promoting and protecting human rights for all.

## **See Hear: A strategic framework for meeting the needs of people with a sensory impairment in Scotland (2014)**

People with learning disabilities often have other physical and/or sensory disabilities, so the Scottish Government's strategy for sensory impairment, published in April 2014, has particular relevance to many people with a learning disability. The strategy provides a strategic framework for the development of sensory impairment services and support and provides a model care pathway to ensure better working relationships and service provision for users and carers. The pathway acknowledges that service users may have different needs and expectations. The strategy sets out the following objectives:

- The seamless provision of assessment, care and support to children and adults with a sensory impairment;
- Children and adults with a sensory impairment should expect the same access to education, employment, healthcare, social care and leisure as everyone else;
- People who have or develop a sensory loss understand what this loss will mean for them;
- People who have or develop a sensory loss are able to access information and be supported to take the maximum possible control over living as independently as possible, while also getting direct assistance when needed: appropriate communication is critical to this; and
- Children and young people with a sensory impairment should expect appropriate and timely intervention.

## **National Health and Wellbeing Outcomes 2015**

These are set out under the preceding Vision and Outcomes section of this document.

## **National Dementia Strategy 2017-20**

People with learning disabilities have significantly greater prevalence of dementia and early-onset dementia than the population at large, so the national dementia strategy is very relevant for the care and support of people with learning disabilities, so affected.

This is Scotland's third National Dementia Strategy. It builds on progress over the last ten years in transforming services and improving outcomes for people with dementia and their families and carers.

The first strategy focused on improving the quality of dementia services through more timely diagnosis and on better care and treatment. The second focused on improving post diagnostic support and strengthening integrated and person centred support. With a continued focus on improving the quality of care, this 2017 strategy sets out 21 commitments around work on diagnosis, including post-diagnostic support; care co-ordination; end of life and palliative care; workforce development and capability; data and information; and research. At the heart of this strategy is recognition of the need to ensure a person-centred and flexible approach to providing support at all stages of the care journey.

### **3 LOCAL POLICY AND COMMUNITY PLANNING**

#### **East Dunbartonshire Health and Social Care Partnership's Strategic Plan**

The Health and Social Care Partnership's Strategic Plan is the overarching strategy for all of the planning and improvement activity for the Partnership. It sets out how we will plan and deliver services for the area over the medium term, using the integrated budgets under the Partnership's control.

Partners and stakeholders must be fully engaged in the preparation, publication and review of the Strategic Plan, in order to establish a meaningful co-productive approach, to enable us to deliver the national outcomes for health and wellbeing, and achieve the core aims of integration

It also articulates how the Community Planning Partnership intends to meet a number of its 3-year local outcomes. The Partnership priorities in the 2018 Strategic Plan are:

- Promoting positive health and wellbeing, preventing ill-health, and building strong communities;
- Enhancing the quality of life and supporting independence for people with long-term conditions
- Keep people out of hospital when better care can be delivered closer to home;
- Address inequalities and support people to have more choice and control;
- Ensuring people have a positive experience of health and social care services;
- Promote independent living through the provision of suitable housing accommodation and support;
- Improve support for Carers enabling them to continue in their caring role;
- Optimise efficiency, effectiveness and flexibility through continued planning, reviewing service provision.

The Strategic Plan covers very many service areas so cannot provide the level of detail that may be necessary in particular areas. The Adult Learning Disability Strategy 2018-23 is designed to provide this level of detail in the field of adult learning disability, but its objectives sit within the overarching Strategic Plan.

#### **East Dunbartonshire Local Outcome and Improvement Plan (LOIP) 2017-27**

Community Planning is about a range of local organisations working together to plan and provide for the wellbeing of their communities. The main aims of Community Planning are:

- to ensure that people and communities are genuinely engaged in the decisions made on public services which affect them
- to improve the services provided by local service providers through closer more co-ordinated working

- to help public sector partners collectively to identify the needs and views of individuals and communities and to assess how they can best be delivered

The Community Empowerment (Scotland) Act 2015 requires each Community Planning Partnership (CPP) to produce and publish a Local Outcomes Improvement Plan (LOIP). The LOIP is a key element in the delivery of public service reform at local level. It provides a vision and focus with agreed local priorities, providing a shared, explicit and binding plan for local communities in each CPP area.

East Dunbartonshire's LOIP affects everyone who works or lives in the area, but has priorities and planned outcomes that will have particular significance for people with a learning disability and their carers. The local outcomes are that:

- East Dunbartonshire has a sustainable and resilient economy with busy town and village centres, a growing business base, and is an attractive place in which to visit and invest;
- Our people are equipped with knowledge, skills and training to enable them to progress to employment;
- Our children and young people are safe, healthy and ready to learn;
- East Dunbartonshire is a safe and sustainable environment in which to live, work and visit;
- Our people experience good physical and mental health and wellbeing with access to a quality built and natural environment in which to lead healthier and more active lifestyles;
- Our older population and our more vulnerable citizens are supported to maintain their independence and enjoy a high quality of life, and they, their families and carers benefit from effective care and support services.

In order to achieve the Community Planning Partnership's vision, it applies a number guiding principles. These will, by extension, also apply to this Learning Disability Strategy:

### **Coproduction and engagement**

We will continuously strive to understand the different needs of our communities, supporting them to strengthen their own communities and involving them in the design and delivery of services.

### **Best Value**

We will endeavour to maintain an appropriate balance between the quality of the performance of our functions, the cost of that performance, and the cost to people of any service provided. In maintaining that balance, the Partnership shall have regard to safety, efficiency, effectiveness and economy.

### **Evidence based planning**

We will share information and data to inform robust and transparent decision making, planning and evaluation of our impact in partnership and implementing improvement practices.

### **Fair and equitable services**

We will plan and deliver services which account for the different needs of population groups who share a characteristic protected by the Equality Act.

### **Planning for place**

We will target resources where they are most needed to reduce disadvantage caused by socio-economic inequality. This is known as using a “Place” approach.

### **Prevention and early intervention**

We will direct resources with the aim of improving resilience and preventing or mitigating poorer outcomes.

### **Sustainability**

We will create the conditions for a better quality of life for East Dunbartonshire residents, by recognising their health and wellbeing needs without compromising the quality of our built, natural and historic environment. In doing so we will build resilience to a changing climate, use our natural resources prudently and consider the long term implications of our decisions for present and future generations.

### **East Dunbartonshire Employability Strategy and Action Plan 2016-17**

This local strategy and action plan sets out how the Community Planning Partnership intends to take forward its outcome that “our people are equipped with knowledge, skills and training to enable them to progress to employment”. It identifies a priority to improve access to and sustainability of employment for people with significant barriers due to physical and/or learning disabilities. An action plan has been developed to:

- Target provision for clients with significant barriers supported by resources from City Deal and ESF;
- Work with employers to support this group into employment;
- Examine pathways for those with undiagnosed additional support needs;
- Improve partners’ skills in relation to preventative approaches to mental health;
- Improve partnership working between employability provision and support for their barriers, i.e., provide a more holistic and person-centred approach.

### **Greater Glasgow & Clyde NHS Board Learning Disability Strategy “A Strategy for the Future” 2012**

“A Strategy for the Future” established a clear position on the function and purpose of specialist adult NHS learning disability services in NHS Greater Glasgow and Clyde. It aimed to create a strong sense of the unique contribution of specialist practitioners in helping people with learning disability achieve a good quality of life.

During 2013/14, this strategy led to a detailed service specification setting out the role and function of each profession and new ways of working across Greater Glasgow and Clyde. The Service Specification aims to address the inequalities faced by people with a learning disability and in so doing, sought to address the main health recommendations of the “*Keys to Life*”. The responsibility for taking forward the strategy and the service specification now rests with each Health and Social Care Partnership.

### **Greater Glasgow & Clyde NHS Board “Designing an Effective Assessment and Treatment Model”**

When NHS inpatient services are used because people require mental health care and treatment there is a higher likelihood of treatment being successful and people returning home in a reasonable timeframe. We therefore know that when used for the designed and intended purpose that the current model can work well.

However, when people come into hospital primarily because of challenging behaviour which results in placement breakdown and isn’t symptomatic of mental illness, they are far more likely to remain in hospital for a long period of time and experience poorer outcomes.

This report details engagement with people with learning disabilities and those who support them in exploring what should be done next and makes a number of recommendations. The Health Board will be working with Health and Social Care Partnerships to take forward these recommendations, in order to redesign inpatient assessment and treatment services for the future. This will focus on exploring local ways which support people well without the need for admission. This may result in a variety of initiatives across NHS GGC but the aim is to devise a system wide strategy linked with and complementary to the assessment and treatment service function.

East Dunbartonshire HSCP has a strong track record for careful and appropriate use of specialist learning disability inpatient services, with well planned discharge arrangements. We will work closely with the Health Board and other Partnership areas to ensure we sustain this good practice and that service redesign works for local people.

### **East Dunbartonshire Health and Social Care Partnership’s Strategic Plan**

The HSCP’s Strategic Plan sets out how the joint NHS and local authority social work budget should be used to meet national and local health and wellbeing outcomes. It is an integrated plan that also articulates how the Community Planning Partnership intends to meet a number of its 3-year local outcomes. The Partnership priorities in the 2018 Strategic Plan are:

- Promoting positive health and wellbeing, preventing ill-health, and building strong communities;
- Enhancing the quality of life and supporting independence for people with long-term conditions
- Keep people out of hospital when better care can be delivered closer to home;
- Address inequalities and support people to have more choice and control;

- Ensuring people have a positive experience of health and social care services;
- Promote independent living through the provision of suitable housing accommodation and support;
- Improve support for Carers enabling them to continue in their caring role;
- Optimise efficiency, effectiveness and flexibility through continued planning, reviewing service provision.

### **East Dunbartonshire Autism Strategy 2014-24**

In 2014, an East Dunbartonshire Autism Strategy was launched to reflect the Scottish Strategy for Autism 2011, with a local vision: “*Our vision is to support and empower individuals and families affected by autism. We will aim to raise public and professional awareness of autism and strive to help children and adults with autism to make choices and achieve their potential in their home, school and community*”. The vision is supported by 19 key objectives and a detailed action plan. The links between the Autism Strategy and the Learning Disability Strategy are strong, as many people have dual diagnosis and their needs have to be considered accordingly.

## The Views and Experiences of People who Use Services, their Families and Carers

There are many sources of information we use to find out people's views and experiences of the services they receive and the quality of the outcomes that they deliver. These contribute to our understanding of the things that are important for people who use services, and where we need to improve.

### Health and Care Experience Survey 2015/16

The table below provides information on the results of a national annual survey on people's experience with health and social care services in East Dunbartonshire. The survey was sent to 10,596 people registered with GP practices in the area. It reflects the views and experiences of people receiving services generally, including those with learning disabilities.

Care, support and help with everyday living	Number of responses	% positive 2015/16	Difference from Scotland
People take account of the things that matter to service users	140	90%	+5%
Service users have a say in how their help, care or support is provided	133	86%	+7%
Service users are aware of the help, care and support options available	137	87%	+11%
Service users are treated with respect	144	94%	+4%
Service users are treated with compassion and understanding	141	95%	+8%
Service users' health and care services are well coordinated	138	75%	-1%
Service users are supported to live as independently as possible	138	88%	+5%
Service users feel safe	135	86%	+2%
The help, care or support improves service users' quality of life	133	86%	+2%
Rating of overall help, care or support services	152	84%	+3%

Caring responsibilities	Number of responses	% positive	Difference from Scotland
Carers have a good balance between caring and other things in their life	266	71%	+2%
Caring has had a negative impact on carers' health and wellbeing	249	44%	+4%
Carers have a say in the services provided for the person they look after	249	62%	+12%
Local services are well coordinated for the people carers look after	242	47%	+5%
Carers feel supported to continue caring	244	45%	+4%

The survey indicates that people are more satisfied with service experience in East Dunbartonshire than is reported across Scotland as a whole. However, coordination between services scores less well. The experience of carers across Scotland is not generally as positive; in East Dunbartonshire it is a little better, but there is still much to do.

### **Specialist NHS Learning Disability Services Review (linked to “A Strategy for the Future”) 2013**

The findings of this work identified the following areas that needed improvement:

- Recommendations from the National Health Needs Assessment (HNA) for people with learning disability in Scotland and the Local HNA 2011 were not fully implemented;
- There was limited focus on enabling access to mainstream services or the development of self management and anticipatory care;
- There was significant variations in the interventions delivered by different professions in different geographic areas;
- There was underdeveloped and variable care pathways within learning disability services and with wider mainstream NHS Services;
- There were many examples of cumbersome and inefficient patient pathway processes between professions / services;
- There were unacceptable waiting times in some areas and for some interventions;
- There was a need for improved workforce planning;
- There were risks in some professions due to small staff numbers;
- Clinical Governance needed strengthening.

The experiences of people receiving these specialist NHS services contributed to the findings above. Since that time, substantial work has been undertaken to address the issues and that work continues, within the overall framework of “*Keys to Life*”.

### **Evaluation of Personal Outcomes Met by People with Learning Disabilities 2014**

Everyone with a learning Disability who has their personal and social care needs assessed by the HSCP’s Joint Learning Disability Team, should have the support they receive targeted to meet the outcomes that are important to them. When the service user’s needs and services are reviewed, it should be considered how well these outcomes have been met. The findings should then shape their future service activity. Analysis was been carried out to establish how well service-user outcomes were met in East Dunbartonshire. These are set out below, by outcome theme.

Personal Outcome	Fully Met	Partially Met	Not Met	Not Known
Community life	37%	51%	5%	7%
Family relationships	32%	52%	6%	10%
Managing money	47%	40%	6%	7%
Health and wellbeing	35%	52%	9%	4%

Personal Outcome	Fully Met	Partially Met	Not Met	Not Known
Home and domestic environment	28%	57%	6%	9%
Daily living and care	31%	59%	3%	7%
Living safely	35%	51%	3%	11%
Views of family as to whether outcomes have been met	15%	77%	4%	4%

Outcomes fully met	Older people team	Joint Learning Disability Team	Physical Disability & Sensory Impairment Team	Joint Mental Health Team	Alcohol and Drugs Service
	85%	33%	71%	44%	49%

It would not be expected that all personal outcomes would be fully achieved over a review period, but with learning disability fewer were fully met than in other service areas. These findings have been used to support more targeted care and support and to ensure that outcomes set with service-users are realistic and achievable.

### **Guardianship and Transitions Survey 2015**

This was a study to support a post-graduate research project and involved 25 carers of young adults with learning disabilities from East Dunbartonshire, who had taken out Guardianship Orders to support the decision-making processes regarding the care and support of the person they were caring for. A strong finding of this survey was that the carers had fears about the transition process between childhood and adulthood, when the person they cared for would undergo substantial upheaval and change, with uncertainties about future plans which involved substantial stress for them.

### **Interviews with Learning Disability and Commissioning Managers 2017**

In the preparation of this strategy, a series of discussions was held with managers involved day-to-day in the planning, care, support and commissioning of services for people with learning disabilities. The views expressed were highly consistent:

- That children and young people with learning disabilities in East Dunbartonshire are generally well supported, with high levels of provision compared to many other areas of Scotland. This can then lead to anxiety for family and carers when the young person reaches adulthood and loses the statutory service protection that is a feature of the legal responsibilities placed on local authorities in respect of children's services;
- That adult services in East Dunbartonshire have compared very well with other areas of Scotland, but that some local services are now becoming outdated and less well suited to the levels of complexity that are presented by some of the people we support;

- That child to adult transition processes need to improve, to ensure earlier and more effective planning, resulting in less worry and more clarity for service-users, and their families and carers;
- That there is a need to consider how existing resources are used, to make best use of these resources, to maximise partnership opportunities and ensure sustainable services in the future;
- To further develop personalisation as part of Self-directed Support, with robust and consistent systems for setting individual budgets.

### **Health and Social Care Strategic Plan Survey 2017**

In August and September 2017, three consultation events were held by East Dunbartonshire Health & Social Care Partnership (HSCP), to inform the development of the strategic plan (2018/21). In total 111 participants engaged in the process, discussing and identifying action needed in the following areas:

- Keeping people healthy
- Improving access to services
- Reducing unnecessary hospital admissions and supporting people to live at home or in a homely setting
- Supporting carers

The results of this survey will also be used to inform the detail of the Learning Disability Implementation Plan that will flow from this document, as described in the next section.

# Our Priorities for Improvement and Making it Happen

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## Where We Need to Improve: Summary

The National Learning Disability Strategy “*Keys to Life*” provides the overall framework within which our local learning disability strategy should operate. It also needs to contribute directly to the East Dunbartonshire Health and Social Care Partnership’s Strategic Plan and the priorities that are set out in that document.

“*Working together to deliver better outcomes for people with learning disabilities, and their families and carers*” is our vision, which places partnership and joint working at the heart of how we improve the lives of people with learning disabilities and the people who care for them.

National statistics demonstrate that in East Dunbartonshire:

- Prevalence of adult learning disability in East Dunbartonshire is in line with the Scottish average;
- We spend approximately 8% more than the Scottish average on learning disability services, but we are not in the highest spending quartile of Partnerships;
- Our configuration of accommodation and support arrangements is closely aligned with arrangements across Scotland as a whole;
- We have more people with learning disabilities engaged in supported employment and day centre services than is the case in most Partnership areas.

The expressed and reflected views of service-users, their families, staff and other stakeholders demonstrate that there are important service areas and processes that would benefit from improvement, including: transitions, modernisation of day services, better co-ordination between services, more personalisation and self-directed support, better support for carers and continued development of specialist NHS services in line with *A Strategy for the Future*. It has also been identified that some of our accommodation and support options could operate more effectively and efficiently.

## Improvement Themes

There are **6 Improvement Themes** that have emerged from the review of the national and local context and from the views of stakeholders, as set out in this strategy document:

1. To improve the planning for young people with learning disabilities transitioning from childhood to adulthood, with early involvement of parents, carers and the young people themselves;
2. To review and redesign accommodation-based and day support services (including employability), to modernise them, provide them locally wherever possible, make them fit for purpose and of high quality for the people who need them and ensure they are sustainable for the future;

3. To work in partnership to ensure that specialist NHS services for people with learning disabilities are improved and developed in line with the Health Board's improvement programmes "A Strategy for the Future" and "Designing an Effective Assessment and Treatment Model";
4. To continue to embed the principles of personalisation and Self-Directed Support, to encourage choice and independence within a framework that ensures fairness and consistency;
5. To continue to follow the principles and recommendations set out in "*Keys to Life*", to ensure that the best possible outcomes are being met for people with learning disabilities, their families and carers, within the resources available.
6. To ensure that our resource allocation processes are fair and consistent, and that we maximise efficiencies to secure Best Value for the people we support and the wider community.

### **Next Steps**

Each of these Improvement Themes involves a lot of work and will each need a clear strategy of its own. As the detail is worked through, the contributions of service-users, families and carers, staff and provider organisations will be crucial to ensure we focus on the right things. We need to make improvements that will modernise services, support people with learning disabilities to maximise their independence and quality of life and ensure we work together effectively. Importantly, we also need to ensure that in the face of financial pressures, we support people fairly and consistently.

An **Implementation Plan** will be developed as a consequence of this strategy, based on the 6 Improvement Themes set out above and linked to the Strategic Priorities set out in the Partnership's overarching Strategic Plan.

This implementation plan will be consulted upon and overseen by the Health and Social Care Partnership Board through representation by service users, carers, the Third and Independent Sectors and staff. Headline progress will also be reported and monitored as part of the delivery of the overarching Strategic Plan.

The conclusions from this strategy will also contribute towards the next East Dunbartonshire Carers' Strategy, in order to improve the experience and outcomes for the carers who devote so much of their time to support people with learning disabilities. This will also include the obligations and expectations set out in the Carers (Scotland) Act 2016.



An easy read summary version of this Strategy is also available. If you would like this, it can be found on the East Dunbartonshire Council website by following the links to Health and Social Care and then Disability Services / Learning Disability. Alternatively, we can send a copy by post or email, if you call us at 0300 123 4510.

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Communications Team at:

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

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