

WARDS AFFECTED

All wards (City-wide issue)

FOREWARD TIMETABLE OF CONSULTATION AND MEETINGS:

Health Policy Board Social Services and Personal Health Scrutiny Committee Cabinet 15th September 2001 4th October 2001 19th November 2001

VALUING PEOPLE: A NEW STRATEGY FOR LEARNING DISABILITY FOR THE 21ST CENTURY

Report of the Director of Social Services

1. Purpose of Report

1.1 The purpose of this report is to introduce the recent White Paper 'Valuing People: A New Strategy For Learning Disability For the 21st Century"and gives information on the need to set up a Learning Disability Partnership Board for Leicester.

2. **Summary**

- 2.1 Many of the White Paper proposals have objectives with performance indicators being proposed to check the progress and success of local Learning Disabilities Services. The report also sets out a framework for the development of the Learning Disability Partnership Board in Leicester.
- 2.2 The White Paper identifies the following key priorities:
 - Modernising day services
 - Enabling people staying in long stay hospitals to move towards more appropriate accommodation in the community
 - Developing supported living approaches and other housing options
 - Providing specialist local services for people with challenging behaviour
 - Developing more integrated provision for children with severe disabilities and complex needs
- 2.3 The White Paper announced the creation of two new funds :
 - The Learning Disability Development Fund worth up to £50 Million per year (£20m capital and £30m revenue)

- The Implementation Support Fund worth £2.3 million per year For three years from 2001.
- 2.4 The Learning Disability Development Fund will be introduced in April 2002 to support priorities for service change. The government will set indicative allocations in late Autumn 2001. Plans for using the revenue funding and bids for the capital funding need to be submitted in an updated Learning Disabilities Joint Investment Plan for submission to the Department of Health by January 2002. Only a Learning Disability Partnership Board can make applications to this fund.
- 2.5 From 2002, the Department of Health will issue an annual circular about the content of the Learning Disabilities Joint Investment Plan that will need to be updated each year.
- 2.6 The Social Services and Personal Health Scrutiny Committee at its meeting on 4th October 2001 recommended that there should be an all-party representation from the City Council on the Learning Disabilities Partnership Board and that the Chair should be a Councillor
- **3**. Cabinet is recommended:
- 3.1 To agree that there be an all-party representation on the Learning Disability Partnership Board and that the Board should be chaired by the Cabinet lead for Social Services and Personal Health Care.
- 3.2 To note that in order to meet the requirement to set up a Learning Disability Partnership Board for Leicester by 31st October 2001, an interim Board meeting to discuss draft terms of reference was held on 18th October 2001.
- 3.3 To note the draft terms of reference (Appendix A)
- 3.4 To note that The Learning Disability Partnership Board will operate as a sub-group of Health Partnership Executive Board within the overall framework provided by Local Strategic Partnerships.

4. Headline financial and legal implications.

- 4.1 The existing Joint Investment Plan maps current social services and NHS spend on adults with learning disabilities at £18 million.
- 4.2 There will be additional funding for preparing new service development for national funds though these funds are likely to be limited and certainly will not be enough in themselves. The best use of Local Authority and NHS resources will be the key to success.

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FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

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Valuing People: A New Strategy for Learning Disability for the 21st Century

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SUPPORTING INFORMATION

1. Report

- 1.1 Valuing People, the first White Paper on learning disability services for thirty years, was published this spring. It takes a cradle to grave and cross government approach. It spans childhood through to old age and covers health, social care, education, housing and employment.
- 1.2 Four key principles are set out in the White Paper and these are: Rights, Independence, Choice and Inclusion. These rights are grounded in the legislation that confers rights on all citizens including people with learning disabilities:
 - The Human Rights Act 1998
 - The Disability Discrimination Act 1995
 - The Race Relations Act 1976
 - The Race Relations (Amendment) Act 2000
 - The Sex Discrimination Act 1975; and
 - The UN Convention on the Rights of the Child, which was adopted in the UK in January 1992

- 1.3 The problems facing people with learning disabilities on a national level can be summarised as:
 - Social exclusion few in work, traditional day services, little choice and control over their lives, poor transition planning for young people, unmet health needs, heavy reliance on welfare benefits and higher costs for families with lower employment prospects.
 - Inconsistent services: variation in expenditure, availability and coverage.
 - Poor leadership and management of services: less than effective partnership working between health and social care services; services not responsive to individual need; low levels of training and qualification and staff shortages.
- 1.4 In Leicester this picture is a little more varied with some good partnership working with the NHS taking place. Nevertheless, many of the national problems exist on a local basis. The challenge for all local authorities with social services responsibilities is whether the current environment enables the delivery of a complex and challenging change agenda. This has to be seen within the context of radical reform agendas within mental health and older people services as well as the establishment of Primary Care Trusts. Eligibility criteria, charging policies and inadequate funding, particularly in terms of investment necessary to bring about the modernising agenda will set stern local and national tests.

Progress in Leicester

- 1.5 Some of the notable service developments in Leicester include:
 - An innovative respite service for Asian service users that has been praised in an evaluation by the National Development Team
 - The establishment of a community based challenging behaviour service by Turning Point and is one of the first of its kind in the country
 - The establishment of a supported employment service run by Co-Options which will complement the 'in house' Employment Plus service and help Leicester to reach the national targets being set
 - The establishment of an Advocacy Service that will support the voices of black and white service users through forums and advocacy work.
 - A supported living programme that aims to give more choices to people with learning disabilities over where they live

- A Day Time Communities Opportunities Team designed to spearhead the provision of community based services and opportunities
- Person Centred training being implemented by Barbara MacIntosh

 a Learning Disability Consultant of international repute and being commissioned by social services and health
- Training in Physical Interventions for staff working with people with challenging behaviour
- Targeted training to work towards achieving the target of 50% of all staff working in the learning disabilities field to be qualified to at least NVQ Level II by 2004

There still remains much to be done especially in the field of day services where the government is indicating that it wishes traditional day services to have been transformed into flexible person-centred services by 2006. There is also the issue of hospital re-provision where long stay Learning Disability patients have to be re-settled into their local community by 2004. The local old long stay hospital that serves Leicester is Gorse Hill and it has a closure plan to re-provide for its patients by 2003.

- 1.6 The national and local challenges are to:
 - Tackle social exclusion
 - Provide better life chances for people with learning disabilities and their families.
 - Achieve better value for the £3 billion currently spent by Local Authorities and the NHS on learning disability services
 - Reduce variation in service provision
 - Promote partnership working and a person-centred approach
 - Raise standards

The implementation of this on a local level will become the responsibility of Learning Disability Partnership Boards, which are described in more detail in chapter 1.8

Policy Framework

1.7 The White Paper identifies 11 key objectives:

Objective 1: Maximising Opportunities for Disabled Children To ensure that disabled children gain maximum life chance benefits from educational opportunities, health care and social care, while living with their families or in other appropriate settings in the community where their assessed needs are adequately met and reviewed.

Objective 2: Transition into Adult Life As young people with learning disabilities move into adulthood, to ensure continuity of care and support for the young person and their family and to provide equality of opportunity in order to enable as many disabled young people as possible to participate in education, training or employment.

Objective 3: Enabling People to Have More Control over Their Lives To enable people with learning disabilities to have as much choice and control over their lives through advocacy and a personcentred approach to planning services they need.

Objective 4: Supporting Carers To increase the help and support carers receive from all local agencies in order to fulfil their family and caring roles effectively.

Objective 5: Good Health To enable people with learning disabilities to access a health service designed around their individual needs, with fast and convenient care delivered to a consistently high standard and with additional support where necessary.

Objective 6: Housing To enable people with learning disabilities and their families to have greater choice and control over where, and how they live.

Objective 7: Fulfilling Lives To enable people with learning disabilities to lead full and purposeful lives in their communities and to develop a range of friendships, activities and relationships.

Objective 8: Moving Into Employment To enable more people with learning disabilities to participate in all forms of employment, wherever possible in paid work and to make a valued contribution to the world of work.

Objective 9: Quality To ensure that all agencies commission and provide high quality, evidence based and continuously improving services, which promote both good outcomes and best value.

Objective 10: workforce Training and Planning To ensure that social and health care staff working with people with learning disabilities are appropriately skilled, trained and qualified, and to promote better understanding of the needs of people with learning disabilities and the wider workforce.

Objective 11: Partnership Working To promote holistic services for people with learning disabilities through effective partnership working between all relevant local agencies in the commissioning and delivery of services

Implementation Schedule

1.8 The key actions are:

Learning Disabilities Partnership Boards

- 1.9 Chief Executives of Local Authorities with social services responsibilities are to set up learning Disability Partnership Boards by 31st October 2001. Boards should be chaired by a senior government officer or elected member. Statutory sector interests to be represented include social services, health bodies (Health Authorities, NHS Trusts, Primary Care Trusts), Housing, Education, Environment Development, Arts and Leisure, the Employment Service. People with learning disabilities (with appropriate support) and carers must be full members of the Board. Independent Providers of Services should also be represented.
- 1.10 Leicester's Learning Disabilities Partnership Board which needs to reflect the cultural diversity of the City and will have the following members:

Chair - Elected Member or Senior LA Officer (to be

decided by Cabinet

Elected Members Cross party representation (to be agreed by

Cabinet)

2 x Carers - CLASP 2 x Service Users FAIRDEAL

1 x Representative - Private Providers of Social Care

1 x Representative - Voluntary/Charitable providers of Social Care

Providers

1 x Representative – Voluntary Sector

Assistant Director - Social Services

Head of Service (Learning Disabilities) - Social Services

Assistant Director - Education
Assistant Director - Housing

Assistant Director - Environment and Development

Assistant Director - Arts and Leisure

Assistant Director (Learning Disabilities) - Leicestershire & Rutland

Healthcare Trust

Lead Clinician (Learning Disabilities) - LRHT (Leicester Frith Hospital

Assistant Director (Children's Services) - Social Services

Director of Strategic Development

Director of Strategic Development - Leicester City West PCT

Chief Execuitve (or her nominee) - Melton, Harborough &

Rutland PCG

Chief Executive (or her nominee) - Eastern Leicester PCT Acting Chief Executive ((or his nominee) - Leicestershire Health

Authority

Executive Director - Learning Skills Council

Manager Disability Services - Job Centre

Chief Execuitve - Leicestershire Careers
Guidance Services

- 1.11 Boards should appoint 'champions' for transition from children's to adult's services and for employment.
- 1.12 Boards should submit the updated Learning Disabilities Joint Investment Plan to the Department of Health by January 31st 2002.
- 1.13 Directors' of Social Services should ensure good links between children's and adult's services as part of their responsibilities for quality under the Social Care Quality Framework.
- 1.14 Learning Disability Partnership Boards must:
 - Map the need for and develop advocacy within their locality using the LDDF or mainstream monies as appropriate
 - Foster development of Support Services and schemes so that more people with learning disabilities benefit from Direct payments
 - Agree policies and procedures for handling decisions where people with learning disabilities are at risk of exclusion from any part of public service provision.
 - Review by Autumn 2002 the role and function of community learning disability teams
 - Satisfy itself that arrangements are in place to enable people currently living in NHS long – stay hospitals to move to more appropriate community accommodation by April 2004.
- 1.15 Learning Disability Partnership Boards also need to produce the following:
 - A framework for introducing a person centred approach to planning services by spring 2002

- An inter agency quality assurance framework by spring 2002
- A workforce and training plan by summer 2002
- A local housing strategy for people with learning disabilities and related plans for commissioning care with support packages by winter 2002/2003 and within the context of a Housing Investment Plan
- A programme for modernising day services by winter 2002/2003
- A local employment strategy and set local targets for increasing the employment rate of people with learning disabilities by winter 2002/2003.

Explicit in the Guidance is the requirement for all these strategies and development to reflect the range of needs and cultural diversity of the communities being serviced.

Housing

1.16 The White Paper places a responsibility on local councils to ensure that all housing options are considered when they are exploring the future housing care and support needs of people with learning disabilities. Options should include from small – scale ordinary housing, supported living and village and intentional communities. None of this can by ruled out by local policy and all should be available on the basis of assessed need.

Historical and Current Issues

- 1.17 Since 1980 the national trend has been to see the closure of old long stay hospitals which were the inheritance of Victorian/Edwardian policy of segregating people with learning disabilities away from communities into large self sustaining institutions.
- 1.18 It is widely acknowledged that this programme failed to deliver an appropriate build up of services in the community to replace those that the hospitals provided. Many Local Authorities have struggled to cope with increasing demand without the corresponding increases in resources and most existing Local Authorities services have failed to develop to meet changing need.
- 1.19 In Leicester this picture is further influenced by the fact that the number of people with learning disabilities is nearly twice that of the national demographic norm. There are also pressures in the system linked to Local Government Reorganisation and the fact that many of the services inherited form the County were appropriate for a county wide population but less so for a city with the characteristics of Leicester.

- 1.20 It is important to ensure that all service provision is culturally appropriate to the needs of Leicester's Citizens with learning Disabilities and their carers and friends (much of the in-house provision was commissioned and designed between twenty and thirty years ago when the demographics of the city were very different). This also includes a Learning Disabilities workforce which reflects the cultural diversity of Leicester.
- 1.21 The White Paper now provides the policy and objectives to overcome these service deficits and the performance targets and prescribed processes will be largely welcomed by professional carers and not least by learning disabled people themselves who will expect the key principles to be delivered.
- 1.22 The challenge is to find sufficient resources to fully deliver the strategy. There will need to be a major re-utilisation of current resources locked up in traditional service models to provide for much of the programme. In itself this will probably not be enough on a national or local level as the long history of substantial disinvestments as the old long stay hospitals closed have not be properly covered.
- 1.23 On a local level the closure of the old long stay Gorse Hill Hospital is proceeding steadily and it will be important to maximise the capital and revenue from this programme to support Leicester's commitment to implementing the White Paper.

FINANCIAL, LEGAL AND OTHER IMPLICATIONS

1. Financial Implications

There will be additional funding for preparing new service development for national funds though these funds are likely to be limited and certainly will not be enough in themselves. The best use of Local Authority and NHS resources will be the key to success.

2. Legal Implications

Four key principles are set out in the White Paper and these are rights, independence, choice and inclusion. These rights are grounded in the legislation that confers rights on all citizens including people with learning disabilities. Growing expectations and increased advocacy will challenge all public service to deliver better services for people with learning disabilities. This will have an impact on policy in social services, housing (housing allocations, housing waiting lists, supporting people), education (life long learning, educational provision for disabled children) and arts and leisure (access to public leisure services) and significantly the NHS (individual health plans, carers medicals, targets for health improvement – people with learning disabilities have three

times the national average for cancer, diabetes, coronorary heart disease, tooth decay).

3. Other Implications

OTHER IMPLICATIONS	YES/NO	Paragraph References Within Supporting information
Equal Opportunities	YES	1.2, 1.3, 1.4, 1.5, 1.6, 1.12, 1.13, 1.14
Policy	YES	All paragraphs
Sustainable and Environmental	YES	1.1, 1.2, 1.6, 1.13
Crime and Disorder	YES	1.8
Human Rights Act	YES	

4. Background Papers – Local Government Act 1972

Valuing People: A New Strategy For Learning Disability For The 21st Century (March 2001)

LAC (2001)23 – Valuing People: a new strategy for the 21st Century: Implementation (31st August 2001)

Joint Investment Plans: Learning Disabilities and Welfare To Work for Disabled People – Social Services and Personal Health Scrutiny Committee – 9th May 2001, Cabinet 21st May 2001

Joint Strategy for Learning Disabilities – Social Services Committee March 1999

5. Consultations

Leicester's Learning Disabilities Services Planning Team

6. Report Author

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