ANGUS
Health & Social Care
Partnership

LEARNING DISABILITIES PRIORITY IMPROVEMENT PLAN

2021 – 2024



TABLE OF CONTENTS **PAGE NUMBER**

1.	Introduction and Purpose	3
2.	Background	3-5
3.	Where are we now?	5
4.	Demographics	5
5.	Health Inequalities	6
6.	Autism and Learning Disability	7
7.	Carers and Respite	7-8
8.	Financial Context	8-9
9.	Governance	9
10.	Engagement	9-10
11.	Local Priorities	10-18
	Appendix 1 - Local and National Policy Drivers	19-21
	Appendix 2 - Demographics	22

1. INTRODUCTION AND PURPOSE

This is the second learning disability improvement plan which sets out those areas of the service that are a priority for development and further improvement. It replaces the first improvement plan and highlights the progress made. This new plan builds on those improvements already achieved and details the improvements still being progressed and any new improvements identified. It talks about the challenges facing the service and what is causing these challenges such as:

- changes to the population
- more people needing support
- new areas of support emerging
- the cost of support and the amount of money available
- providing a quality service that can carry on into the future, making the best use of the money we have

2. BACKGROUND

In Angus there has been many improvements in services for people with learning disabilities since 2000 when the Scottish Government published 'The same as you?' report. It looked at the services for people with learning disabilities and people on the autism spectrum and made a list of 29 things that should be done to make the lives of people with learning disabilities better. The Scottish Government wanted to know if the lives of people with learning disabilities had got better since 'The same as you?' and set up a team of people to gather information and opinions about this. This information told the Scottish Government that there had been some positive changes in the quality of life for people with learning disabilities since ‘The same as you?’ was published in 2000. People with learning disabilities told them that they were much more accepted and valued in their communities than they ever were before. It also told them that people with learning disabilities were not being treated equally and fairly in other ways, such as with the treatment they receive for their health so they wrote another report in 2013 - ‘Keys to Life’ to make sure that all those who work in health care understand the health needs of people with learning disabilities and how these can be different from the general population.

In Angus, a lot of changes to services have been made because of ‘the Same as you’ and ‘Keys to Life’ by redesigning our services and then through the actions in our first learning disability improvement plan.

The first learning disability service improvement plan 2017 – 2020 looked at the following:

- Planning the replacement of the Gables Care Home with a supported housing development
- Looking at peoples care and support packages to see if we can improve them
- Looking at the college support service to see if it could improve
- Looking at the respite facilities available to see if they could improve

- Looking at how we provide overnight support to see if we could do this in different ways
- Introducing a Social Care Worker post to some of our staffing services so we could provide better support
- Finding accommodation in the community for people who had been living in hospital for a long time
- Looking at the people from Angus who lived in other areas of the country who wanted to come back to Angus and starting to plan how we could support them to do that.

The Scottish Government published another report in 2018 called 'Coming home: complex care needs and out of area placements. This is because there are still too many people with a learning disability and/or autism who live far away from their families or in a hospital because their needs can't be met where they live. The Scottish Government want to see fewer people moving to live far away from home and have published this report which has a list of 7 things that should be done so that people don't have to move away from their homes.

This new learning disability improvement plan will continue to focus on finding accommodation close by for people, so no one has to live in hospital or far away from Angus. It will also focus on new areas of improvement where people have told us they would like things to change.

The main drivers for this new improvement plan are:

- Making sure we do the duties that government legislation and policies say we must do
- The new areas of support that are emerging
- Making sure our service models are delivered in a way that means they can carry on into the future, providing a quality service that makes the best use of the money we have
- The cost of services and the amount of money we have available
- The increase and changes within the population
- More people needing support
- Advances in Technology Enabled Care. (The term technology enabled care (TEC) refers to technologies that have the potential to transform the way people engage in and control their own support and care)
- A focus on enablement and independence
- A focus on outcomes, new ideas and new ways of working
- Capacity demands – how much need there is and how much resource such as staff and money we have to meet it.

It is vital that learning disability priority improvement actions are taken forward so that we can address the current challenges facing the service and deliver quality services to those who need

them most with the resources available to us, and do this in a way that they can continue into the future.

3. WHERE ARE WE NOW?

As a result of the last improvement plan, we have made positive progress where more innovative local solutions have been identified that can better meet the needs of individuals. Funding was made available to adult services to assist with ongoing project work and ensure that the pace of change can be accelerated. The learning disability service used that resource to secure additional expertise in the form of a seconded Development Officer with the required knowledge of learning disability practice and who also has experience of commissioning, project work and service improvements.

Further improvement work is required to ensure that the service is delivered as efficiently as possible, enabling resources to be directed to the areas of most urgent need and addressing current and future service delivery requirements. The main pressures are outlined in the following sections of this improvement plan.

4. DEMOGRAPHICS

It is important that demographic pressures are identified so that we can anticipate new or increased demand and plan capacity in our services. The learning disability service is experiencing increasing demand for services due to demographic change, particularly in the areas of increased complexity of need, ageing carers and autism and learning disability. Evidence to support these demographic pressures are included in the relevant sections of this report.

Adults with learning disabilities are experiencing greater longevity resulting in a diverse range of health needs developing as people grow older. They are often cared for by aging parents. Anecdotal evidence also suggests the population of adults with a learning disability who have complex needs and co-existing conditions is also increasing.

Further data requirements have been identified to provide evidence of emerging demographic change. This will provide a clearer picture in relation to capacity and demand issues and identify the levels of complexity and/or enablement and trends related to demographic information. This will inform best use of resources. This is a priority as current data available to the learning disability service requires improvement.

Further information on the local and national demographic picture can be found in Appendix 2.

5. HEALTH INEQUALITIES

Health inequalities are preventable and unjust differences in people's health. This can be across a community or between specific groups within a community. They do not happen by chance. Health inequalities have a very real impact on people in Angus: for example, in the most deprived areas of the county, men can live approximately nine years less and women three years less, than those living in the least deprived areas.

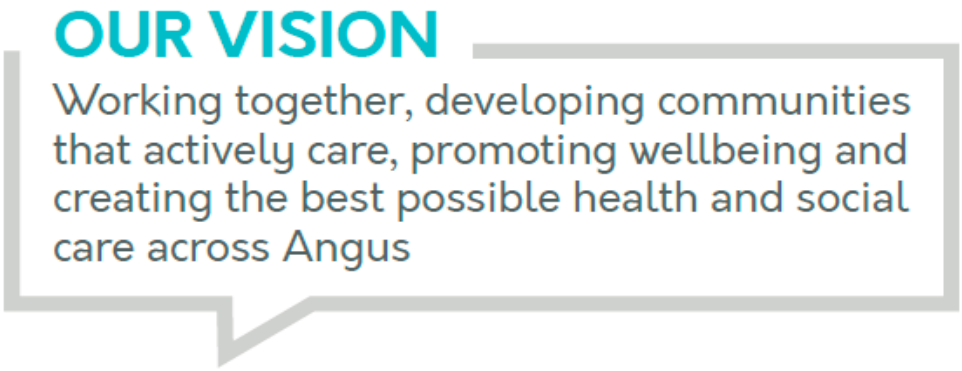
Research tells us that people with learning disabilities have poorer health than the general population.

"People with learning disabilities have a different pattern of health conditions from the general population and different causes of death. It is therefore important that reasonable adjustments are made to include them in all health services and preventative health screening programmes aimed at the whole population, and design and deliver specific services and supports. These changes in the learning disability population will therefore impact on current and future service provision for this population."

(People with Learning Disabilities in Scotland: 2017 Health Needs Assessment Update Report)

The growing population of people with a learning disability, especially those with complex health needs brings about new challenges for health professionals and care services. The planning and provision of quality healthcare is crucial to improving the health and quality of life of people with learning disabilities. Therefore, In Angus we will source and gather local information to help us understand the health needs of people with a learning disability. Gathering health data about people who currently use our services will help us with the earlier detection and management of physical and mental health conditions, as well as timely and effective treatment for more urgent and serious medical conditions. The information gathered will inform our future priorities for Health Promotion and Health improvement.

The Strategic Commissioning Plan 2019-2022 sets out Angus Health and Social Care Partnership's vision and priorities. It is built on the belief that everyone has the right to live a long and healthy life and be supported to live at home when it is safe to do so. The Angus Care Model is about shifting the balance of care so that more people are supported in the community and can maintain their independence for longer. In practice this means that communities have teams of health and social care professionals, working together, to make sure people get the support and care they need to stay at home and have their health needs met.



6. AUTISM AND LEARNING DISABILITY

Autism is a lifelong condition. It is very unique to each person and varies from individual to individual. The numbers of people with autism and a learning disability have been rising every year. The 2019 statistics collated by Learning Disability Statistics Scotland (LDSS) say that 18.6% of adults with a learning disability in Scotland also have autism. In 2018 the figure was 18.7%. In Angus 23.3% of adults with a learning disability have autism. In 2019 the figure was 23% indicating a slight decrease.

The main pressures experienced by the learning disability service in relation to autism are:

- The increasing number of people with autism requiring support
- There are no specific services for people with autism who have no learning disability. Autism is not a learning disability
- The very unique and complex needs that people with autism and learning disability can present with.

7. CARERS AND RESPITE

Our Vision for Carers - Carers of all ages are recognised and valued as equal partners, are fully involved in shaping services in Angus and are supported to have fulfilling lives alongside caring.

The Learning Disability Statistics Scotland (LDSS) data for 2019 reports that there are 207 adults with a learning disability in Angus living with a carer. That is 43.1% of all adults with a learning disability known to us in Angus that live with a carer. That is the 10th highest number out of the 32 local authority areas in Scotland. The national average is 31.3%. Our data collection methods on carer age is incomplete. As a result of this, we only hold dates of birth for half of the carers known to us. From the 100 carers whose age is known, 53% are aged 55 and over. The impact of this is the increasing likelihood that people with a learning disability who currently live with and rely on family carers are at risk of a breakdown in care provision. It is projected that on average, 3 individuals annually will require a support package of 18 hours per week due to ageing carers. It is estimated the impact of this will be approximately £50k per year.

The Carers (Scotland) Act 2016 (the Carers Act) places several duties in relation to support for unpaid carers on Angus Health and Social Care Partnership, Angus Council and NHS Tayside. National Health and Wellbeing Outcome 6 states that carers should be supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and well-being. The Partnership is committed to recognising and valuing the contribution of carers and, working with Angus Carers Centre, wants to ensure that they know how to access support when they need it. Unpaid carers of adults with a learning disability, or with both a learning and physical disability, have helped to shape this improvement plan through a survey. Carers have told us what matters most to them and how they can be better supported in their caring role.

The Carers Act strengthened the commitment to the principle of carer involvement in how services for supported people and carers are planned and delivered, at both a strategic and individual level.

A Carer of someone with a learning disability said they would like this to go further:

"To have a Learning Disability specific forum where individuals with learning disabilities, unpaid carers, paid carers and council representatives can come together and review current provision and the needs of the Learning Disability community"

Angus Health and Social Care Partnership's vision is that "Carers of all ages are recognised and valued as equal partners, are fully involved in shaping services in Angus and are supported to have fulfilling lives alongside caring". All services need to take account of how carers can be identified, supported and included in decision-making; and recognise their value as expert and equal partners. Feedback from carers who undertook the survey included a wide variety of suggested improvements to inform action planning including:

"More respite and accommodation locally and support for aging parents to avoid emergency admissions"

"Provide more respite at home for dependents so carers can have a break"

"Increased resources for care in the community to support unpaid carers"

"Need for flexibility – day services at weekends?"

"More LD outreach available to support parent carers"

"Make provision for carer to stay with cared for if needed (especially in hospital)"

"Supported people are living longer, and this will impact on carers who will also be aging and their ability to care may change due to their own health needs"

"Provisions to be made for an ageing population. Adults with learning disabilities often stay with parents till late in life; more choice now rather than when it's crisis point"

8. FINANCIAL CONTEXT

The learning disability priority improvement work intends to support the service and the IJB to manage pressures associated within learning disabilities. The current financial position remains challenging with demographic pressures from children transitioning into adult services having a significant impact on budgets. There is also an ongoing financial impact due to the COVID 19 pandemic. Since the implementation of the first learning disabilities improvement plan, good progress has been made in managing some of the ongoing financial pressures although this does not cover all the identified pressures. Due to these ongoing and increasing financial pressures it is necessary to ensure that services are efficient as possible.

The allocated budget for the learning disability service has increased by £5.5m over the last 6 years and actual spend has increased by £5m.

There are several explanations for the increased spend:

- Between 2013-2017 there was a 7.1% increase in the learning disability population in Angus.
- 23% of adults with a learning disability are also on the autistic spectrum in Angus – a rate well above the 18.6% Scottish average.
- The increase in people with complex and co-existing conditions within the learning disability service resulting in high cost care packages (who do and who do not have a learning disability).
- The increase in numbers year on year of children transitioning into the service.
- The increasing population of ageing carers within the learning disability service.
- The policy direction from institutional to more personalised care and to living in the community with support.
- The introduction of self-directed support (SDS), a key theme of which is to enable individuals to have greater choice and control over their support, with a focus on outcomes. There appears to be a direct correlation to increased budget spend and the implementation of self-directed support in Angus. Anecdotal evidence suggests that an unintended outcome of SDS is that there are fewer opportunities for economies of scale with shared support as individuals choose their preferred provider and individual support package. There is also anecdotal evidence to suggest that people who may previously not have received a service are now in receipt of one through the SDS assessment and allocation processes.
- The increase since 2012 of the number of adults with learning disabilities living in mainstream accommodation with support.
- An increase in contracts with private providers to meet rising demand and the increases to contracts required year on year, some related to the introduction of the Living Wage in 2016/17.
- The high percentage of adults with a learning disability who attend a day centre, alternative day opportunities or both.
- The high percentage of adults with a learning disability in Angus who are supported to attend further education.

9. GOVERNANCE & REPORTING MECHANISMS

The learning disability improvement programme reports monthly progress to the Improvement and Change Board of the Angus Health and Social Care Partnership and also reports directly into the Integration Joint Board (IJB) as required.

10. ENGAGEMENT

This plan and the main priorities for improvement for adults with learning disabilities in Angus has been informed by feedback from users of services, carers, local people and stakeholders. This plan is based on what people have said about how things could be improved and what would make a difference. People have told us what is important to them through a variety of engagement activities including focus groups and a survey monkey.

Engagement will continue through a variety of activities to make sure that local improvements and priorities are meeting local need and informed by what is important to people and that the range of services delivered are focussed on priorities.

11. LOCAL PRIORITIES FOR ADULTS WITH LEARNING DISABILITIES IN ANGUS

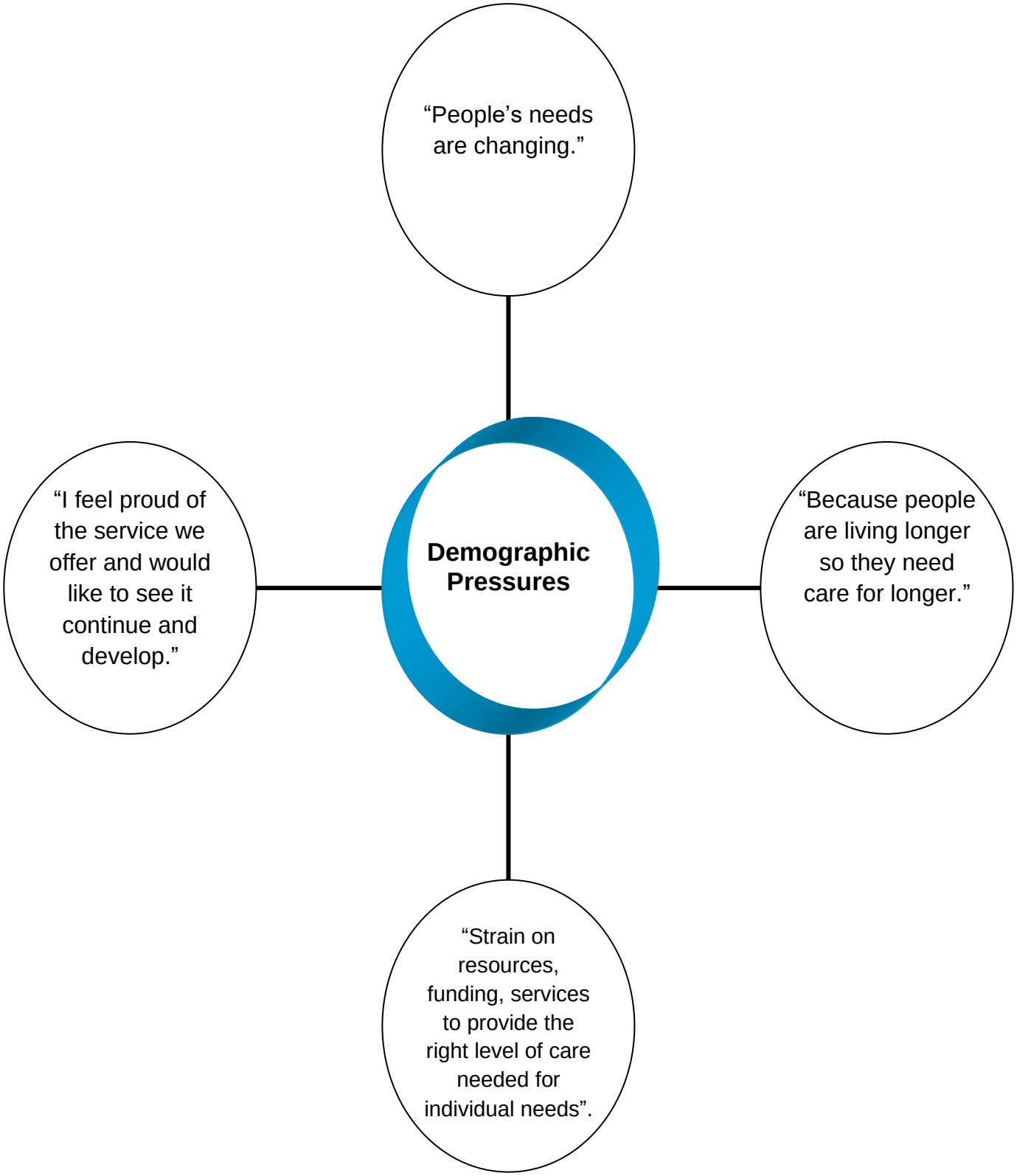
The local priorities identified through engagement activity and informed by analysis of demographic and workforce data detailed below were used to inform the action plan that accompanies this improvement plan and specifies what actions will be taken to address these priority areas.

This plan focuses on improvements in relation to the sections below with the following outcomes identified:

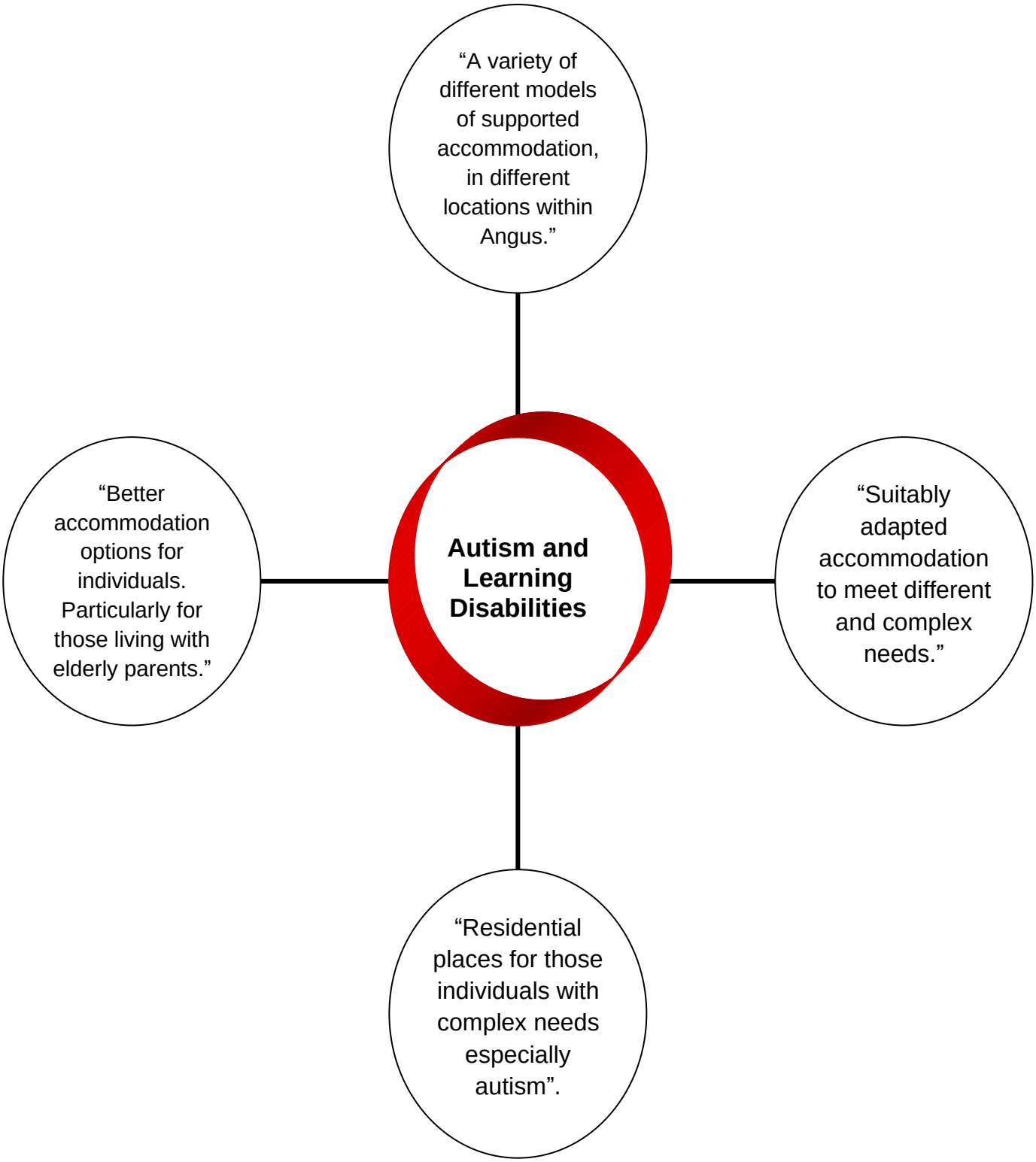
Improvement Area	Outcome
Demographic Pressures	Manage future demand within existing resources.
Autism and Learning Disability	Specialist accommodation and care provision to reduce the likelihood of out of area placements and enable the repatriation of those already out of area.
Support and Care (SDS)	(all care packages including non-residential) Ongoing review of all care packages to ensure we are delivering an efficient and effective service.
Personal Care (SDS)	Ongoing review of all care packages to ensure we are delivering an efficient and effective service.
Carers and Respite	Further development of respite model to ensure accessibility for those with both a learning disability and a physical disability.
Accommodation	(including residential and out of area) Ensure suitable accommodation is available in Angus to reduce the likelihood of out of area placements, enable the repatriation of those already out of area and reduce the likelihood of any delayed discharges.

Day Centres and Community Opportunities	Ensure future demand for day centre placements can be met by addressing building, capacity issues and delivery models.
Health Inequalities	(including support models e.g., step down) Develop a health promotion plan within Angus to ensure that both local and national health inequalities issues are addressed.

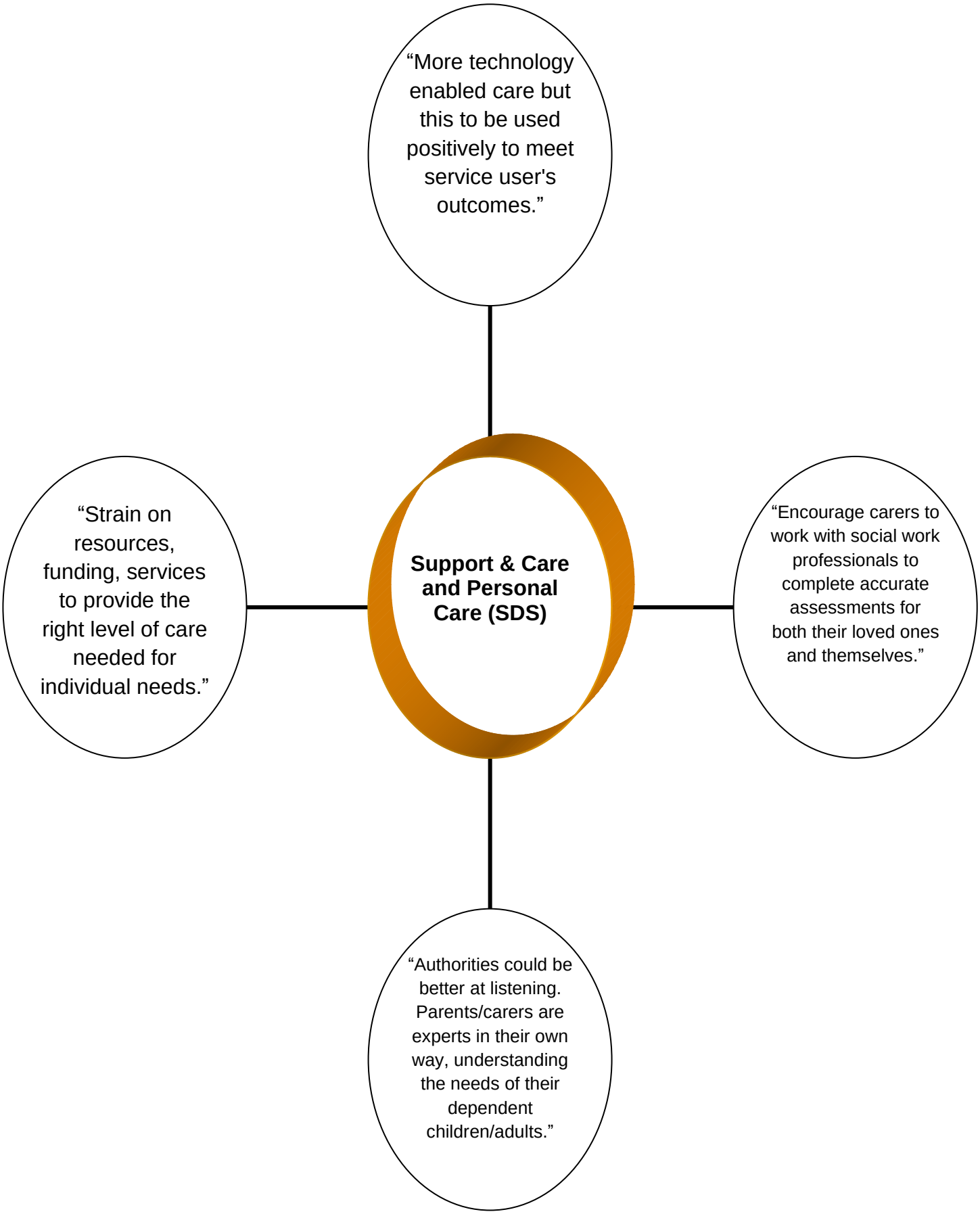
1. Demographic Pressures



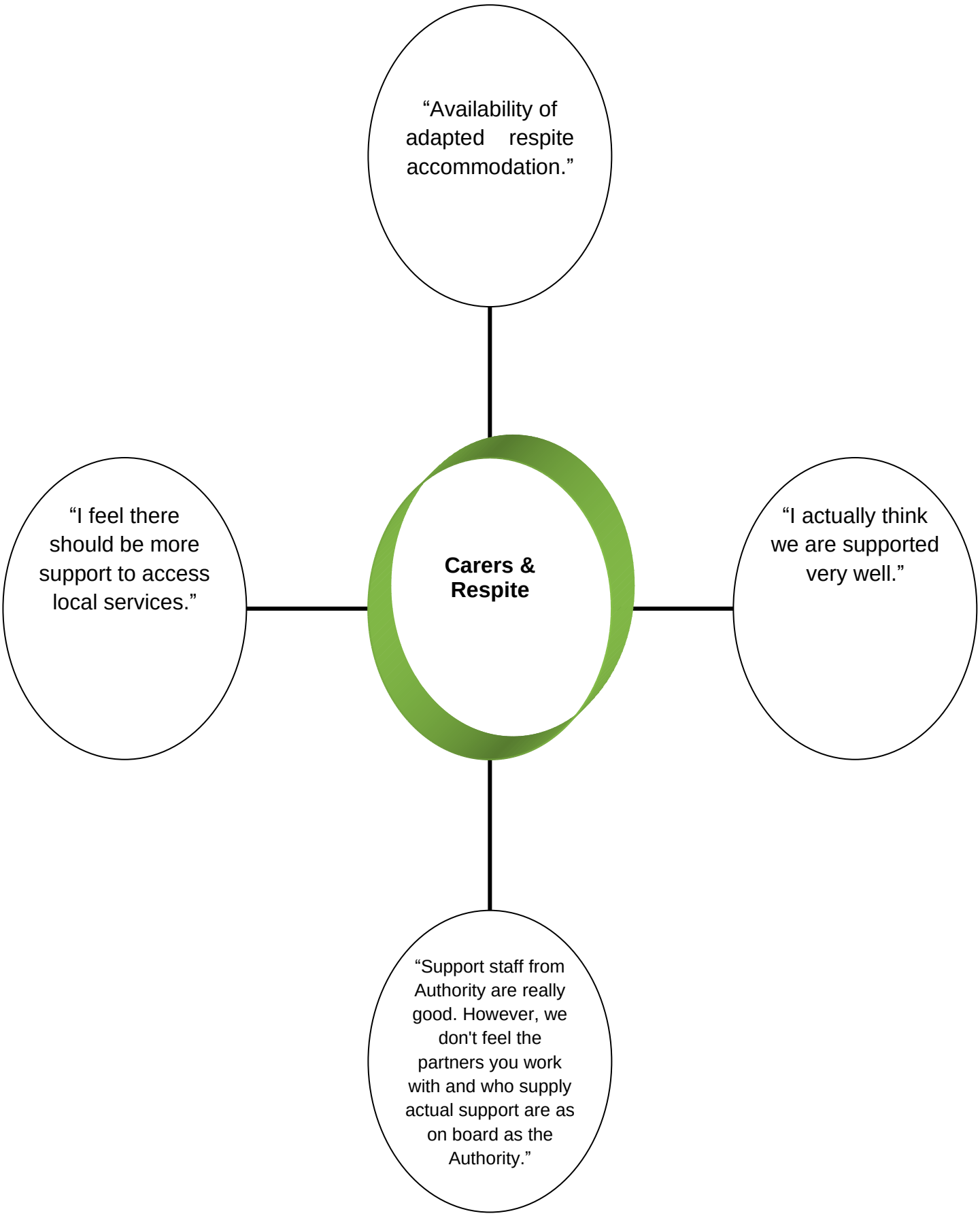
2. Autism and Learning Disability



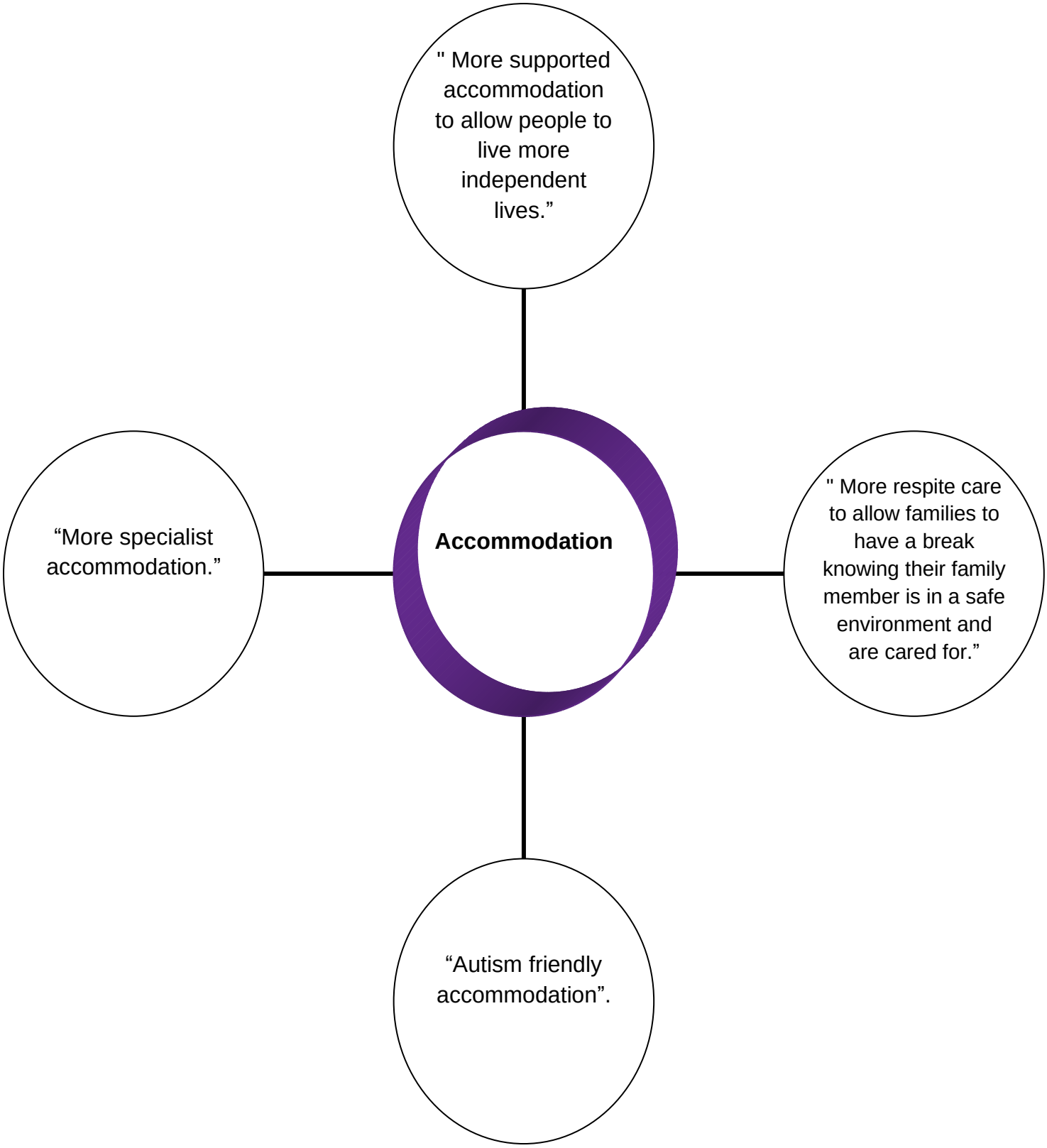
3. Support & Care and Personal Care (SDS)



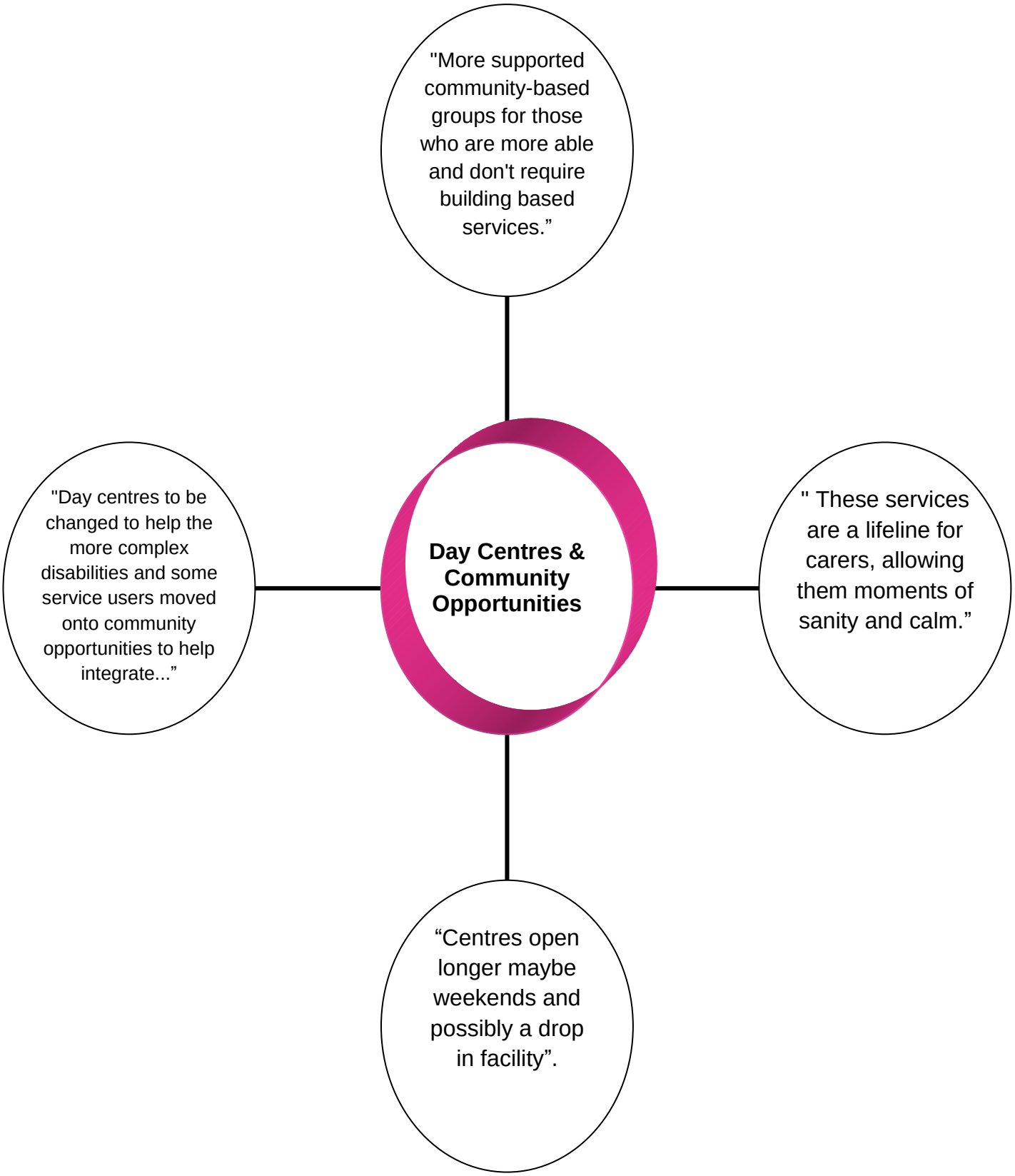
4. Carers & Respite



5. Accommodation



6. Day Centres & Community Opportunities



7. Health Inequalities



Appendix 1

LOCAL AND NATIONAL POLICY DRIVERS

- **The Same As You? 2000 -** *The same as you?* (SAY) (Scottish Executive, 2000) was launched by the Scottish Executive in May 2000 and reviewed the services then available to people with learning disabilities and people on the autism spectrum. https://www.gov.scot/publications/same-2000-2012-consultation-report/

- **The Keys to Life 2013** - The new learning disability strategy in Scotland, following on from, and building on the principles and successes of The same as you? The Scottish Government has set a key objective to make Scotland healthier by tackling ill health and by focusing on health inequalities. To be able to make progress in respect of people with learning disabilities will require a much greater understanding of their specific needs in order to address them. https://www.gov.scot/publications/keys-life-improving-quality-life-people-learning-disabilities/pages/7/

- **The Keys to Life Implementation Framework – 2019 – 2021** - The Implementation Framework 2019 – 2021 adopts a 'whole system, whole population and whole person' approach to improving the lives of people with learning disabilities in Scotland. https://www.scld.org.uk/the-keys-to-life-implementation-framework-2019-2021/

- **Coming home: complex care needs and out of area placements 2018** - Report on out of area placements and delayed discharge for people with learning disabilities and complex needs. https://www.gov.scot/publications/coming-home-complex-care-needs-out-area-placements-report-2018/pages/11/

- **No Through Road: people with learning disabilities in hospital 2016** – a report from the Mental Welfare Commission for Scotland following visits to all 18 hospital units for people with learning disability in Scotland (excluding forensic units) to look at delayed discharges and discharge planning. https://www.mwcscot.org.uk/sites/default/files/2019-06/no_through_road.pdf

- **People with Learning Disabilities: 2017 Health Needs Assessment Update Report** - This health needs assessment provides a broad overview of the current research evidence of the health needs of adults with learning disabilities. It is an update of the 2004 health needs assessment. http://www.healthscotland.scot/publications/people-with-learning-disabilities-2017-health-needs-assessment-update-report

- **Health and Social Care Integration (HSCI**) - New legislation, in the form of the Public Bodies (Joint Working) (Scotland) Act 2014, came into force on 1 April 2014. The Act requires all Health Boards and Local Authorities to integrate their health and social care services for adults. This integration will ensure that services are better coordinated for all patients and users. https://www.legislation.gov.uk/asp/2014/9/contents/enacted

- **National Health and Wellbeing Outcomes** - The National Health and Wellbeing Outcomes are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care. The Scottish Government have set out nine

national outcomes that are to be delivered through the integration of health and social care. Outcome 2 states that people, including those with disabilities or long-term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community. https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/

- **National Health and Wellbeing Indicators** – A core suite of indicators which will measure progress towards the National Health and Wellbeing Outcomes. https://www.gov.scot/publications/health-social-care-integration-core-suite-indicators/

- **Releasing Time to Care** – a national strategy within health designed to ensure efficiency and streamlined, organised and structured care and environments**.** https://www.bing.com/search?q=releasing+time+to+care+scotland&src=IE-SearchBox&FORM=IESR4A

- **The Social Care (Self-directed Support) (Scotland) Act 2013** - The Act came into force on 01 April 2014 and places a duty on local authority social work departments to offer people who are eligible for social care a range of choices over how they receive their social care and support. https://www.legislation.gov.uk/asp/2013/1/contents/enacted

- **20 20 Vision** – Sets out the vision for healthcare in Scotland is that, by 2020, everyone is able to live longer, healthier lives at home, or in a homely setting. Scottish Government, September 2011 www.gov.scot/Topics/Health/Policy/2020-Vision

- **Independent Living (2010)** -Disabled people's organisations identified independent living as the overarching priority for disability equality and the "Shared Vision for Independent Living" is the Scottish Government's headline policy for disabled equality and disabled people: https://www.webarchive.org.uk/wayback/archive/20170701074158/http://www.gov.scot/Publications/2010/03/29164308/1

- **National Institute for Health Research (NIHR)- Better health and care for all (February 2020)** – This review brings together NIHR funded research for and about health and social care services for people with a learning disability better health and care for all

- **The Carers (Scotland) Act** commenced on 1 April 2018. The package of provisions in the Act is designed to support carers' health and wellbeing. These include, amongst other things:
  - a duty on local authorities to provide support to carers, based on the carer's identified needs which meet the local eligibility criteria. National matters which local authorities must have regard to when setting their local eligibility criteria will be set out in regulations;
  - a specific Adult Carer Support Plan and Young Carer Statement to identify carers' needs and personal outcomes; and
  - a requirement for each local authority to have its own information and advice service for carers which must provide information and advice on, amongst other things, emergency and future care planning, advocacy, income maximisation and carers' rights. https://www.legislation.gov.uk/asp/2016/9/contents/enacted

- **Overnight Support -** The Angus Health and Social Care Partnership (AHSCP) have undertaken a review of overnight support focussing on enablement and person-centred response options. This was part of a national drive for all areas of Scotland to review overnight support, driven by the implementation of the Scottish Living Wage.

- **Staffing Structures** -The Angus Health and Social Care Partnership introduced a Social Care Worker post into their staffing structures where applicable in 2019 in order to address some issues currently being faced by the social care workforce. These included:

- A staffing structure more aligned to the Scottish Social Services Council staff registration categories.
- The opportunity to consolidate the current staffing structure resulting in a more effective workforce with a range of skills that should strengthen the workforce and provide more flexibility.
- A new structure that will improve staff recruitment and retention by providing posts with varying levels of responsibility, qualification and skills requirements.
- A structure that will address current issues in relation to post capability e.g., for those staff in SCO roles unable to obtain an SVQ level 3 and/or not competent in certain aspects of the current SCO job role.
- A structure and pay grading more aligned to those in the private and voluntary sector thus strengthening the external social care market in Angus.
- A more sustainable structure.

APPENDIX 2

DEMOGRAPHICS

The data source used in this section of the report is from the Scottish Consortium for Learning Disabilities (SCLD) Learning Disability Statistics Scotland 2019 – Published 17 December 2019. This data shows both the local and national picture of learning disabilities statistics in Scotland. The data gathered is in relation to 'adults with learning disabilities' which includes adults with learning disabilities and/or on the autism spectrum who are known to local authorities in Scotland. These statistics only capture adults with autism who are known to the learning disabilities service and do not capture the wider ASD population.

- In 2019, there were 23,584 adults with a learning disability known to local authorities across Scotland.

- Nationally this equates to 5.2 people per 1,000 population. Angus currently sits slightly below the national average with 5.0 per 1,000 population.

- There are currently 484 service users open to the Angus Learning Disabilities team.

Autism

- Nationally in 2019 there were 4,383, (18.6%), adults identified as being on the autism spectrum.
- Of individual records submitted (3,934) 2,534 adults (64.4%) were known to have a learning disability and 1,115 adults (28.3%) were reported as not having a learning disability.
- As at September 2020, within Angus the learning disability service had 105 adults with autism known to the service. This is approximately 25% of the adult learning disability case load. 23 individuals have autism but no learning disability. All other individuals have autism and a learning disability.

Day Centres

- In 2019, there were 4,296 adults with learning disabilities who attended a day centre. This is 18.2% of all adults with learning disabilities
- Within Angus there are currently 90 service users attending a day centre which is 18.7% of all adults with learning disabilities open to the service.

Accommodation

- Nationally in 2019, 61.8% (14,584) of all adults with learning disabilities known to local authorities lived in mainstream accommodation, 14.7% (3,466) lived in supported accommodation and 7.8% (1,837) lived in registered adult care homes. 921 (3.9%) lived in 'other' accommodation.
- In Angus there are currently 306 (63.2%) people living in mainstream accommodation, 101 (20.9%) living in supported accommodation, 70 (14.5%) living in a registered adult care home and 7 (1.4%) living in 'other' accommodation.