



Herefordshire
Clinical Commissioning Group

Herefordshire Learning Disability Strategy

2018 to 2028

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1. Introduction

Welcome to the Herefordshire Learning Disability Strategy. This document sets out the long term commissioning plans of Herefordshire Council and Herefordshire Clinical Commissioning Group with and on behalf of people with a learning disability and their family carers. In tandem with the council's Preparing for Adulthood Protocol this strategy also includes young people aged 14 to 25 preparing for adulthood. The work in this phase of a young person's life is crucial in achieving successful outcomes and taking on the rights, opportunities and responsibilities of adult life.

The council has a statutory responsibility to ensure the well-being and safety of all vulnerable adults across a wide range of living activities and the clinical commissioning group has a statutory responsibility to ensure the provision of universal and specialist health care in order to improve the health of the whole community. As part of these overarching responsibilities and as commissioning organisations committed to a healthier, wealthier and more inclusive Herefordshire, we want to work together with the people who use and deliver all kinds of services to help Herefordshire be a place that universally celebrates people with learning disabilities.

We believe that people with a learning disability have many skills, talents and aspirations, enabling them to have an active role in our shared communities through good integration and to contribute to economic growth through employment and training. We want to make sure that people with a learning disability can live as independently and safely as possible, have the best chance of long-term good health and are genuinely able to choose and influence the support they require to achieve these life outcomes. If someone is unable to make or articulate that choice, they should be assisted by a skilled circle of supporters to work in that person's best interest and to place them at the centre of any decisions.

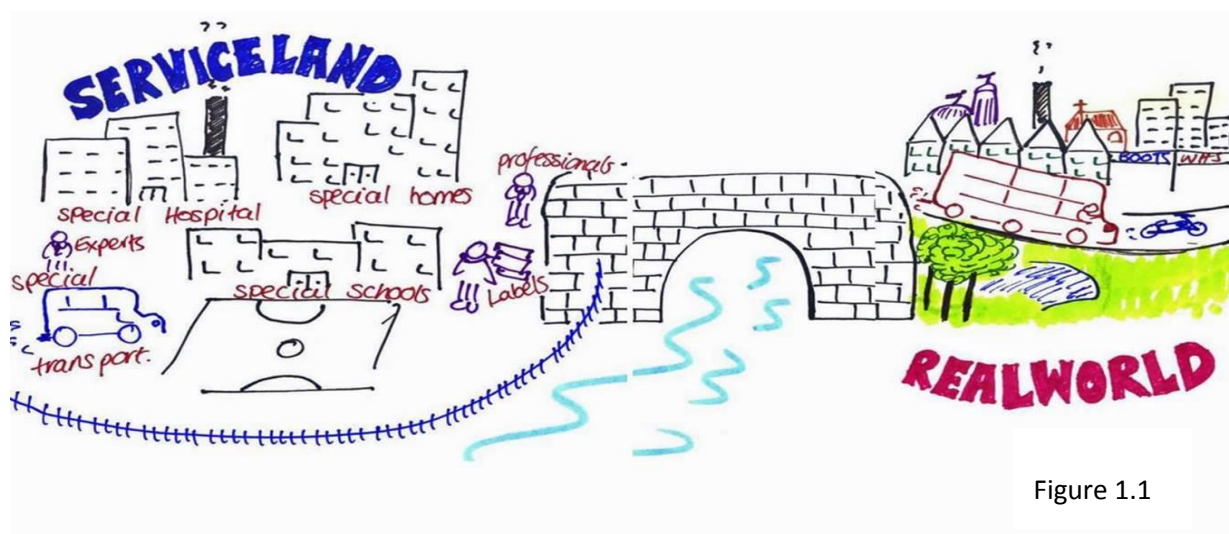


Figure 1.1

It is important that we collectively move away from the idea of separate services and fully adopt the principle of supporting people with learning disabilities to successfully

integrate, including where they live, where they work and spend their days; how they spend their leisure time and how they access services such as healthcare. The illustration above (Fig. 1.1), which reflects the challenge locally, was produced by Community Catalysts as part of a wider national conversation with people with learning disabilities about citizenship and shows how the creation of 'special' services has reduced their ability to live what they perceive to be ordinary lives. This strategy is one of the building blocks to help achieve these ambitions and enable people with learning disabilities to have the same choices and opportunities that the majority of our population has.

This strategy has been developed within the context of very challenging public finances both nationally and locally; in Herefordshire we continue to face a very difficult financial future across health and social care. As commissioners and providers, it challenges the system to do more with less; by learning from others; using technology intelligently; making better use of universal services and by working collaboratively across the independent & voluntary sectors and with the wider community wherever possible. Most importantly, we must enable people with learning disabilities to reduce their dependence on funded support services by creating opportunities for them to maximise their independence.

Our change of approach is based on identifying the life outcomes that are important to people with learning disabilities and ensuring that ALL of our commissioning activity is focused on meeting those outcomes. By identifying activities and outputs that enable people with learning disabilities to achieve the outcomes framed by the aspirations originally set out in the in the government's Valuing People and Valuing People Now white papers between 2001 and 2009, we also contribute to a whole range of wider outcomes that benefit the whole population of the county. This has been achieved through having conversations with people with lived experience, family carers, health & social care professionals and organisations represented on the Learning Disability Partnership Board. These conversations form the building blocks of a series of outcomes and activities.

Importantly, commissioning is not exclusive to the council or the national health service – the approach set out in this document is intended to guide and support future commissioning actions at all levels and by anyone.. This can range from a person with a learning disability using their individual budget to purchase a single community activity to a statutory organisation procuring a multi-million pound service for the whole learning disability population.

Finally, recognising the role of the council and clinical commissioning group in enabling health and wellbeing for the whole population of Herefordshire, we want to make sure that we are accountable in our ambition to enable good quality services, opportunities and resources for the learning disability community in Herefordshire over the next decade and beyond.

We look forward to working with you all to make these outcomes a reality for people with learning disabilities across the county.

Insert the signatures of sponsoring individuals from Council and CCG



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2. Learning Disability Social Context

In 2001 the government published the most significant framework document in the history of learning disability social policy; 'Valuing People: A New Strategy for Learning Disability for the 21st Century'.

Almost 20 years on, it remains the benchmark for the principles underpinning the provision of services for people with a learning disability and has been followed by policy and legislation to consolidate and support the Valuing People vision, including Mental Capacity Act (2005); Our Health, Our Care, Our Say (DH 2006); Death by Indifference (Mencap 2007); 'Valuing People Now' (DH 2009); Disability and Equality Act (2010); Care Act (2014) and Transforming Care (DH 2015).

There are 11 key outcomes set out within the White Paper. Importantly, given its themes of rights, independence, choice and inclusion, there are also links to the equally challenging Human Rights Act 1998 and the Disability Discrimination Act 1995. This work spawned learning disability advocacy movements such as Choice & Control, as well as underpinning much of the developmental work ahead of the Care Act in 2014

In summary, the 11 key objectives of Valuing People are:

1. Maximising opportunities for disabled children.
In all areas of life including education, health and social care; whether with families or elsewhere.
2. Transition into adult life.
As young people move into adulthood, ensure continuity of care and support for the young person and their family and provide equality of opportunity in order to enable as many young people as possible to participate in education, training and employment.
3. Enable people to have more control over their own lives.
This can be achieved by enabling people with learning disability to have as much choice and control as possible through advocacy and person centred planning (and by implication; personal budgets/direct payments) to planning the services they need.
4. Supporting carers.
To increase the help and support carers receive from all local agencies in order to fulfil their caring role more effectively.
5. Good health.
To enable people with learning disability to gain access to a health service designed

to meet their individual needs.

6. Housing.

To enable people with learning disability to have greater choice and control over where and how they live.

7. Fulfilling lives

To enable people with learning disabilities to lead full and purposeful lives in communities and develop a range of friendships, activities and relationships.

8. Moving into employment.

To enable more people with learning disabilities to participate in as many forms of employment as possible and to make a contribution to the world of work. This might also include voluntary work.

9. Quality.

To ensure that all agencies provide a high quality, evidence based and continually improving quality of service that promotes both good outcomes and best value.

10. Workforce and planning.

To make sure that all health and social care staff working with people with a learning disability are appropriately trained, skilled and qualified and to promote a better understanding of people with a learning disability.

11. Partnership working.

To promote a more fully integrated and holistic way of working between all agencies to ensure uniformity and consistency of quality and provision for people in the commissioning and delivery of services.

Now in 2018 it is clear there is still much work to do locally. People with learning disabilities have stated they want:

- To have their voices and choices valued;
- To have equality of access to homes, work and universal services in the wider community;
- To have an expectation of good healthcare that contributes to a healthy life, and;
- To have an opportunity to enjoy the rights and responsibilities of ordinary citizenship.

The range of choices and opportunities for people with learning disabilities in Herefordshire has come a long way in enabling them to have choice and control over their own lives. This document is intended to set out a shared framework for enabling change within the learning disability community over the next few years in Herefordshire, co-produced and implemented by all those that require support, deliver support across all sectors, assess need, manage specialist or universal resources or help to shape the place we live.

Included in this strategy is the work undertaken with health partners such as ²Gether Foundation NHS Trust, the Herefordshire Clinical Commissioning Group, and Children's Services, because it's well understood that what is needed is a whole life approach that minimises the hurdles between different areas of service. Herefordshire's learning disability community has already made much progress and collectively wants to do so much more in the future. It is hoped that local communities, providers and people will embrace this vision and move forward to improve the health and wellbeing, quality of services and range of life choices for people with learning disabilities.

In order to support Herefordshire Council and Herefordshire Clinical Commissioning Group to continue to work towards the universal delivery of these principles for the local learning disability community, the Herefordshire Learning Disability Strategy focuses on 4 key priorities that encapsulate the ongoing delivery of the core principles of the Valuing People vision.

Priority 1 is concerned with where people with learning disabilities live;

Priority 2 is concerned with what people with learning disabilities do during the day, whether that is paid employment, volunteering, training or structured activities;

Priority 3 is concerned with people with learning disabilities being healthy, access to good healthcare and challenging health inequality;

Priority 4 is concerned with enabling people with learning disabilities to attain recognisable citizenship and by doing so, have real choice and control over their lives.

3. Strategic Commissioning Principles and Approach

Social care commissioners in local government and the NHS need to acknowledge that their relationship with people with learning disabilities is different. Unlike other groups of customers who generally have shorter periods of need around specific issues, people with learning disabilities and their families generally remain in close contact with statutory services such as social care provision and the NHS for whole lifetimes, from childhood through to old age. They also tend to require support across a wide range of life issues, such as housing, healthcare, personal care, being safe, daytime activities etc.

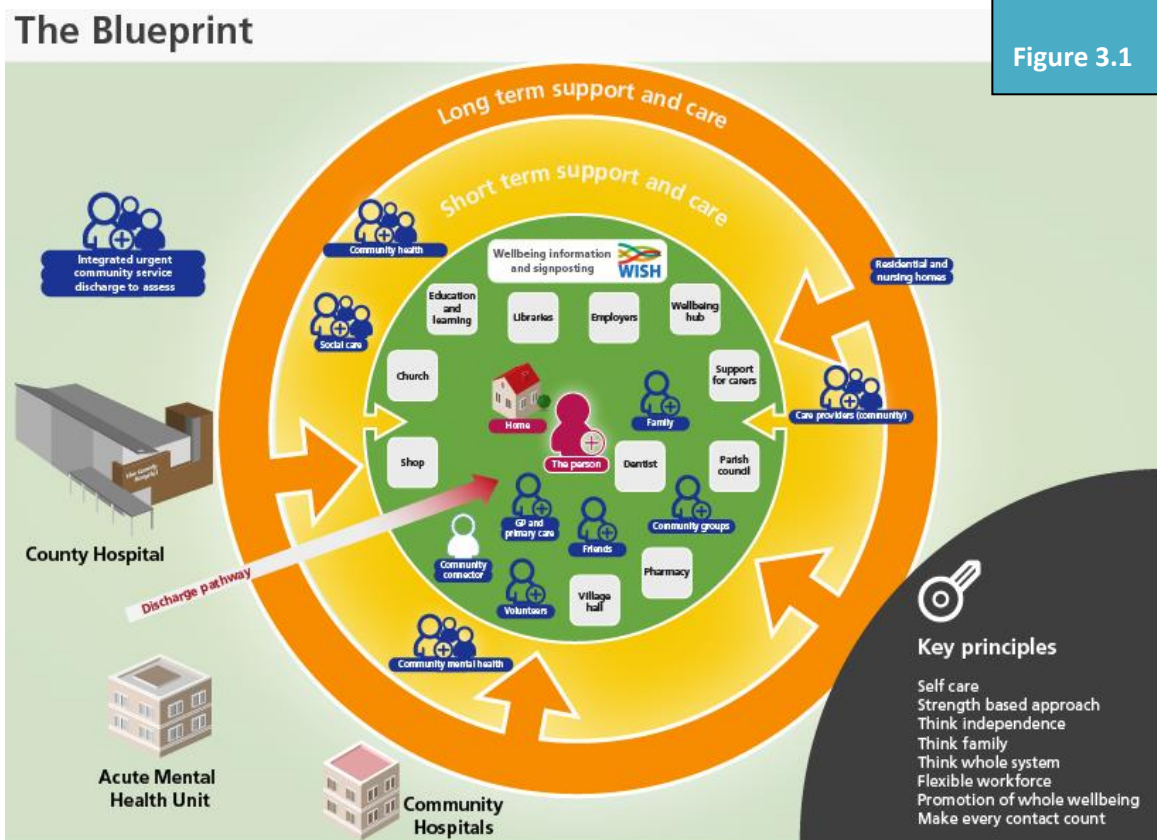
The process of commissioning is changing. Growing use of individual budgets is increasingly turning people with learning disabilities away from being service users, firstly enabling them to become ‘customers’, with all of the expectations of choice and control that this implies and secondly enabling them, along with their diverse circle of support, to become their own commissioners.

Commissioning organisations now have to adapt to the idea that they are no longer simply direct purchasers of a menu of services that are then allocated out to people on the basis of need. They are now also place-shapers, responsible for creating partnerships across users and providers to enable a diverse range of services, opportunities and developments for people with learning disabilities to choose from in order to improve their lives.

To address this effectively and equitably, the role of the council and the clinical commissioning group is to:

- Ensure that the wider learning disability community is engaged in the ongoing commissioning of services by including them in the process of shaping services and opportunities, rather than merely consulting them and their families at the beginning before telling them what we’ve done at the end. Each two-year commissioning programme will be developed in consultation with the Learning Disability Partnership Board, who will advise on the level and method of engagement that is needed with some or all of the learning disability community
- Co-produce plans that don’t go rapidly out of date and that look at the longer term outcomes rather than what can be delivered within the lifetime of the current budget cycle. By engaging the wider community’s skill, experience and imagination to create diverse, economically robust and high quality services that achieve excellent, well-directed outcomes over a lifetime.
- Place greater emphasis on delivering changes that have a measurable and positive lifelong impact on people with learning disability, drawing on Herefordshire’s blueprint for adult social care (in the diagram below) and on the longstanding framework of government policies affecting health and social care for people with learning disabilities. In doing so, commissioning organisations must also develop an understanding of the ways in which an empowered,

engaged and included learning disability population can add to the diversity, well-being and economy of the county.



Herefordshire Council’s Adults Wellbeing Plan 2017 – 2020 states that:

The vision for the council’s adults and wellbeing directorate is that ‘*all adults in Herefordshire live healthy, happy and independent lives within their local communities, for as long as possible with support when they need it*’. This vision is represented in the blueprint diagram above and illustrates an approach where people are supported in their community through family, friends, community groups and good information that enables them to live as fulfilling a life as possible.

Engaged and supportive communities enable people to stay healthy and actively involved for longer, reducing the need for targeted services.

The whole system outcomes model (Fig. 3.2) has been implemented in order that people receive appropriate information and support in a timely manner to enable them to regain as much control over their lives as quickly as possible and avoid or delay the need for formal care.

Whole System Outcomes Model

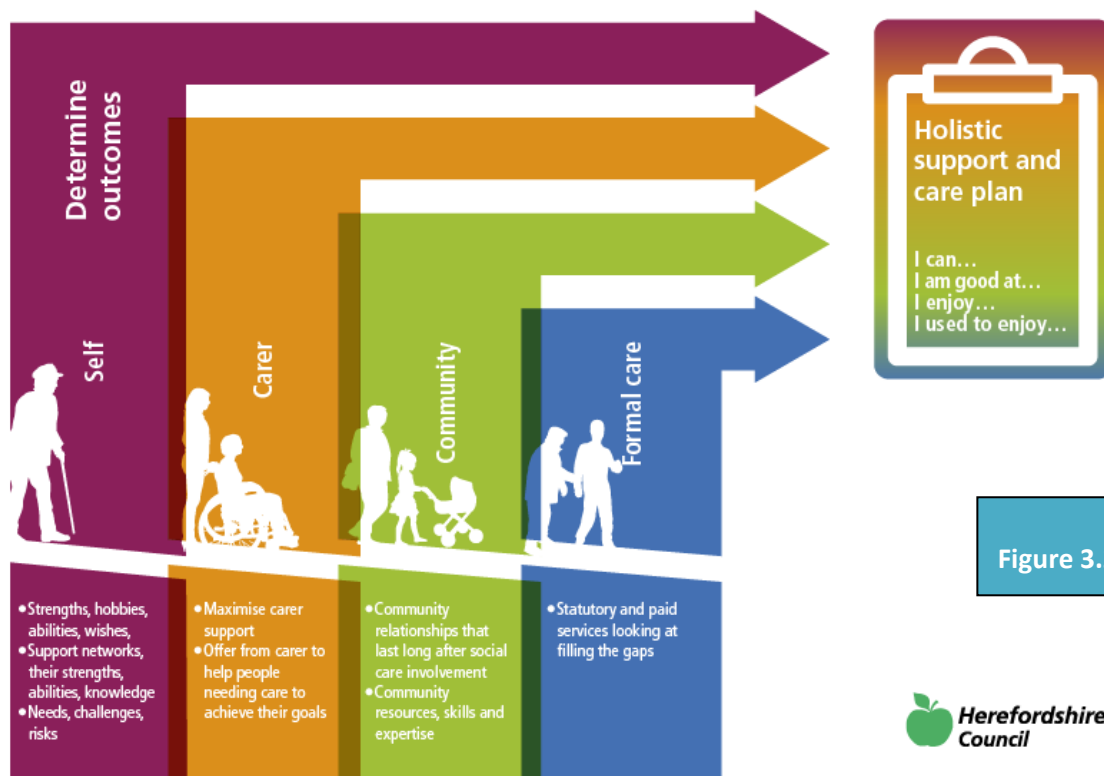


Figure 3.2



Due to the strength-based approach and the desire to see people with learning disabilities adopt an ethos of choice and control, the emphasis is on market shaping and encouraging a diverse range of providers to offer a wider choice of individually focused provision that enables tangible outcomes for services users. Outcomes should describe the tangible ways a person's independence, quality of life and general wellbeing are improved and maintained as a result of a specific commissioned action.

In order to ensure that commissioning decisions are supported with accurate information about local needs and market capability, the council and the CCG are developing three additional processes to underpin the Learning Disability Strategic Commissioning Plan.

1. Learning Disability Biannual Commissioning Plan (Appendix 1)

All the areas for development referred to in the strategy will require further planning and the required detailed inputs, activities and intended outputs will be set out every 2-years in a Learning Disability Biannual Commissioning Plan. These plans will also identify any current relevant delivery co-dependencies with work areas such as housing, primary / acute healthcare, children services and others. This document can be downloaded from the council's website.

2. Learning Disability Market Position Report

A clear and accurate understanding of current market position is essential to carry out effective commissioning. The council and the CCG will carry out a market condition survey every 2 years and publish the findings in a report. The report will look at a range of issues, including the current mix of service providers; a provision

gap analysis; an assessment of known economic risks and opportunities and a schedule of planned procurements.

3. Learning Disability Needs Analysis

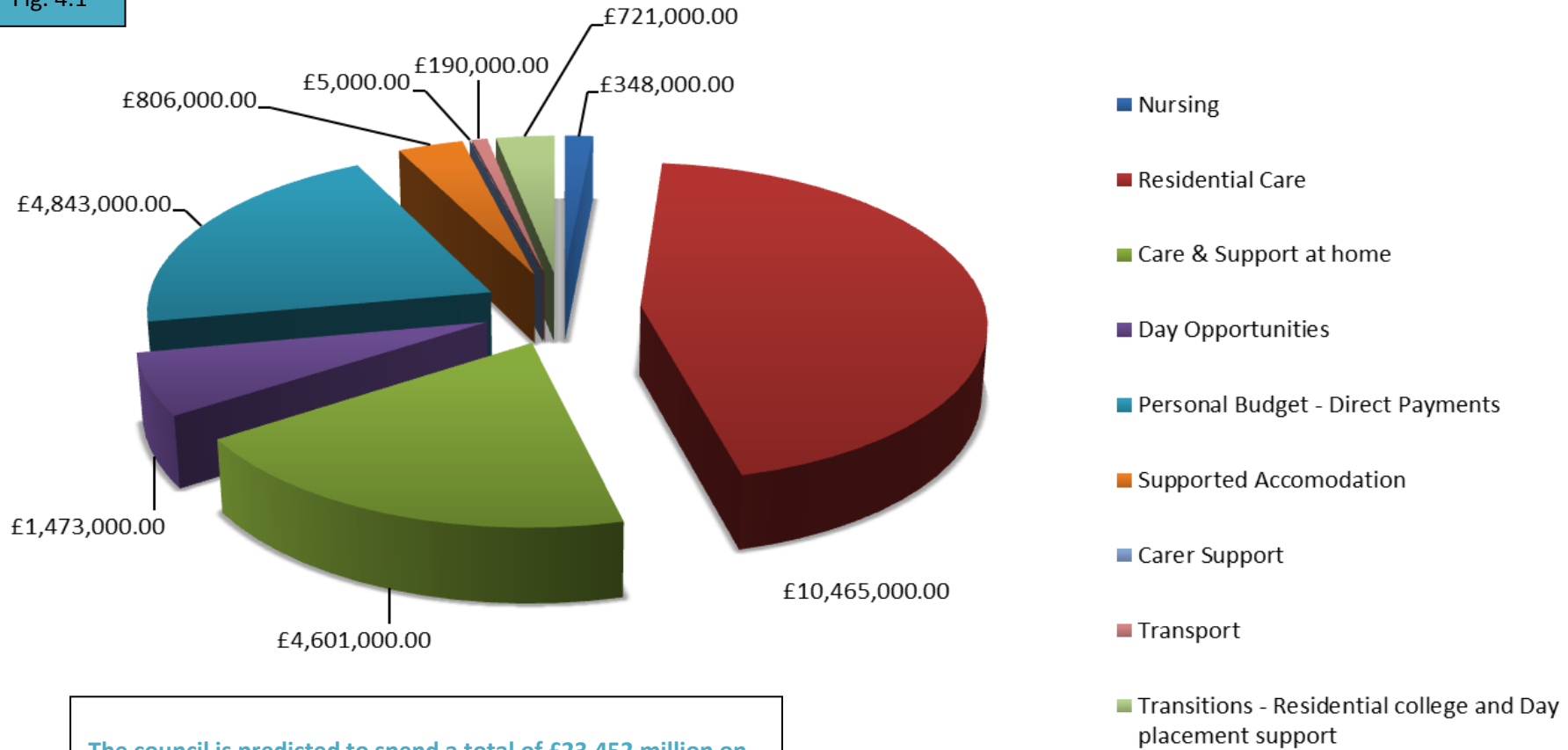
The council, working with commissioning individuals and organisations within the wider learning disability community, will periodically produce a joint Learning Disability Needs Analysis Report. This will set out a detailed demographic analysis of the learning disability population in the County at that time, identifying population trends and changes likely to impact on the kinds of services and resources both providers and commissioning organisations are likely to need over the short and longer term.

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4. Finance: How the money is spent on adult learning disability services

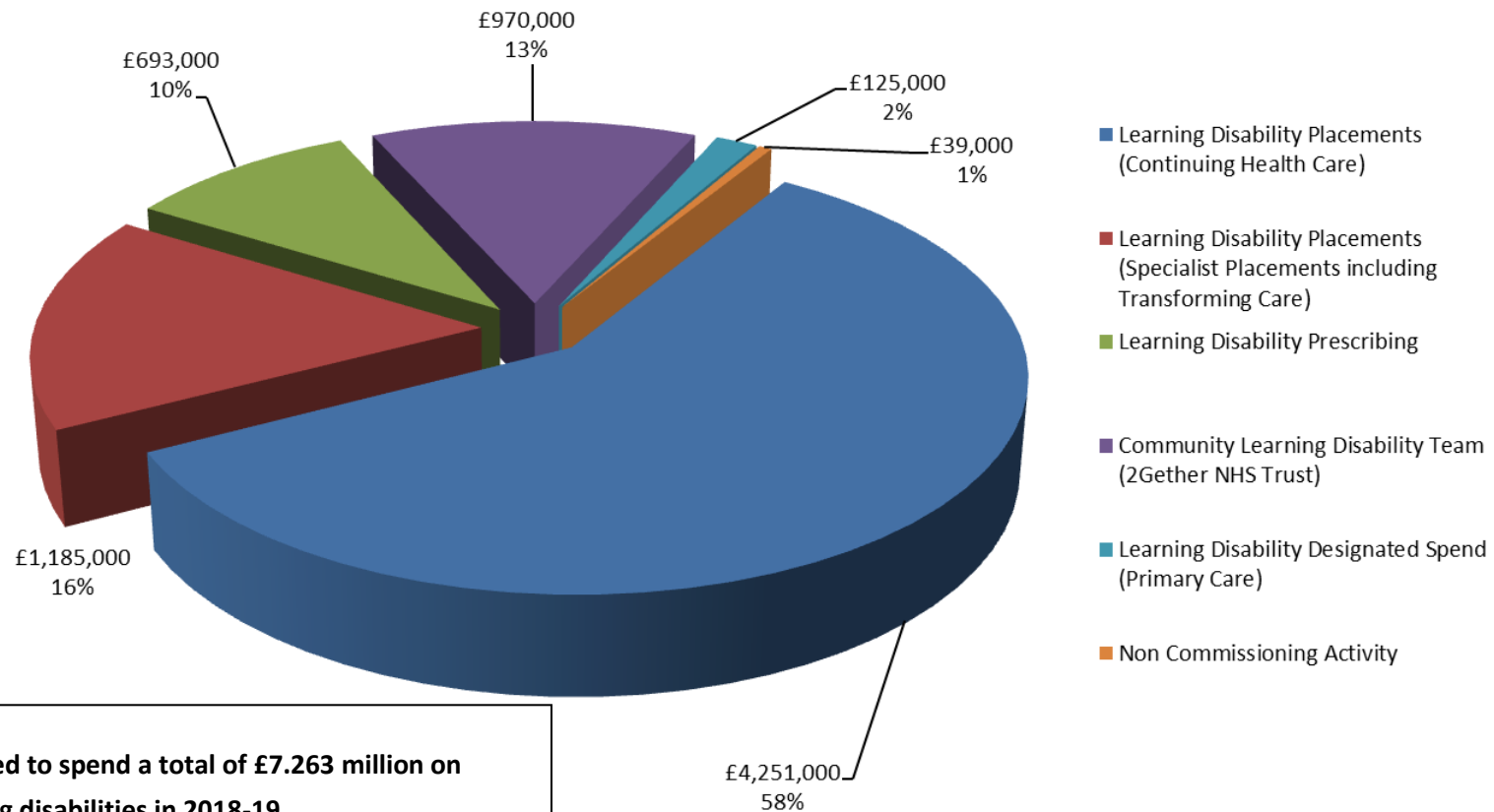
Herefordshire Council - Learning Disability Planned Expenditure (before income) 2018/19

Fig. 4.1



Herefordshire CCG - Learning Disability Planned Spend 2018/19

Fig. 4.2



The CCG is predicted to spend a total of £7.263 million on adults with learning disabilities in 2018-19.

Herefordshire clinical commissioning group also spend approximately £30m per annum on primary medical care which provides significant support to a majority of the people with learning disabilities and their families and carers. In addition, all of the clinical services that the clinical commissioning group commissions are accessed by people with learning disabilities.

5. Identifying Strategic Outcomes

Whilst quantifiable measures such as expenditure and service quality are of huge significance, the true measure of whether a commissioning action has achieved the desired outcome and had a positive impact can only be understood by asking the people affected by it. In order to be meaningful across the wide spectrum of ability and capacity found across the learning disability community, this will require a range of approaches that include and involve families and other key people in addition to people with learning disabilities themselves. To support this, the learning disability commissioning strategy will focus on the delivery of a range of activities over varying time scales, linking the delivery of well-planned and costed commissioning actions to short, medium and long-term outcomes.

When developing a commissioning strategy, stakeholders across the learning disability market need to consider someone's chosen personal outcomes and how they want to achieve them will be reflected in the services that are directly or indirectly commissioned for Herefordshire's citizens. This commissioning response needs to follow the strengths-based approach and whole-systems outcomes model set out in the Herefordshire blueprint for adult social care set out earlier in this document. This is a shift in approach that will impact significantly on individuals with learning disabilities.

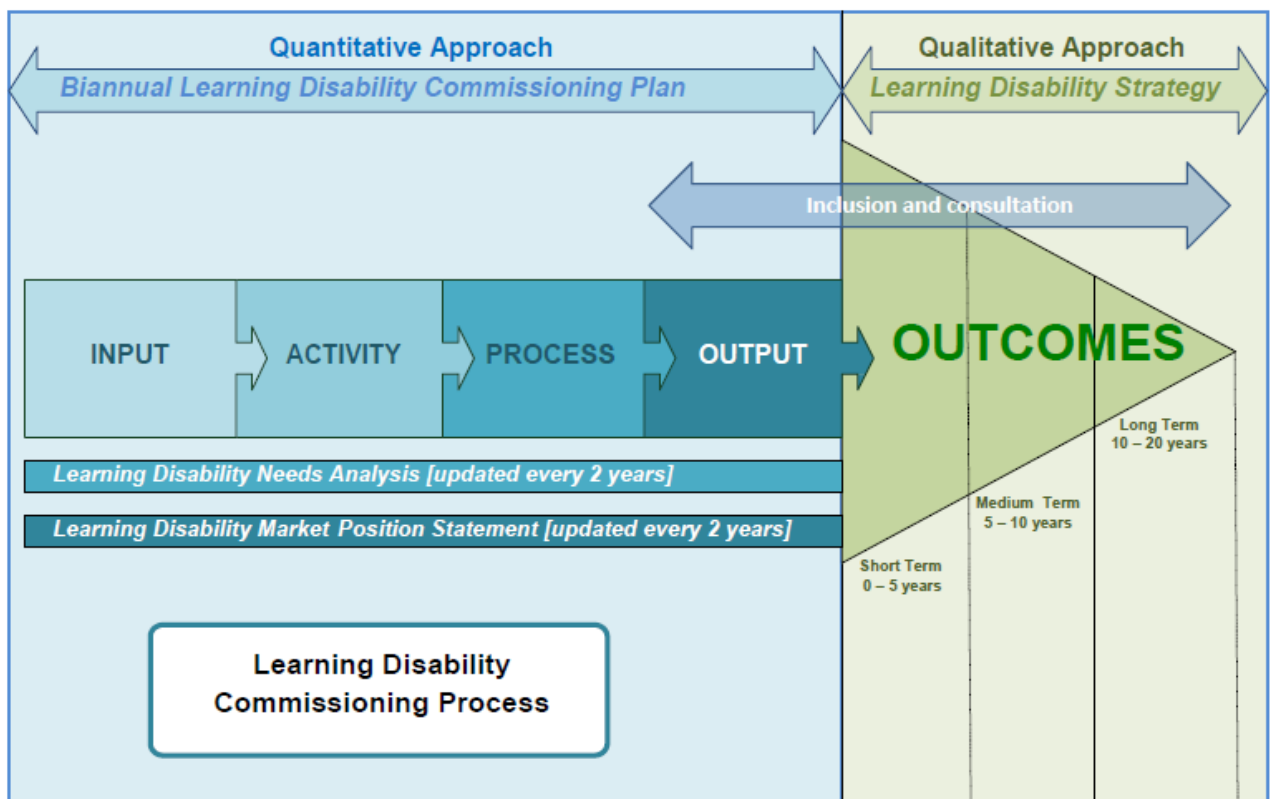
At the same time, the same stakeholders also need to consider how to link personal outcomes to the much wider aspirational lifetime outcomes for the whole learning disability population, as set out in the 4 priorities underpinning this document.

Lastly, in addition to the usual governance process within each commissioning organisation, it is essential that there is an external verifier to hold commissioning organisations to account and ensure the stated outcomes in each of the four commissioning priorities are actually achieved. In this case, the Herefordshire Learning Disability Partnership Board will be supported over the long term to work with the wider learning disability community to monitor progress toward achieving each agreed outcome set out in the commissioning strategy.

In order to organise all of the collected information into a coherent strategic plan, we have used a simple logic modelling process to take the outcomes people with learning disabilities want to achieve and developing each of them into a process that identifies:

- The **inputs** required to make the outcome happen, e.g. human resources; financial resources; time.
- The **activity** required to enable the outcome to happen, e.g. process, planning, etc.
- The **output** to make the outcome happen, e.g. a product or service.

- The intended **short-term outcome**; usually based on activities identified and agreed by a person with a learning disability at the time of an assessment or review with a health or social care professional.
- The intended **medium-term outcome**; these are longer-term whole-life outcomes identified nationally by people with learning disabilities and contained within Valuing People and other strategic learning disability guidance and policy.
- **Health & well-being outcome**; these are the intended strategic outcomes identified by the whole population of Herefordshire.
- **Social impact**; this is the cumulative result that achieving a tier of outcomes successfully will have on Herefordshire’s economy, culture, health and overall well-being.



The Care Act 2014 sets out a list of statutory outcomes that need to be considered (in conjunction with the national eligibility criteria) when assessing individual needs.

Care Act outcomes for adults with care and support needs

- Managing and maintaining nutrition
- Maintaining personal hygiene

- Managing toilet needs
- Being appropriately clothed
- Being able to make use of the adult's home safely
- Maintaining a habitable home environment
- Developing and maintaining family or other personal relationships
- Accessing and engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community, including public transport, and recreational facilities or services
- Carrying out any caring responsibilities the adult has for a child.

Care Act outcomes for carers with support needs

- Carrying out any caring responsibilities the carer has for a child
- Providing care to other persons for whom the carer provides care
- Maintaining a habitable home environment in the carer's home, whether or not this is also the home of the adult needing care
- Managing and maintaining nutrition
- Developing and maintaining family or other personal relationships
- Engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community, including recreational facilities or services
- Engaging in recreational activities.

These outcomes underpin the four priority themes of this strategy:

Priority 1: Where I live

People need to live in the right home, so need good and affordable accommodation options within their local community and designed to meet individual needs. This applies to supported living, family care or residential care, all of them should enable people to live fulfilling lives, respect choice and support inclusion.

Priority 2: What I do During the Day

People need to be a valued part of Herefordshire's communities by being supported to active citizens through paid employment, meaningful training options and opportunities for volunteering for those able to do it. There must be a choice of local support options to offer a satisfying range of activities for people of all abilities, as well as the infrastructure in place to make sure these are safe and of good quality.

Priority 3: Being Healthy and Safe

People need to be healthy, safe and able to access the right medical help quickly and appropriately. Emphasis should be on universal access to mainstream health provision with reasonable adjustment where necessary, rather than assuming that every person with a learning disability needs a specialist service. Over the long-term, all necessary work must be done to reduce health inequalities within the learning disability population.

Priority 4: Citizenship, Choice and Control

In addition to the right blend of services and opportunities, to be fully recognised as citizens, people with learning disabilities need to have choice and control through personal budgets and direct payments, alongside an expectation that they will integrate with, contribute to and become valued members of their community however they choose.

With the support of family and others, they should have a collective voice that is valued and able to influence change. People with learning disabilities should be supported to use the social recognition gained through employment, education, volunteering, independent living within the community to extend their development into relationships, social inclusion, community engagement and the other aspects of choice, control and citizenship that others take for granted.

Preparing for Adulthood Outcomes:

The four strategic priorities for adults are designed to complement the PFA outcomes for young people, thereby supporting the process of transition for young people with learning disabilities entering adult services. By Preparing for Adulthood we mean preparing for:

- Higher or further education and/or employment – this includes exploring different employment options, such as support for becoming self-employed and help from supported employment agencies.
- Independent living – this means young people having choice, control and freedom over their lives and the support they have, their accommodation and living arrangements, including supported living • participating in society, including having friends and supportive relationships, and participating in, and contributing to, the local community.
- Being as healthy as possible in adult life.

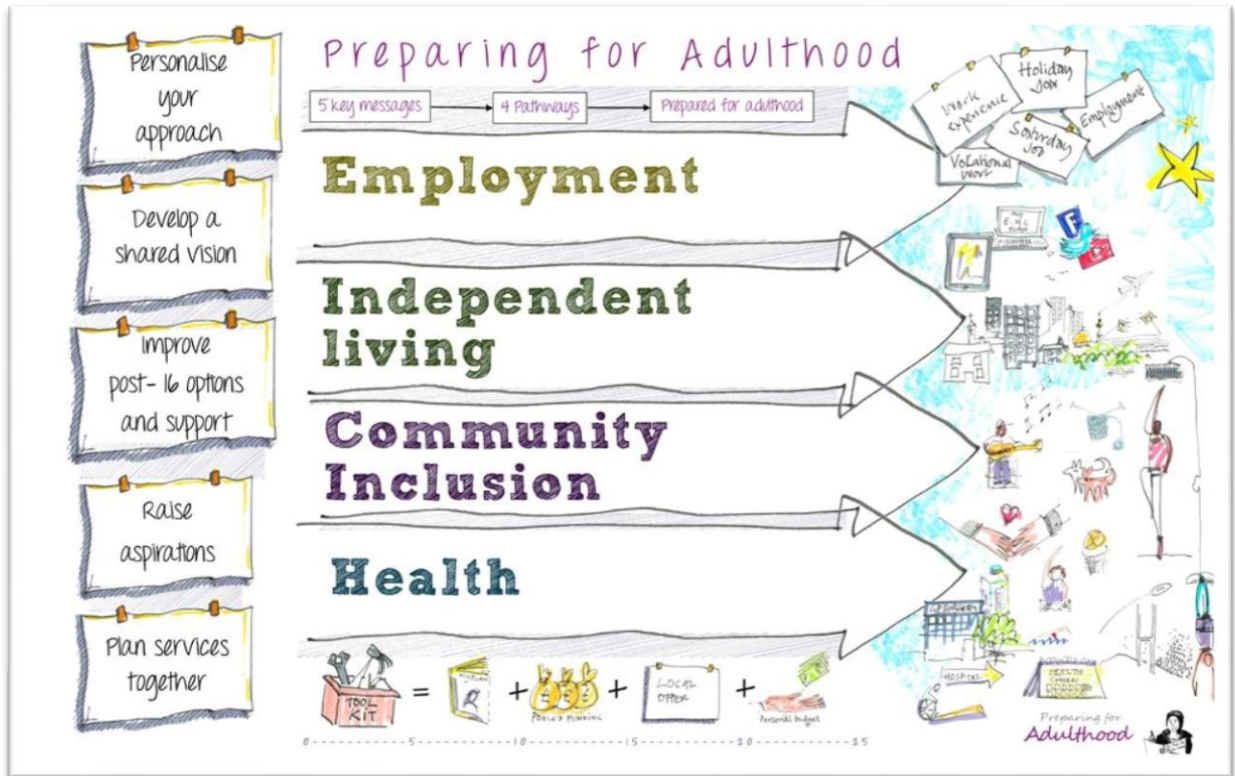


Figure 5.2

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PRIORITY ONE: WHERE I LIVE

People with learning disabilities want to make choices about where they want to live, and support for them and their families around making and implementing their decision. They need a clear pathway that will enable them to live in the place that is right for them, with support that enables them to live as independently as possible. The type of care and accommodation that people with learning disabilities receive is fundamental to their quality of life. It is essential that as much as possible is done to personalise this accommodation to the specific needs, wants and preferences of the individual and their families / carers.

For some people, one of the many models of supported living will offer the right balance between independence and assistance, whereas for others a residential care home fits better with the way they want or need their care delivered. However, the choices that people with learning disabilities make about where and with whom they live can change throughout their lives.

Supported living: Whilst supported living has no legal definition in the United Kingdom, the council has taken the commonly accepted set of principles surrounding this model of support and incorporated them into a new purchasing framework. Providers of supported living must ensure that services enable people with learning disabilities to own or rent their own home and have control over the support they get, who they live with (if anyone) and how they live their lives.

Services must be sufficient to help people get the support they need, and to act when they no longer need support, either by enabling the individual to move on to long-term accommodation or by moving the support and enabling the individual to stay put. This means providing services that respond quickly in a crisis, and that enable people to move towards living arrangements where they no longer need support. People must be able to use personal budgets to purchase support from a choice of providers with a choice of the types and times of support. This could include evening and weekend support, a range of respite that can meet the needs of people with complex health needs, as well as flexible support to enable family carers to work.

Working with the learning disability community and with providers, commissioners will continue to support the co-production of different models of shared housing, including:

- Core and cluster sheltered housing provision for older people with learning disabilities living with increasing frailty and/or dementia.
- Clustered accommodation (transitional and long-term) to ensure that supported living is a viable and affordable option for as many people with learning disabilities as possible.

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- Shared and individual accommodation for people with learning disabilities who have lower support needs but may behave in ways that put themselves or others at significant risk, with support that keeps them safe and helps them address their needs.
- Home-ownership and models of support that enable people with learning disabilities to maximise their independence whilst choosing to remain living with family carers.

It is vital that all supported living has effective integration and social inclusion at its core. No person with a learning disability should experience social isolation or social impoverishment through being supported in their own home. Supported living should be part of a wider range of opportunities that enable people with learning disabilities to integrate successfully and by doing so, become a key part of their community.

Domiciliary care: For those people who require funded assistance with personal care in order to remain independent in their home, the council will ensure that providers of regulated-care are of a good standard and have the necessary skills to ensure their staff teams understand the needs of people with learning disabilities. This will include those people with very complex physical needs, with limited ability for conventional communication and those whose behaviour may appear complex or challenging toward others.

Residential care: Good residential care is inherently communal and therefore allows people with learning disabilities to spend leisure time together, participate in excursions and day activities together and develop friendships. It also provides an environment in which care staff are always available 24/7, making it particularly relevant to those with the most profound needs by offering a considerable degree of independence whilst safeguarding security (*The Centre for Social Justice*).

It is recognised that the considerable cost pressures on providers, including the impact of the National Living Wage; employer contributions and staff recruitment / retention issues.

Technology and design: Excellent service and accommodation design, incorporating appropriate technology, is essential in order to make accommodation work as effectively as possible for people with a wide range of needs. This should include:

- Low stimulation environments for people with learning disabilities and autistic spectrum disorders, reducing stimuli that may trigger distress and thereby enabling a more positive living environment.
- Using interior design cues that reduce anxiety and confusion for people with learning disabilities living with dementia-related illnesses.

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- Incorporating the infrastructure required for technology when designing accommodation. This would include additional power outlets, access to high-speed internet, tablet docking ports where appropriate.

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PRIORITY TWO: WHAT I DO DURING THE DAY

Society still tends to attribute value to people according to the social roles they fulfil. People with learning disabilities are often denied the opportunity to fulfil valid social roles, yet most want to take an active part in their community, through work, volunteering, friendships, and other opportunities. Everyone need to uphold the rights of people with learning disabilities to be able to do the same things as any other citizen of Herefordshire, participating fully and with access to the same opportunities as everyone else.

Services must support people with learning disabilities, their families, friends and carers, to identify opportunities to participate and contribute through work and volunteering in their local community. It is important that these organisations lead the way by becoming exemplars for the employment, meaningful training and volunteering of and by disabled people in order to encourage others to see the value in doing the same.

People with learning disabilities should be able to use their personal budgets to purchase the care and support they need to achieve their goals, from a choice of providers with a choice of the types and times of support. This would include evening and weekend support, and individual and group activities in community settings, as well as more traditional day services if people need this. Joint Commissioners should support people to develop their own networks that help them live independently beyond the funding and support that they receive from Herefordshire Council and Herefordshire Clinical Commissioning Group.

Employment and training:

- Commissioning organisations, in partnership with users and providers of services, must make sure there is real choice of services locally for people with learning disabilities. Recognising the economic and logistic challenges, commissioners will support all service providers to enhance their capacity, accessibility and quality through initiatives such as co-location, shared training and collaborative approaches to service development.
- Make sure a range of education, training, work experience, volunteering, supported-internships and supported employment is available locally and is accessible to people with learning disability
- Services should be reviewed and refocused to enable collaborative delivery of key outcomes including supporting clear progression routes for people with learning disabilities to access paid and unpaid employment.
- Commissioners should develop an action plan to improve the numbers of people with learning disabilities who are in paid employment and develop a supported employment pathway within the county for people with a learning disability.

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- Public sector agencies as both employers and procurers of services should support the employment of disabled people through tender and contractual process and give guidance on good practice, and reasonable adjustments such as job carving for disabled people.
- Commissioners should build on the investment of time and knowledge gained from existing schemes and previous pilot projects in order to stimulate a mix of local employment opportunities including paid work, self-employment, micro / social enterprises and Community Interest Companies.
- Work actively with local businesses and employers to create more flexible jobs, internships, apprenticeships, supported work and volunteering opportunities that are available for people with learning disability
- Young people should continue to be offered options such as supported internships as a realistic route into paid employment.
- Volunteer placements should have clear objectives, ensuring relevance to the individual's career path or overall development, be time limited, with appropriate level of support, and encourage greater independence. Recognition needs to be given to the real cost of support volunteering and to the fact that it can be both a path to employment as those opportunities increase over time for some and a valuable means of social engagement and inclusion for others.
- Commissioners should also seek to increase the number of people with learning disabilities in paid employment working more than 16 hours.

Day Opportunities:

- The support and service network being developed includes individualised provision for people with higher support needs so that they can access ordinary opportunities.
- There should be minimal reliance on the use of segregated, special buildings. Where building-based services are necessary, e.g. for people with high levels of specialist care needs, every effort should be made to ensure that people with learning disabilities get every possible opportunity to integrate..
- Commissioners should seek to increase the number of local micro-providers who offer highly tailored person-centred support from their own homes, providing a home, respite care, daytime activity or an employment opportunity. This would be a very flexible option that enables someone with a learning disability the opportunity to remain part in the community of their choice, even though the reach of traditional services may be limited there.

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- Commissioners should increase the pool of local support agencies that people receiving direct payments and those with independent means can approach to buy support.
- In order to ensure that people with learning disabilities gain the maximum social value, modernised community-based day opportunities must operate in places where people are alongside members of the public.
- Commissioned services should, where possible, take place in people with learning disabilities' local community, so they can build connections with people they may see by chance in the evenings and at weekends, growing their social network and recognition within their community.
- In order to support the implementation of the health and wellbeing blueprint (Fig.3.1) the council has redirected some of its operational staffing capacity to develop the roles of Community Brokers and a Community Connector. The Community Brokers will work with Herefordshire residents to find opportunities within existing community services and facilities in order to meet outcomes identified at assessment or review. The role of the Community Connector is to commission new individual opportunities in order to meet specific needs and promote choice.
- People with learning disabilities across the range of needs are being supported to contribute positively to the local community.
- All new services and projects must be sustainable in that they can be kept going long enough for people to make they connections and build the natural supports they require to maximise their independence.
- As the number of options and choice of daytime activities increases, there must be a robust safety net process in place to support movement between the social opportunities inherent within a congregated day services and the more special interests offered by a wide range of universal and commissioned resources. Having this in place will support choice and enable many people with learning disabilities to safely use a greater range of different services with confidence.

PRIORITY THREE: BEING HEALTHY AND SAFE

People with learning disabilities and their carers want to have the right support in place to remain safe and keep well. This will include all appropriate measures to ensure a high quality service is provided to people with learning disabilities. Commissioners must work with the Care Quality Commission, Healthwatch, and with self-advocacy groups to ensure that services are monitored by professionals, families, and people with learning disabilities regularly.

Locally and nationally, people with learning disabilities still experience greater health inequality, social exclusion and lack of economic opportunity than any other group. For example, using NHSE data from 2015-16, people with learning disabilities die, on average, more than 14 years younger than the general population, and are significantly more likely to have certain conditions and diseases. Women with a learning disability had an 18-year lower life expectancy than the general population, while men with a learning disability had a 14-year lower life expectancy.

People with learning disabilities are 26 times more likely to have epilepsy, 8 times more likely to have severe mental illness and 5 times more likely to have dementia. They were also 3 times more likely to suffer with hypothyroidism and almost twice as likely to suffer diabetes, heart failure, chronic kidney disease or stroke. For people with learning disabilities, access to routine health screening programmes for breast, prostate and cervical cancer falls well below that of the non-learning disabled population nationally and locally.

Working together will ensure that locally commissioned health services in primary care, hospital and the community are accessible to people with learning disabilities, making 'reasonable adjustments' where necessary. Where services are nationally commissioned services (such as dentistry and some specialist services), commissioners will work with NHS England to ensure these services are accessible.

The increased prevalence of early onset dementia is a significant issue within the learning disability. By raising awareness of the condition across the wider learning disability community and making it a key part of the annual health checks from the age of 40, there will be an improved understanding of dementia within the learning disability population and the actions required to ensure adults with learning disabilities live better and longer. Where there are specific known risks, such as for people with Down's syndrome, a regular medical assessment of cognitive functioning should be integrated into the annual health check from the age of 30.

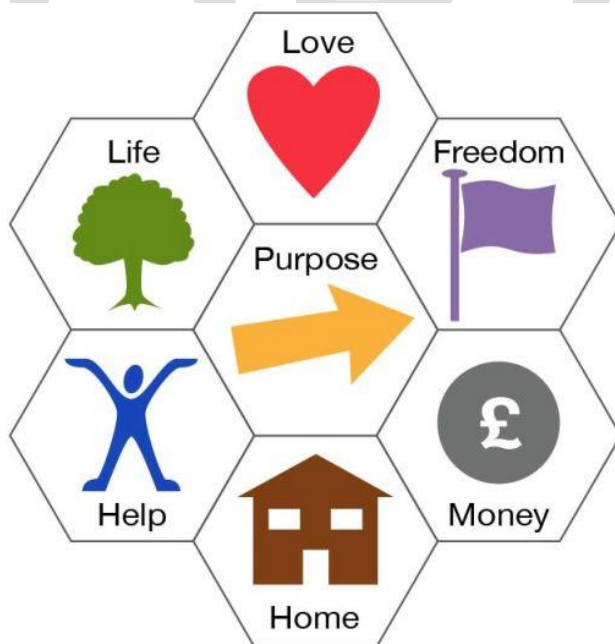
In line with changes following the Winterbourne View scandal and implementation of the Transforming Care Programme (TCP), both the council and the CCG recognise the need to develop community-based intensive support services that will enable most people who become unwell to receive health assessments and treatments at home, or near to home, rather than in an assessment and treatment unit outside of Herefordshire.

PRIORITY FOUR: CITIZENSHIP, CHOICE AND CONTROL

Citizenship means:

- **Being respected** - being able to hold your head up high and getting respect from those around you
- **Being equal** - citizens all have the same fundamental worth or dignity, they don't believe that just because someone has more money, power or a better-paid job that this makes them a better person
- **Being different** - citizens are not identical, they have many different gifts which they bring together to build a better world

Citizenship is important because it reminds us that we can each live a good life, in our own way, while also being able to live together with mutual respect. Citizenship means rejecting the idea that people's worth can be measured by money, power, fame, intelligence or any of the other ways that make people different and which some people imagine define 'what is important'.



The seven keys to citizenship

1. **Freedom** - being a citizen means being in control of your own life - being able to make decisions, make mistakes, make your own way. For people with significant communication difficulties this also means lots of thoughtfulness, love and attentiveness. But everyone can be in control - especially if we listen to those who know and love the person most.
2. **Direction** - being a citizen means having a life of meaning - your own meaning. When our lives don't fit our passions, interests and abilities we are diminished - but if we can find a path that is right for us then we help other people to see us with respect.
3. **Money** - money is important, but may be not for the reason we all think. Money gives us the means to be independent, to set our own course and to achieve our own goals. But too much money is an obstacle to citizenship - mad consumers and millionaires aren't citizens - but citizens do pay their own way.

4. **Home** - we all need a place we can call our home, not just a shelter, but a place where we can have privacy, where we can be with those we love, where we belong. When we have no home we appear almost rootless and disconnected - when we say someone has gone into 'a home' we mean they've lost their home.
5. **Help** - we live in a world where we imagine that needing help is bad, even though we all need help every day and the giving and receiving of help from others is the key to a good society. The challenge today is to get help without having to give up your citizenship
6. **Life** - and it is by giving something back to our community that we can really help others to understand our worth. And there are so many more ways to give back than we think. We can contribute by just being there, by buying, by joining in, by working, by laughing or even by crying. But we cannot contribute if we are absent.
7. **Love** - the beginning and the end of citizenship is found in love. Through meeting, working with and joining in with other people we can form relationships, friendships, find lovers and make a family. Love is also the best guarantee of bring into existence a new generation of citizens to help build a better world. (*Dr Simon Duffy, Keys to Citizenship, Centre for Welfare Reform, 2006*)

People with learning disabilities want to have more choice and control over their lives and for those choices to be respected and valued. Joint commissioners will work with people with learning disabilities, their families, friends and carers, and with providers to implement the aims and objectives of the new adult-wellbeing plan to ensure people with learning disability can achieve equal access to mainstream services and the broader community.

Those people who use services should have personal plans that enable them to meet their personal goals and live as independently as possible. People with learning disabilities need to be supported to review what their life looks like now, and what they want it to look like in the immediate and long term future. These plans will also outline what they need to do to meet their outcomes and what support they will get to assist them in this. To achieve this, people with learning disabilities need to have ready access to wide, independent circles of expertise and support that enables the individual to find their own voice.

The learning disability community want to be able to choose different types of support, not just different support providers. Further work is required develop the market so that real choice is available. This will include work to enable people with learning disabilities, their families and carers, to know what good quality support looks like.

People with learning disabilities want to make and communicate choices that matter to them, alongside the people that care for them. People who need help to make their

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views known should have simple access to advocacy services, and self-advocacy should be supported so that people can have their own voice.

Finally, the real test of choice and control is enabling all people with learning disabilities to develop a life outside of commissioned or funded services. For example, they need to have the opportunity to develop loving relationships, have families if they choose, create social relationships and pursue personal interests that aren't reliant on staffing rotas,

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**OUTCOME-FOCUSED
STRATEGIC COMMISSIONING INTENTIONS**

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HEREFORDSHIRE LEARNING DISABILITY COMMISSIONING THEME 1: WHERE I LIVE

People with learning disabilities to make choices about where they want to live, and support for them and their families around making and implementing their decision. They need a clear pathway that will enable them to live in the place that is right for them, with support that enables them to live as independently as possible.

Joint commissioners must provide clear, easy, and efficient ways to help people get the support they need, and to help them move on when they no longer need support. This means providing services that respond quickly in a crisis, and that enable people to move towards living arrangements where they no longer need support. People must be able to use personal budgets to purchase respite support from a choice of providers with a choice of the types and times of support. This would include evening and weekend support, a range of respite that can meet the needs of people with complex health needs, as well as flexible support to enable family carers to work.

Working with the learning disability community and with providers, commissioners will continue to explore different models of shared housing, including extra care provision, and the full range of supported provision in the community, in order to ensure that supported living is a viable and affordable option for as many people with learning disabilities as possible. The Council and the local NHS must ensure that people with learning disabilities who have lower support needs but may behave in ways that put themselves or others at significant risk have support that keeps them safe and helps them address their needs.

WORKSTREAM REFERENCE:	LEAD ORGANISATION:	THEME 1 INPUTS.	THEME 1 ACTIVITIES.	THEME 1 PLANNED OUTPUTS.	THEME 1 INTENDED OUTCOMES.			THEME 1 SOCIAL IMPACT.
		What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>	SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	
LD 1.01	HC	<p>Existing resources: The learning disability commissioning lead; supported housing team and strategic housing team will collaborate to develop and implement this work stream.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development.</p>	The council will implement a Supported Housing Allocation Panel and associated rent void agreements / tenant identification processes to oversee utilisation and throughput in all LD block-purchased transitional accommodation.	<p>Transitional Housing:</p> <p>Herefordshire has the correct amount of supported transitional accommodation for people with learning disabilities, so that they have the opportunity to:</p> <ul style="list-style-type: none"> • Gain independent living skills • Create local support networks • Gain citizenship experience • Reduce dependence on formal care. 	There will be the correct amount of short-term (1-3 years) accommodation with support and an agreed pathway to ensure people with learning disabilities are able to transition effectively through this model of supported living.	<p>The number of people with learning disabilities gaining long-term skills to live as independently as possible through the use of transitional housing will increase.</p> <p>A greater number of people with learning disabilities will be able to move-on to long-term independent tenure through secure tenancies and home ownership with minimal support via formal state-funded care or support.</p>		What additional changes or impacts do we expect to see within the wider community?

WORKSTREAM REFERENCE:	LEAD ORGANISATION:	THEME 1 INPUTS.	THEME 1 ACTIVITIES.	THEME 1 PLANNED OUTPUTS.	THEME 1 INTENDED OUTCOMES.			THEME 1 SOCIAL IMPACT.
		What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? (The length of time required to fully achieve some outcomes will vary significantly.)			
						SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES
LD 1.02	HC	<p>Existing resources: The learning disability commissioning- lead, supported housing team, transitions team and strategic housing team will collaborate to develop and implement this work stream.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development.</p>	<p>The council will collect information about the planned transition of people with learning disabilities and use this information for the relevant teams to jointly plan housing options, making best use of existing supported housing stock, general needs housing stock and to plan new developments as opportunities arise.</p> <p>The council will have a housing pathway for young people in transition.</p> <p>The council and the CCG will have a joint housing pathway for young people with learning disabilities preparing for adulthood.</p>	<p>Transition planning for adults and young people::</p> <p>The council has a transitional accommodation plan in place that identifies the needs of young people entering adult services AND adults transitioning from different models of support such as residential care or the family home.</p> <p>The council has a range of different age-appropriate supported housing options suitable for people with learning disabilities requiring support that prepares them for greater independence:</p> <p>Shared transitional housing Specialist Foyer provision Bespoke provision to meet very complex needs.</p> <p>Young People: Using the Preparing for Adulthood (PFA) tracker, there is an accurate needs prediction and individual accommodation plan in place for children with learning disabilities as they transition to adult services.</p> <p>Adults: Accommodation needs identified at assessment or review are reported to the supported housing team for dissemination to commissioners and the strategic housing team to better support allocations and development plans.</p>	<p>Young people with learning disabilities will know their housing options as early as possible, allowing them and their families to plan ahead.</p> <p>The council will have sufficient capacity within transitional housing to meet the needs of young people as they prepare for adulthood.</p>	<p>All young people with learning disabilities will have a range of coherent housing options as part of their preparation for adulthood.</p>		

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					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES	
LD 1.03	HC	<p>Existing resources: The learning disability commissioning-lead supported housing team and strategic housing team will collaborate to develop and implement this work stream.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development.</p>	<p>The council will develop a supported housing pathway to identify people with learning disabilities requiring supported living to meet their assessed needs</p> <p>The council will implement a Supported Housing Allocation Panel to ensure that people with learning disabilities are correctly matched with housing opportunities and have the necessary support and financial arrangements in place.</p>	<p>Long-term / settled accommodation:</p> <p>The council has an agreed pathway in place for identifying people with learning disabilities in need of housing, assessing their specific housing needs and using this information to match them with existing supported housing stock / supported housing in development./ cross-sector general needs housing with floating support / Shared Lives etc.</p>	<p>People with learning disabilities have a clear pathway to enable them to access appropriate housing.</p> <p>Health and social care professionals understand and make use of the pathway to support people into appropriate housing with support to maintain tenure.</p>	<p>People with learning disabilities will have empowering support and advice to develop circles of support that reduce dependence on social care services.</p> <p>A greater number of people with learning disabilities will be able to access long-term independent tenure through secure tenancies and home ownership with support and minimise their requirement for state-funded care or support.</p>		
LD 1.04	HC	<p>Existing resources: The council's assistive technology and occupational therapy team working collaboratively with CCG and council colleagues to promote knowledge and use of technology.</p> <p>New resources: Limited funding for capital purchases of technology and associated adaptations available via Disabled Facilities Grants.</p>	<p>The assistive technology requirements of and options available to people with learning disabilities will be identified within the council's TECS Strategy.</p> <p>Officers concerned with assistive technology development will support colleagues across health; housing and social-care to understand what is available and supports its implementation.</p>	<p>Assistive technology:</p> <p>This is used routinely as part of the council's approach to enable people with a learning disability to live as independently as possible, in line with the AWB Blueprint.</p> <p>Professionals in health and social care understand the assistive technology options available and support customers and carers to make appropriate use of them. This includes people outside the scope of state-funded services and people with complex healthcare needs.</p> <p>WISH contains accessible information and advice about assistive technology options for people with learning disabilities.</p>	<p>People with learning disabilities and their carers will be aware of assistive technology and where to obtain further information and support.</p> <p>People with learning disabilities will be making routine use of many types of assistive technology to reduce their reliance on state-funded support and to maximise their independence.</p> <p>People with learning disabilities will become routine day-to-day users of technology, integrating the full range of assistive technology and the 'internet of things' into their daily lives.</p>			

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					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES	
LD 1.05	HC	<p>Existing resources: Health and social care professionals will collaborate with the council's strategic housing team.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development.</p>	<p>The council will develop and implement processes for identifying people with learning disabilities living with older carers and engage with them to provide information and support to aid progression planning.</p>	<p>Aging carers:</p> <p>Information is available on WISH that will guide informal carers through the things they need to consider in relation to aging as a carer.</p> <p>Voluntary and community sector and social care staff have the skills to support informal carers to plan for aging.</p> <p>The council has identified specific accommodation through planned development in order to support professionals, customers and carers to plan ahead.</p>	<p>Customers and carers will have simple access to accurate and up-to-date information about their accommodation and support options.</p> <p>Plans will be in place for all people with a learning disability who are in receipt of informal care that will detail agreed options as their carers get older. These will be regularly reviewed.</p> <p>People with learning disabilities living with family carers will be supported to make a planned transition to suitable accommodation at such time as a family member is no longer able to provide ongoing care or support.</p>			
LD 1.06	CCG	<p>Existing resources: The council and CCG working via the joint Herefordshire Transforming Care Partnership. CCG funding already in place for people in hospital, so CHC will apply for up to 50% of residential or supported living costs on discharge. CHC eligibility is likely to apply for some/all of the at-risk cohort too.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development.</p>	<p>The council, in partnership with the CCG, will maintain a register of individuals stepping down from hospital / ATU or at risk of admission due to complex or high risk behaviour with learning disabilities deemed to be most at risk of admission.</p> <p>The council and CCG will develop an understanding of the best models of housing and support for this group, making best use of technology, design, integrated service provision and (where appropriate) partnership working with neighbouring local authorities.,</p>	<p>People with complex or challenging behaviours:</p> <p>The council, in partnership with the CCG, has developed specific settled move-on accommodation options for people with complex needs. This includes registered provision and housing with support and therapeutic intervention from a suitable healthcare provider.</p>	<p>There will be a clear pathway in place to minimise admissions to hospital and reduce the duration of admissions for people with learning disabilities</p>	<p>People with learning disabilities and their families will experience less distress and disruption by having effective local services capable of working with complex and high risk behaviours in a way that enables an individual to return to their home and community as soon as possible.</p>		

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					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES	
LD 1.07	HC	<p>Existing resource: The learning disability commissioning-lead supported housing team and strategic housing team will collaborate with other health and social care professionals to develop and implement this work stream.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development. DFG funding may be available for technology and adaptations.</p>	Health, housing and social care professionals will understand the impact and importance that dementia-sensitive environment and design has on people with dementia-related illnesses	<p>Dementia::</p> <p>The council works with developers and housing providers to implement elements of this design ethos to improve outcomes for people with learning disabilities experiencing dementia in all its forms.</p> <p>The council has identified the improved life outcomes and cost benefits (capital outlay vs revenue expenditure) of utilising this methodology.</p> <p>Commissioning organisations routinely utilise adaptations and technology at an early stage to reduce the impact of dementia and enable people to remain independent for longer.</p>	<p>People with learning disabilities and dementia, their carers and health / social care professionals will have information and support about ways to adapt the home and built environment to dementia.</p> <p>Dementia-sensitive design will reduce incidents of behaviour that challenges services and cases distress to the individual concerned.</p>	<p>Developers and housing providers will routinely utilise dementia-sensitive design where appropriate in their supported housing projects for people with learning disabilities.</p> <p>People with learning disabilities and dementia will achieve greater independence, integration, choice and control over their lives and home environment by everyday use of technology and appropriate design.</p>		
LD 1.08	HC	<p>Existing resources: The learning disability commissioning-lead supported housing team and strategic housing team will collaborate with other health and social care professionals to develop and implement this work stream.</p> <p>New resources: Limited funding for capital development available via planning gain through general needs development. DFG funding may be available for technology and adaptations.</p>	<p>Health, housing and social care professionals will understand the impact and importance that autism-sensitive environment and design (including technology) has on people with autistic spectrum disorders.</p> <p>The council will routinely assess whether an ASD-sensitive environment would make a notable difference to an individual's quality of life, enable them to further maximise their independence and reduce the impact (human and financial) of behaviours that challenge services.</p>	<p>Autistic Spectrum Disorders:</p> <p>The council works with developers and housing providers to implement elements of this design ethos to improve outcomes for people with learning disabilities linked to autism.</p> <p>The council has identified the improved life outcomes and cost benefits (capital outlay vs revenue expenditure) of utilising this methodology.</p>	<p>People with ASD-related learning disabilities, their care giver and health / social care professionals will have information and support about ways to minimise or negate the impact of the built environment on autism.</p> <p>Autism-sensitive design will reduce incidents of behaviour that challenges services and cases distress to the individual concerned.</p>	<p>Developers and housing providers will routinely utilise autism-sensitive design where appropriate in their supported housing projects for people with learning disabilities.</p> <p>People with ASD-related learning disabilities will achieve greater independence, integration, choice and control over their lives and home environment by everyday use of technology and appropriate design.</p>		

WORKSTREAM REFERENCE:	LEAD ORGANISATION:	THEME 1 INPUTS. What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	THEME 1 ACTIVITIES. When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	THEME 1 PLANNED OUTPUTS. When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	THEME 1 INTENDED OUTCOMES. By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>			THEME 1 SOCIAL IMPACT. What additional changes or impacts do we expect to see within the wider community?
					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES	
LD 1.09	HC	<p>Existing resources: Commissioning team and other AWB professionals.</p> <p>New resources: N/A</p>	<p>The council and CCG will ensure there is sufficient effective commissioning capacity within AWB to implement the commissioning strategy and maintain effective delivery and innovation.</p> <p>The council and CCG will utilise cost benefit analysis to all learning disability services in order to drive cost effectiveness without losing quality of service.</p> <p>Commissioners will continue to promote diversity and choice in the local supported housing market, recognising that people with learning disabilities want a wide range of options to meet their needs, e.g. general needs housing, clustered and shared accommodation, Shared Lives schemes etc.</p>	<p>Cost-effectiveness and service design:</p> <p>Commissioners recognise the need to balance effective outcomes and service costs in order to utilise better planning and service design when planning accommodation services for people with learning disabilities – this includes:</p> <ul style="list-style-type: none"> Discreet clustering within communities to share staffing resources and maximise access to local services New models of residential care homes utilising good design Very sheltered supported living (category 2.5 housing) for older people with learning disabilities. Using shared or congregated supported living schemes alongside technology to also support people with learning disabilities living within walking distance 	<p>People with learning disabilities will continue to have a choice of good quality cost-effective accommodation options within the county.</p>	<p>People with learning disabilities will live in homes and communities that enhance their independence.</p>		
LD 1.10	HC	<p>Existing resources: Strategic housing team and supported housing team.</p> <p>New resources: N/A</p>	<p>Wherever possible, the council will ensure that the accommodation needs of people with learning are met via the most normal means, i.e. the general needs housing allocation system, and will ensure that the systems makes reasonable adjustments to enable this to happen routinely.</p>	<p>General needs housing allocation policy:</p> <p>In line with legal equality duties, the council has an allocations policy for general needs housing that has taken account of and made reasonable adjustment for the needs of people with learning disabilities.</p>	<p>People with learning disabilities will have accessible information about their housing rights and the process for applying for an affordable rented home.</p>	<p>People with learning disabilities will have equality of access to general needs housing.</p>		

WORKSTREAM REFERENCE:	LEAD ORGANISATION:	THEME 1 INPUTS. What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	THEME 1 ACTIVITIES. When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	THEME 1 PLANNED OUTPUTS. When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	THEME 1 INTENDED OUTCOMES. By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>			THEME 1 SOCIAL IMPACT. What additional changes or impacts do we expect to see within the wider community?
					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES	
LD 1.11	HC	<p>Existing resources: Supported living team in collaboration with supported living / housing providers.</p> <p>New resources: N/A</p>	Working with housing and supported living providers, the council will recognise the need to consider the views existing tenants in shared housing when filling accommodation voids in order to offer choice.	<p>Lettings process for shared housing:</p> <p>There is an improved process and policy will be for:</p> <ul style="list-style-type: none"> • Matching nominated tenants • Improving engagement with existing tenants • Offering some choice to existing tenants of shared housing* <p>(*recognising the need to fill voids in a timely manner).</p>	People with learning disabilities in shared accommodation will have more choice about with whom they live.	<p>People with learning disabilities will have greater choice and control over their home.</p> <p>People with learning disabilities will have their choices valued.</p>		
LD1.12	HC	<p>Existing resources: Commissioning team</p> <p>New resources: Capital resources will need to be sourced via private or third sector investment.</p>	Recognising that residential care fulfils a valuable role for some people with learning disabilities, the council will carry out a review of existing provision to ensure it meets the needs of its customers and it fit for purpose as they age.	<p>Residential care provision:</p> <p>Commissioners understand the capability of existing providers within the county and have a plan in place for remodelling, renewal and closure of registered homes as appropriate across the sector.</p> <p>The council supports residential care (and supported living) providers to plan and implement training for staff and managers on compliance AND achieving better life outcomes for people with learning disabilities.</p>	People with learning disabilities and their families will benefit from a stable, high-quality residential care sector with a minimal risk of unexpected home closure.	People with learning disabilities living in residential care are supported to be part of their wider community and to integrate effectively.		

WORKSTREAM REFERENCE:	LEAD ORGANISATION:	THEME 1 INPUTS. What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	THEME 1 ACTIVITIES. When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	THEME 1 PLANNED OUTPUTS. When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	THEME 1 INTENDED OUTCOMES. By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>			THEME 1 SOCIAL IMPACT. What additional changes or impacts do we expect to see within the wider community?
					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBING OUTCOMES	
LD1.13	HC	<p>Existing resources: AWB commissioning team; O.T team; technology team.</p> <p>New resources: N/A</p>	<p>Commissioners will research best practice models and innovation in out of hours and extended support models in order to increase the numbers of people with learning disabilities who can be safely and effectively offered supported living as an option.</p> <p>Chosen options will be integrated into revisions of the Supported Living Framework specification for implementation with providers.</p>	<p>Out-of-hours and extended support for supported living:</p> <p>The council has a range of extended support options for people with learning disabilities being supported to live in their own home, whether shared or living alone.</p> <ul style="list-style-type: none"> • Use of technology to replace invasive sleep-in cover; provide remote reassurance and monitoring where appropriate. • Use of planned clusters of supported living accommodation across a community, linked to a central staffed service. 	<p>People with learning disabilities have a wider choice of accommodation options.</p> <p>People with learning disabilities feel supported to manage risk.</p> <p>The families of people with learning disabilities are confident that risks are managed appropriately and there is a safety net in place.</p>	<p>The number of people with learning disabilities gaining long-term skills to live as independently as possible through the use of supported living models will increase.</p> <p>A greater number of people with learning disabilities will be able to move-on to long-term independent tenure through secure tenancies and home ownership with minimal support via formal state-funded care or support.</p>		

HEREFORDSHIRE LEARNING DISABILITY COMMISSIONING THEME 2: WHAT I DO DURING THE DAY.

Society still tends to attribute value to people according to the social roles they fulfil. People with learning disabilities are often denied the opportunity to fulfil valid social roles, yet most want to take an active part in their community, through social participation, various forms of employment, volunteering, friendships, and other opportunities.

Joint commissioners need to uphold people with learning disabilities' rights to be able to do the same things as any other citizen of Herefordshire, participating fully and with access to the same opportunities as everyone else. The Council, local NHS and other commissioning partners must support people with learning disabilities, their families, friends and carers, to identify opportunities to participate and contribute through work and volunteering in their local community. It is important that these organisations lead the way by becoming exemplars for the employment, meaningful training and volunteering of and by disabled people in order to encourage others to see the value in doing the same. At the same time, commissioners need to recognise the particular needs of the learning disability community and ensure that the range of choices of activity available to people with learning disabilities includes opportunities for social interaction with their peers, dedicated spaces and resources that can accommodate specific care and support needs.

People with learning disabilities should be able to use their personal budgets to purchase the care and support they need to achieve their goals, from a choice of providers with a choice of the types and times of support. This would include evening and weekend support, and individual and group activities in community settings, as well as more traditional day services if people need this. Joint Commissioners should support people to develop their own networks that help them live independently beyond the funding and support that they receive from Herefordshire Council and Herefordshire Clinical Commissioning Group.

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ROW REFERENCE:	LEAD ORGANISATION:	THEME 2 INPUTS. What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	THEME 2 ACTIVITIES. When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	THEME 2 OUTPUTS. When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	THEME 2 INTENDED OUTCOMES. By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>			THEME 2 SOCIAL IMPACT. What additional changes or impacts do we expect to see within the wider community?
					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBEING OUTCOMES	
LD2.01	HC	<p>Existing resource: Commissioning & contract management activity to work with current providers.</p> <p>New resource: Requires additional resources, likely to be outsourced to the provider sector; potential enhancement of Community Broker task? Use of technology and/or call centre.</p>	<p>The council will carry out commissioning activity to:</p> <ul style="list-style-type: none"> Support the safe movement between formal services to community options on a person by person basis, in order to build the confidence of people using services, carers and providers. Develop business case for procurement of positive prompting- call centre role 	<p>Safe expansion of daytime activity choices</p> <p>There is a recognised and well-publicised 'bridging service' to support people moving between congregated services and more individualised / diverse activity options, in order to ensure there is a:</p> <ul style="list-style-type: none"> Designated point of contact to resolve difficulties in schedule Designated place of safety in event of service closure / failure Proactive ongoing liaison with families and carers to support managed risk taking 	<p>Community access becomes an option, enabling more people with learning disabilities to choose this option in addition to existing collective services.</p> <p>People with learning disabilities and their families feel more confident about change and taking risks.</p> <p>People with learning disabilities gain social value by being perceived as ordinary citizens.</p>	<p>People with learning disabilities will experience increased independence and build better social networks, leading to improved social inclusion.</p> <p>People with learning disabilities will have less dependence on formal support; greater participation and wider informal networks; a wider circle of friends and relationships; greater self-determination; increased confidence and self-esteem.</p>		
LD2.03	HC	<p>Existing resource: AWB project management time; commissioning team time for joint work with CWB</p> <p>New resource: Resources required for new adult trainee roles.</p>	<p>The council and CCG will continue to identify best practice models and partners to build on existing services e.g. introduction of supported internships for 16 to 25 year olds and greatly increase opportunities.</p>	<p>There will be an overall increase in the number of people with LD accessing job opportunities, with particular emphasis on supporting the training and employment of young people with learning disabilities preparing for adulthood.</p> <p>Employment for young adults:</p> <p>More opportunities available for young people with learning disabilities :</p> <ul style="list-style-type: none"> Supported Internships Traineeship Programmes Supported Apprenticeships <p>There will be more Job Coaches across commissioned services to support access to and sustain employment.</p>	<p>Young people with learning disabilities will develop employability skills and broaden their experiences in the world of work.</p> <p>There will be more young people with learning disabilities in supported internships at a range of employers.</p>	<p>As more people with a learning disability are seen in ordinary working roles, social value and positive perceptions will increase across the wider community.</p> <p>There will be more people with learning disabilities in employment.</p> <p>Young people with learning disabilities will have greater aspiration to meaningful training and employment.</p>		

LD2.04	HC	<p>Existing resources: Commissioning and project management time. Gradual re-direction of existing service contracts to allow diversion of resources to social enterprises.</p> <p>New resources: External</p>	<p>The CCG supports therapeutic earnings for people with learning disabilities where paid employment can be shown to have a positive impact on an individual's health and wellbeing. The recommendation process for a therapeutic earnings pilot will be delivered via the Community Learning Disability Team under the ²Gether NHS Foundation Trust contract.</p>	<p>Therapeutic earnings:</p> <p>The CCG routinely supports the use of therapeutic earnings for people with learning disabilities stepping into paid work for the first time. The pilot scheme for therapeutic earnings will be part of the development of the council and CCG's own training and employment project (LD2.09)</p>	<p>There will be more choices for people with learning disabilities because of improved systems to enable employment options.</p> <p>There will be more people with a disability in the wider workforce.</p> <p>People with a learning disability will increase their social networks via ordinary relationships with work colleagues.</p>	<p>Wider community perceptions of people with a learning disability will be challenged positively as they are increasingly seen in a valid social role.</p> <p>People with a learning disability will be less dependent upon formal social care services, greater sense of self-worth and enhanced wellbeing.</p>		
LD2.05	HC	<p>Existing resources: Commissioning and project management time. ECC advice and support on options.</p> <p>New resources: Funding for grants (potentially accessible via charitable, European funding or government grant programmes).</p>	<p>The council will undertake commissioning and research / project management activity to identify best practice around grant-based employment incentives, maximise opportunities and formalise schemes</p>	<p>Funding and financial incentive grants for employers:</p> <p>There is a grant-based scheme for local employers, targeted at achieving positive employment outcomes for people with learning disabilities.</p> <p>Employers are supported by the council to make full use of Access to Work.</p> <p>Health and care staff members are trained to understand the Access to Work criteria in order to advise employers and people seeking work.</p>	<p>People with disabilities will benefit as commissioners encourage more employers to offer real opportunities to people with disabilities.</p> <p>There will be more people with a disability in the wider workforce</p>	<p>People with a disability increase their social networks via ordinary relationships with work colleagues. Less dependent upon formal social care services, greater sense of self-worth and enhanced wellbeing</p>		

LD2.06	HC	<p>Existing resources: Commissioning and project management time. Engagement with <i>Preparing for Adulthood</i> group in adult further-education strategy development</p> <p>New resources: External</p>	<p>The council will engage with local employers to understand and assess the potential for working together to consider how people with learning disabilities might meet their workforce needs.</p> <p>The council will work with partners such as DWP to support employers to identify suitable roles and job creation.</p> <p>The council will work with partners to ensure People with learning disabilities are supported in the recruitment process and supported to maintain the employment.</p> <p>The council will work with educational providers to identify and further develop vocational education and training provision.</p> <p>The council will ensure that people with LD have access to information about education, training and support.</p>	<p>Vocational further education:</p> <p>Herefordshire has a dynamic further education offer that supports young people with learning disabilities into employment.</p> <p>Schools and further education providers deliver study programmes that include employment, independent living skills, community engagement and healthy living.</p>	<p>More young people with learning disabilities in transition to adulthood will benefit from an employment pathway with opportunities for work experience, volunteering, supported internships, traineeships and apprenticeships.</p> <p>Young people with learning disabilities will remain in the county to create long- lasting and supportive social networks.</p> <p>Supported Internship forum established in Herefordshire with the aim of increasing opportunities for young people aged 14 to 25.</p> <p>Supported Internship co-ordinator in place and post 16 job coaches trained.</p> <p>Increase the number of supported internship opportunities</p> <p>The WISH website will have up to date information about education, training and support available.</p> <p>Access to good careers advice and guidance to help young people with their decision making.</p>	<p>More people with a learning disability in the wider workforce and gaining social value.</p> <p>People with a disability increase their social networks through work</p> <p>People with learning disabilities are less dependent upon formal social care services, greater sense of self-worth and enhanced wellbeing.</p>		
LD2.07	HC	<p>Existing resource: Commissioning resource; project management resource</p> <p>New resource: N/A</p>	<p>Building on previous work undertaken locally, development of a new strategy/support service for self-employed people with learning disabilities.</p> <p>Commissioning activity to support individuals or groups to further develop skills gained during commissioned community activities to explore opportunities to turn them into self-employment opportunities.</p> <p>Develop a learning disability (or wider cognitive impairment) employment conference to raise expectations and knowledge.</p>	<p>Self-Employment:</p> <p>There is a strategy and infrastructure, involving external employment support partners, to support self-employment for people with learning disabilities.</p>	<p>People with learning disabilities will have:</p> <ul style="list-style-type: none"> Engagement in meaningful activity with positive economic return. Have economic opportunities that take account of their specific needs. 	<p>People with a disability increase their social networks via ordinary relationships with work colleagues, becoming less dependent upon formal social care services and developing a greater sense of self-worth / enhanced wellbeing</p>		

LD2.08	HC	<p>Existing resource: Commissioning resource; project management resource; current service providers.</p> <p>New resource: N/A</p>	<p>Commissioning activity to identify whether the reach of current commissioned community activities can be extended by developing micro-enterprise opportunities (i.e. very small community organisations that provide care or support in areas where access or coverage is limited).</p> <p>Link to learning disability (or wider cognitive impairment) employment conference (LD2.06) to raise expectations and knowledge of micro-enterprise start-up opportunities.</p>	<p>Developing Micro-Enterprises:</p> <p>There is an understanding of both of the planned roles for micro-enterprise within the council and a strategy in place to develop them to extend the principle of Think Local, Act Personal, firstly as an economic / employment option for people with learning disabilities and secondly as an option for the more personalised provision of care and support</p>	<p>People with learning disabilities will benefit from person-centred employment activity, providing a greater sense of wellbeing and economic independence.</p> <p>People with learning disabilities benefit from more flexible care and support model leading to greater choice and personalisation.</p>	<p>People with learning disabilities benefit from increasingly positive perceptions of disability created through economic empowerment and greater social value.</p> <p>People with a disability increase their social networks via ordinary relationships with work colleagues, becoming less dependent upon formal social care services and developing a greater sense of self-worth / enhanced wellbeing</p>		
LD2.09	HC	<p>Existing resource: Commissioning resource; project management resource</p> <p>New resource: N/A</p>	<p>The council will explore opportunities for more traditional supported employment schemes, ensuring that where people contribute their skills and labour, they in turn benefit from timely marketable qualification and/or genuine wages.</p>	<p>Real supported employment:</p> <p>Supported employment schemes with genuine qualification and economic outcomes for people with learning disabilities will be available in the county.</p>	<p>People with learning disabilities will benefit from opportunities to trial employment options with support in order to broaden their experience, economic confidence and aspirations.</p>	<p>People with learning disabilities will benefit from positive social and economic perceptions of disability.</p> <p>People with a disability increase their social networks via ordinary relationships with work colleagues, becoming less dependent upon formal social care services and developing a greater sense of self-worth / enhanced wellbeing</p>		
LD2.10	HC	<p>Existing resource: Commissioning resource; project management resource to facilitate cross-departmental working (ECC/AWB) to identify opportunities. Pathway links with care management to support this process</p> <p>New resource: N/A</p>	<p>The council will develop a framework for specifications for council contracts to include employment outcomes for people with a learning disability and will recognise the social return on investment via smarter council contracting.</p> <p>The council will consider opportunities for internal service contracts (catering / cleaning / grounds maintenance etc.) being replaced with social enterprises or community interest companies with a majority learning disabled workforce and/or offering employment and training to people.</p>	<p>Council / NHS as exemplar employer:</p> <p>Contracts let by the council will contain requirement or preference for employment of people with disabilities.</p> <p>The council will be an exemplar employer through the creation of social enterprises or community interest companies with a learning disabled workforce and/or offering employment and training to people.</p>	<p>People with learning disabilities will benefit from a positive shift in social value by being seen in valid social roles that challenge public perceptions.</p> <p>People with learning disabilities will have high aspirations for employment and economic independence by seeing others in valid social roles.</p>	<p>People with learning disabilities will directly benefit from the leadership of commissioning organisations in providing and encouraging positive economic opportunities for people with a learning disability</p>		

LD2.11	HC	<p>Existing resource: Commissioning resource; add to community broker role.</p> <p>New resource: N/A</p>	<p>As part of a wider 'place shaping' role the council will ensure that there is a functional link with the DWP via Job Centre Plus to support health and social care practitioners to consider employment opportunities as a way to meet assessed outcomes.</p>	<p>Expert employment partners:</p> <p>Existing employment opportunities identified by Job Centre Plus are a routine part of meeting the assessed needs of people with learning disabilities.</p>	<p>More people with learning disabilities are signposted to universal services and opportunities.</p> <p>More people with a learning disability gain economic independence and social value as they form part of the workforce across a range of employers and skills.</p>	<p>People with a disability increase their social networks via ordinary relationships with work colleagues, becoming less dependent upon formal social care services and developing a greater sense of self-worth / enhanced wellbeing</p>		
LD2.12	HC	<p>Existing resource: Commissioning resource; project management resource; finance resource.</p> <p>New resource: N/A</p>	<p>The council will ensure that employment is part of the culture change of strength-based process and will develop / implement a new pathway to support this and gain provider buy-in.</p> <p>Commissioners will develop a clear pathway to paid employment and meaningful training with marketable qualifications for as many people with learning disabilities as possible.</p> <p>Financial modelling is required to predict numbers into employment and facilitate move away from formal day opportunities.</p>	<p>Employment Pathway:</p> <p>The council has a pathway in place to make full and best use of employment opportunities for people with learning disabilities in order to:</p> <ul style="list-style-type: none"> • Maximise economic independence; • Reduce dependence on formal support; • Lead other employers by example 	<p>People with learning disabilities will benefit from a clearer route into work-related options and a culture change of strength based process.</p>	<p>People with a learning disability, their families, schools and professionals will benefit from a more varied choice of options and higher expectations.</p> <p>People with a disability increase their social networks via ordinary relationships with work colleagues, becoming less dependent upon formal social care services and developing a greater sense of self-worth / enhanced wellbeing</p>		

HEREFORDSHIRE LEARNING DISABILITY COMMISSIONING THEME 3: BEING HEALTHY AND SAFE

People with learning disabilities and their carers want to have the right support in place to remain safe and keep well. This will include all appropriate measures to ensure a high quality service is provided to people with learning disabilities. Commissioners must work with the Care Quality Commission, Healthwatch and with self-advocacy groups to ensure that services are monitored by professionals, families, and people with learning disabilities regularly.

Working together, Herefordshire Council and Herefordshire Clinical Commissioning Group will ensure that locally commissioned health services in primary care, hospital and the community are accessible to people with learning disabilities, making ‘reasonable adjustments’ where necessary. Where services are nationally commissioned services (such as dentistry and some specialist services), commissioners will work with NHS England to ensure are accessible.

In line with changes following the Winterbourne View scandal and implementation of the Transforming Care programme, both the council and the CCG recognise the need to develop community-based intensive support services that will enable most people who become unwell to receive health assessments and treatments at home, or near to home, rather than in an assessment and treatment unit outside of Herefordshire.

ROW REFERENCE:	LEAD ORGANISATION:	THEME 3 INPUTS. What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	THEME 3 ACTIVITIES. When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	THEME3 OUTPUTS. When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	THEME3 INTENDED OUTCOMES.			THEME 3 SOCIAL IMPACT. What additional changes or impacts do we expect to see within the wider community?
					By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>	SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	
LD3.01	CCG	Qualified staffing capacity from within existing resources.	<p>The council and the CCG need to train 8-10 LeDeR reviewers to carry out reviews of all unexpected deaths of people with learning disabilities in Herefordshire.</p> <p>The CCG and other local NHS organisations will review end-of-life planning and care for people with learning disabilities to ensure it meets the standards set out in 2017 NHS guidance ‘Delivering high quality end of life care for people who have a learning disability’.</p>	<p>End of Life Pathway and LeDeR Reviews:</p> <p>People with a learning disability, like other members of society, have a range of characteristics that may inform their needs and expectations in relation to end of life care. Commissioning organisations will ensure all relevant parties work effectively with individuals, their families and carers to ascertain their individual needs, expectations and wishes at the end of their life.</p> <p>All unexpected deaths will be reviewed using the LeDeR template by trained reviewers and the findings analysed by the LeDeR team in Bristol. There will be improved data and understanding into unexpected deaths within the LD community.</p>	<p>People with learning disabilities have their end-of-life needs, wishes and expectations understood and adhered to.</p> <p>Families are supported to understand the wider context of a family member’s death.</p>	<p>LeDeR will have a positive impact on life expectancy within the LD community as better understanding leads to prevention, improved practice and healthier lifestyles.</p> <p>People with learning disabilities (and their carers) are routinely supported to plan good end-of-life care that meets their cultural or religious needs and personal wishes.</p>		

LD3.02	CCG	Existing resources: LD commissioner capacity, alongside a clinical task and finish is required.	Joint commissioners will carry out a review of provision supplied by the Community Learning Disability Team.	<p>Specialist community learning disability healthcare:</p> <p>There will be a modern community learning disability service for people in need of community health intervention, including psychiatric and psychological services and specialist Occupational Therapy, Physiotherapy, SpECCh & Language Therapy, Nursing and continence support.</p>	People with learning disabilities in Herefordshire will have access to local community healthcare that can meet their needs	More people in Herefordshire will receive support that maximises their health and wellbeing.		
LD3.03	CCG	Existing resources: LD commissioner capacity is required, working with health professionals.	Joint commissioners will work to ensure that all GP practices participate in maintaining up-to-date LD registration as part of improving health outcomes for people with learning disabilities.	<p>GP Learning Disability Register:</p> <p>All GP practices within the county are implementing the LD enhanced service specification and meet the obligation to maintain their learning disability register (QOF indicator LD003), ensuring that this is extended to include people with learning disabilities not already known to social care services.</p>	Most people with learning disabilities will have access to a mainstream health service designed to recognise and meet their individual needs.	<p>People with learning disabilities benefit from being healthier due to an enhanced health-check to recognise and address the health inequalities currently inherent within the learning disability community.</p> <p>More people with learning disabilities in Herefordshire will experience less health inequality and have a greater life expectancy</p>		
LD3.04	CCG	LD commissioner capacity is required.	The CCG will continue to develop and implement a range of training opportunities to enable mainstream primary care clinicians to understand the needs of people with a learning disability.	<p>Professional Training:</p> <p>All GP practices within the county are attending multi-disciplinary training on the delivery of health services to people with a learning disability</p> <p>All health professionals across a range of disciplines will be able to access regular training on working with people with learning disabilities and addressing the health inequalities they face.</p> <p>This will include Autism-friendly practices environments.</p>	Most people with learning disabilities will have access to a mainstream health service designed to recognise and meet their individual needs.	More people with learning disabilities in Herefordshire will experience less health inequality and have a greater life expectancy.		

LD3.05	CCG	LD commissioner capacity is required.	The CCG will continue to promote the importance of the annual health check for people with learning disabilities.	<p>Annual health checks:</p> <p>All GP practices within the county are ensuring that all people with learning disabilities on the register are invited to attend an annual health check to an agreed standard.</p> <p>For individuals with Down's Syndrome the annual health check will incorporate a cognitive function test from the age of 30 and establish a baseline record / development of the individual's life story with the involvement of the carer / family to support future anticipatory care planning.</p>	<p>Most people with learning disabilities will have access to a mainstream health service designed to recognise and meet their individual needs.</p> <p>People with learning disabilities benefit from being healthier due to an enhanced health-check to recognise and address the higher risk areas known to affect people with learning disabilities and the health inequalities currently inherent within the learning disability community.</p>	<p>More people with learning disabilities in Herefordshire will experience less health inequality and have a greater life expectancy.</p>		
LD3.06	CCG	LD commissioner capacity is required.	The CCG will continue to promote the importance of the LD annual health check and personal health plan for people with learning disabilities.	<p>Health Action Plans:</p> <p>All GP practices within the county produce a Health Action Plan (in accordance with the agreed standard and in an accessible format when appropriate) for each patient attending an annual health check.</p> <p>Individuals will management plans that reflect and support long-term needs and access to appropriate health care in a timely fashion when those needs present.</p>	<p>Most people with learning disabilities will have access to a mainstream health service designed to recognise and meet their individual needs.</p> <p>People with learning disabilities benefit from being healthier due to an individual health plan to address the health inequalities currently inherent within the learning disability community.</p>	<p>More people with learning disabilities in Herefordshire will experience less health inequality and have a greater life expectancy.</p>		
LD3.07		<p>Existing resources: CCG commissioning resources.</p> <p>New resources: N/A</p>	Health services in Herefordshire will ensure that people with learning disabilities are able to access the same community and acute health care services as the non-learning disabled population. All providers will ensure that reasonable adjustments are in place / considered to enable this to happen.	<p>Access to mainstream healthcare:</p> <p>All health care services will have a proactive policy of promoting reasonable adjustment to enable ordinary access for people with learning disabilities wherever possible.</p>	<p>Most people with learning disabilities will have access to a mainstream health service designed to recognise and meet their individual needs.</p>	<p>More people with learning disabilities in Herefordshire will experience less health inequality and have a greater life expectancy.</p> <p>People with learning disabilities gain a valid social role through the use of mainstream healthcare.</p>		

LD3.08	HC/CCG	<p>Existing resources: AWB Commissioning team; CCG commissioning resources, AWB operational team input.</p> <p>New resources: CCG/AWB shared funding for beds.</p>	<p>Commissioners seek to utilise existing buildings, in partnership with a current independent sector provider, in order to develop a new transitional accommodation service for people with complex needs and high risk behaviours.</p> <p>Commissioners explore options for cross-boundary commissioning with Worcestershire as part of the STP, with a view to increasing the sustainability of the service.</p>	<p>People with complex or challenging behaviours:</p> <p>The local system wants to prevent unnecessary hospital admissions due to behaviours that challenge services. Where such admissions are necessary, the council and CCG will have the joint capability to bring people home as soon as possible and manage their reintegration here in the county.</p> <p>There is a jointly commissioned 'step-up/step-down' intensive support service and move-on / reintegration service for people with learning disabilities returning from assessment & treatment in hospital and for those deemed to be at risk of admission as identified within the Transforming Care at-risk cohort.</p>	<p>People with learning disabilities are less likely to experience prolonged stays in hospital or ATUs outside of Herefordshire, away from their support networks and ordinary lives.</p> <p>People with complex needs will be supported in a way that full involves them .and their families in their recovery.</p>	<p>People with learning disabilities and complex needs are supported to move-on to intensive models of support within the county.</p>		
LD3.09		<p>Existing resources: CLDT and AWB team capacity. Public Health Team capacity.</p> <p>New resources: Funding for revised health facilitator / professional trainer role.</p>	<p>Commissioning organisations will consider ways to support the training needs of GPs, other health professionals, social care professionals and care / support providers in order to support high quality and measureable progress of ongoing health improvement.</p> <p>The Public Health Team will look at ways of raising awareness of health screening and health checks amongst the learning disability population, including those people not currently known to services.</p>	<p>Facilitating improved health outcomes:</p> <p>There will be more capacity, created from within existing roles initially for the ongoing delivery and quality monitoring of professional training, health checks, and health action plans (LD3.03 - LD3.06 and improving access to a range of routine mainstream health screening programmes.</p> <p>Supported living and residential care providers will have more detailed service specifications to set out their role in promoting engagement with routine healthcare and screening programmes such as cervical screening, breast cancer screening, prostate and testicular cancer screening, diabetes screening etc.</p>	<p>People with learning disabilities are supported to attend routine screening appointments, resulting in them experiencing improved health outcomes.</p> <p>People with learning disabilities in acute hospital beds are routinely supported to communicate their needs and preferences to health professionals.</p>	<p>More people with learning disabilities in Herefordshire will experience less health inequality and have a greater life expectancy.</p>		

LD3.10	CCG	<p>Existing resources: CCG commissioning resources; third sector resources, e.g. Alzheimer's Society..</p> <p>New resources: N/A</p>	<p>The council will implement a process for identifying people with learning disabilities at point of dementia diagnosis in order to aid progression planning.</p> <p>Dementia awareness will be a standard part of the learning disability annual health check. This is of particular importance for adults with Down's Syndrome, so the annual health check should pay specific consideration to dementia symptoms in this group from age 30 onwards.</p> <p>The Public Health Team will look at ways of raising awareness of dementia amongst the learning disability community, ensuring that people are successfully directed toward all sources of information and support.</p>	<p>Dementia:</p> <p>There will be widely available accessible information and training in order to raise the level of awareness of dementia across the learning disability community (professionals, paid staff, service providers, family carers and people with learning disabilities).</p> <p>Adults with learning disabilities will be supported to access mainstream dementia diagnosis services wherever possible.</p> <p>Dementia awareness and potential diagnosis will be a routine part of GP annual health checks for people with learning disabilities over 40 and for people with Down's Syndrome over 30.</p>	<p>People with learning disabilities and their carers will have an improved awareness of dementia and know where to get information, advice and support with the condition.</p> <p>All people with learning disability will have improved annual screening for dementia and earlier access to treatment.</p> <p>People with learning disabilities perceived to be at risk of earlier onset dementia will be routinely screened for the condition from the age of 30.</p>	<p>People with learning disabilities and dementia will achieve greater independence, integration, choice and control over their lives.</p> <p>People with learning disabilities and dementia will live better lives by having access to the correct medical and environmental support.</p>		
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HEREFORDSHIRE LEARNING DISABILITY COMMISSIONING THEME 4: CITIZENSHIP, CHOICE AND CONTROL

People with learning disabilities want to have more choice and control over their lives and for those choices to be respected and valued.

Joint commissioners will work with people with learning disabilities, their families, friends and carers, and with providers to implement the aims and objectives of the new adult-wellbeing plan to ensure people with learning disability can achieve equal access to mainstream services and the broader community.

Those people who use services should have personal plans that enable them to meet their personal goals and live as independently as possible. People with learning disabilities need to be supported to review what their life looks like now, and what they want it to look like in the immediate and long term future. These plans will also outline what they need to do to meet their outcomes and what support they will get to assist them in this.

The learning disability community want to be able to choose different types of support, not just different support providers. Further work is required develop the market so that real choice is available. This will include work to enable people with learning disabilities, their families and carers, to know what good quality support looks like.

People with learning disabilities want to make and communicate choices that matter to them, alongside the people that care for them where the person wants to receive help and support. People who need help to make their views known should have simple access to advocacy services, and self-advocacy should be supported so that people can have their own voice.

ROW REFERENCE:	LEAD ORGANISATION:	THEME 4 INPUTS.	THEME4 ACTIVITIES.	THEME 4 PLANNED OUTPUTS.	THEME 4 INTENDED OUTCOMES.			THEME 4 SOCIAL IMPACT.
		What resources (finance/staffing/time) do the Council and the CCG need to deliver the required activity and output?	When the required inputs are agreed, what activities and processes do the Council and the CCG need to be planned and executed in order to deliver the expected output (i.e. product or service)?	When the planned activity and/or process are completed, what product and/or service do the Council or CCG intend to deliver?	By delivering these products and services successfully, what positive outcome/s will benefit people with a learning disability in Herefordshire? <i>(The length of time required to fully achieve some outcomes will vary significantly.)</i>			What additional changes or impacts do we expect to see within the wider community?
					SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	HEALTH & WELLBEING OUTCOMES	

<p>LD4.01</p>	<p>HC</p>	<p>Existing resources: Community Broker team; AWB Commissioning team; other council human resources.</p> <p>New resources: Resources to extend and expand the Community Connector pilot.</p>	<p>The council will ensure that Community Brokers are aware of the widest possible range of community activities, so that people with learning disabilities can maximise their choice of opportunities for social integration and independence with minimal reliance on formal support.</p> <p>The council will use the Community Connector role to support volunteer mentors or 'buddies' to support community organisations to offer opportunities to people with learning disabilities.</p> <p>Commissioners will look at ways to integrate the principles of Community Brokerage / Connection with the work already being undertaken by many learning disability service providers and the wider local voluntary sector.</p>	<p>Building social networks:</p> <p>The Council and the local NHS supports and facilitates, either directly or via partner organisations, a wide range of information about community activities, groups and opportunities and ensures that information is in a form accessible to people with learning disabilities.</p> <p>The council and the local NHS support partner organisations to educate and support the wider community about offering opportunities to people with learning disabilities and the barriers they may face in accessing such opportunities.</p>	<p>People with learning disabilities, their families and carers know where to find accurate and up-to-date information about activities and opportunities within their local area to enable them to integrate successfully within their community.</p> <p>People with learning disabilities and their families feel more confident about change and taking risks.</p>	<p>People with learning disabilities will experience increased independence and build better social networks, leading to improved social inclusion.</p> <p>People with learning disabilities will have less dependence on formal support; greater participation and wider informal networks; a wider circle of friends and relationships; greater self-determination; increased confidence and self-esteem.</p>		
<p>LD4.02</p>	<p>HC</p>	<p>Existing resources: Community Broker team; AWB Commissioning team; other council human resources. Access to the Travel Training Scheme in Children's Services.</p> <p>New resources: N/A</p>	<p>Commissioners will work with council colleagues to ensure a seamless process for applying for and issuing passes to people with learning disabilities known to services or GPs in Herefordshire.</p>	<p>Independent Travel:</p> <p>The Council supports and facilitates the use of free bus passes and independent travel training for people with a learning disability.</p> <p>People with learning disabilities in receipt of mobility benefits will be supported to take control of this resource and make decisions about their own travel needs wherever possible.</p>	<p>People with learning disabilities are, to the full extent of their ability, able to travel safely and independently around Herefordshire.</p>	<p>People with learning disabilities and their families feel more confident about change and taking risks.</p> <p>People with learning disabilities will experience increased independence and build better social networks, leading to improved social inclusion.</p>		

LD4.03	HC	<p>Existing resources: AWB Commissioning team; other council human resources.</p> <p>New resources: Funding for structured citizen advocacy for people with learning disabilities in Herefordshire. Training and support for the LDPB support officer and for the wider LDPB.</p>	<p>The council and the CCG will develop opportunities and partnerships to create and sustain support for self-advocacy and structured citizen advocacy for people with learning disabilities in Herefordshire.</p> <p>When carrying out development and procurement for services of interest to people with learning disabilities, the council and the CCG will enable people with lived experience of services to be involved in both the procurement and subsequent review of services.</p> <p>Recognising that outcomes are a measure of tangible change for a person using a service or opportunity, the council and CCG will support the Learning Disability Partnership Board to work alongside citizen advocacy groups to review progress against proposed strategic outcomes.</p>	<p>Self / Citizen Advocacy:</p> <p>The council and the CCG supports self-advocacy for people with learning disabilities and recognises the value it brings to delivering independence, citizenship and social recognition.</p> <p>There is an effective and supported self-advocacy organisation in Herefordshire that is able to promote the views of people with learning disabilities.</p> <p>There are opportunities and training for people with learning disabilities to be 'experts by experience' in Herefordshire, enhancing the effectiveness of service reviews, procurement, the Learning Disability Partnership Board and increase the impact potential of citizen advocacy groups.</p>	<p>People with learning disabilities and their wider circle of support have access to effective self-advocacy support to access and plan the services they need.</p> <p>People with learning disabilities have skilled support and opportunities to fully present their views individually and collectively.</p>	<p>People with differing levels of learning disabilities from all areas of the county are included and consulted appropriately on ALL council or NHS decisions that impact their lives.</p>		
LD4.04		<p>Existing resources: Commissioning team, alongside the AWB finance team</p> <p>New resources: N/A</p>	<p>The council and CCG (via the CLDT contract where appropriate) will support health and social care professionals – through training and access to up-to-date information resources – to advise people with learning disabilities on all aspects of financial well-being.</p>	<p>Financial wellbeing:</p> <p>Health and social care professionals have access to resources and training to enable them to provide accurate information and support to people with learning disabilities to enable them to maximise their financial wellbeing.</p> <p>People with learning disabilities will have improved access to training and support regarding budgeting, financial wellbeing and related life-skills.</p>	<p>People with learning disabilities will benefit from being able to budget their resources effectively, providing a greater sense of wellbeing and improved economic independence.</p>	<p>People with learning disabilities benefit from increasingly positive perceptions of disability created through economic empowerment and greater social value.</p>		
LD4.05		<p>Existing resources: Existing staff resources.</p> <p>New resources: N/A</p>	<p>The council will review the process for Direct Payments and ensure that it is fit for purpose for people with learning disabilities and other cognitive impairments. Where appropriate, the council will ensure that key staff are trained to be direct payment advisors.</p>	<p>Direct Payments and managed personal budgets:</p> <p>The council has a direct payment process in place that has clear information for people with learning disabilities. This includes Direct Payment advisors who are experienced at working with people with cognitive impairments and having accessible information.</p>	<p>People with learning disabilities routinely use Direct payments and personal budgets to access and plan the services they need.</p>	<p>People with learning disabilities have control over their resources and make real choices over how their care / support needs are met.</p> <p>People with learning disabilities will experience increased independence and build better social networks, leading to improved social inclusion.</p>		

LD4.06		<p>Existing resources: AWB Commissioning team; other council human resources</p> <p>New resources: Further training for key people in writing accessible information and software for picture library / symbols</p>	<p>The council and CCG will review existing information resources, in partnership with citizen advocacy groups, to ensure they are fit for purpose for people with learning disabilities.</p> <p>Commissioners will work with council colleagues to develop and implement information standards using current best practice, then train staff and partner organisations to revise all written information.</p>	<p>Access to information:</p> <p>The council and the CCG take account of the learning disability community when disseminating information to both people using services and the general population of Herefordshire.</p> <p>There are corporate standards and available tools / support for learning disability accessibility; written information is routinely produced in accessible formats and consultation includes people with learning disabilities. Commissioning organisations recognise their responsibility for leading the way on learning disability inclusion and citizenship.</p>	<p>People with learning disabilities have full access to a wide range of information about services, opportunities and general issues about life in Herefordshire.</p>	<p>People with learning disabilities have increased independence, greater control and improved social inclusion through being able to access and understand information about health, support and the wider responsibilities of citizenship.</p>		
LD4.07		<p>Existing resources: Existing staff resources.</p> <p>New resources: N/A</p>	<p>Commissioners recognise that a move away from communal building-based services for people with learning disabilities carries a risk of creating pockets of social isolation for some. To offset this, the council will encourage and support the development of initiatives within the existing service provision to combat this, particularly around opportunities to form friendship groups for social activities and the opportunity to form personal relationships.</p>	<p>Social / relationship opportunities: The council supports a number of initiatives to promote social integration for people with learning disabilities:</p> <ul style="list-style-type: none"> • Buddying and befriending to support special interests and social activities • Access to a local learning disability / autism specific dating agency 	<p>People with learning disabilities develop and maintain social or other personal relationships.</p> <p>People with learning disabilities make use of facilities or services in the local community, including public transport, and recreational facilities or services.</p>	<p>People with learning disabilities will lead full and purposeful lives in communities and develop a range of friendships, activities and relationships.</p>		

APPENDIX 1

DRAFT PLAN TO BE COMPLETED BY LD PROJECT BOARD 29.03.2018

LEARNING DISABILITY STRATEGY IMPLEMENTATION PLAN FOR 2018/19

Outcome No.	Strategic Priority	Lead	What? (activity and planned output)	Resources	When? (timeline for completion)	Who? (project leader)	Success Criteria (Agreed outcomes and metrics for agreeing success)	Agreed Governance
LD3.02	PRIORITY 3 Being Healthy & Safe.	CCG	Review of CLDT structure and activity, followed by implementation of any review recommendations.	Within contracted budget agreed by CCG.	Service review April 2018 to June 2018. Implementation of review recommendation completed by March 2019.	CCG LD Commissioning Lead.		Specific project group / plan reporting to CCG and informing JCB.
	PRIORITY 2 What I Do During the Day (Preparing for Adulthood)	CWB	CWD Action Plan –Preparing for Adulthood work strand	Within resources and SEND Reform Grant for supported internship development.	Commence April 2018 – March 2019	Senior Advisor - Post-16 Learning and Skills	Increase the number of Supported Internship starts from 10 to xxx to be agreed Increase the number of young people gaining employment from xx to xx (<i>baseline and target increase to be established and agreed</i>). Establish Supported Internship Forum. Number of trained job coaches. See Action Plan for further priorities, actions and outcomes	

ABBREVIATIONS KEY:

CCG = Clinical Commissioning Group

CLDT = Community Learning Disability Team

JCB = Joint Commissioning Board (Herefordshire Council & Herefordshire Clinical Commissioning Group)

LD = Learning Disability

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