

LEARNING DISABILITY
A JOINT STRATEGY FOR
BROMLEY

2020 – 2025

DRAFT

FOREWORD

On behalf of the London Borough of Bromley and the Bromley Clinical Commissioning Group we are delighted to present this Joint Learning Disabilities Strategy for the Borough, which sets out our local priorities for people with learning disabilities aged 14 and above.

This Strategy has been informed by the views of individuals with learning disabilities, their families and friends, national guidance, policy and legislation, local priorities, providers as well as senior Council and Clinical Commissioning Group officers.

Our vision in this Strategy is to enable people with learning disabilities to live their lives as they want, as part of their community, with the right support at the right time and from the right people.

Over the next five years, we will develop services with other public sector agencies and our local communities. We will drive forward a new approach to improving the wellbeing of our residents through a collective agenda of promoting early intervention, independence, flexibility and choice, supporting local community based solutions that will supplement and extend our core offer.

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INTRODUCTION

This Joint Strategy is for people with a learning disability aged 14 and above, their parents, carers, health professionals, commissioners and the voluntary sector. It has been informed by the views of individuals with learning disabilities, their families and friends, senior Council and Clinical Commissioning Group (CCG) officers and has taken: national guidance, policy, legislation, local priorities and the views of providers into account.

This Joint Strategy covers support for individuals who have learning disabilities. It is designed to reflect the increasing complexity of need and demand with reduced resources in the public sector. The Strategy embraces the principles of personalisation, strengths based practice and progression.

Through the development of this Strategy, Bromley Council and the CCG have built upon their relationships with people who use services and their providers. These conversations have produced a unique opportunity to bring all stakeholders together in identifying strategic priorities and who are committed to driving these forward.

Co-production has been used to identify key priorities when developing and improving support services in the community and through influencing commissioning intentions.

In line with the Transforming Bromley Programme, the Council and CCG are committed to delivering a strengths-based model of support recognising and building on strengths and social capital and delivering social value whilst placing our residents in as much control of their own support arrangements as possible. We are committed to developing new ways of working and innovative approaches to transform the current model of social care. We will work with a wide range of partners who can help people to benefit from services or resources that can improve their health and wellbeing.

This Strategy defines Learning Disability as used in the Government's white paper 'Valuing People'.

Learning disability includes the presence of:

- A significantly reduced ability to understand new or complex information, to learn new skills, with;
- A reduced ability to cope independently;
- And which started before adulthood, with a lasting effect on development.

LOCAL CONTEXT

Understanding Learning Disabilities in Bromley

The Key statistics in Bromley are:

- 330,000 people estimated to live in Bromley
- Nationally around **2.5%** of children, **2.4%** of working age adults (18-64), and **2.1%** of people over 65 have a learning disability
- Bromley's statistics mirror the national picture described above
- **Over 1300** adults living in Bromley are estimated to have a moderate or severe learning disability
- **730** adults are known to statutory services
- **Around 130 children** in Bromley have profound and multiple learning disabilities
- **670** primary and **350** secondary school children are estimated to have a moderate, severe or profound and multiple learning difficulty in Bromley
- In Bromley 3.3% of adults with learning disabilities are reported to be in some form of work. Bromley has an employment gap of 74% (between the working age population and those with learning disabilities), compared to 66.7% in London and 69% nationally

Population overview – percentage increase between 2020 and 2025

% increase 2020 to 2025	England	Bromley
Total population	2.7%	5.0%
18-64 population	0.6%	3.8%
65+ population (65+)	9.7%	7.5%
Learning disability (18-64 yr)	0.6%	3.9%
Moderate/Severe Learning Disability (18-64 yr)	0.9%	4.3%
Autistic Spectrum Disorder (18-64)	0.8%	3.6%
Learning disability (65+)	9.5%	7.3%
Moderate/Severe Learning Disability (65+)	7.8%	6.1%
Autistic Spectrum Disorder (65+)	10.4%	8.8%

People with learning disabilities who have complex health conditions and associated multiple disabilities are living longer. The requirement for specialist services such as SEND teaching, special schools, specialist health services, care and support and preventative services will increase. Therefore, consideration is needed as to how we organise and operate all of our services to ensure that we promote the needs of individuals with learning disabilities.

The following are considerations for areas of health and wellbeing that have a higher incidence amongst people with learning disabilities and impact across all service areas:

- Mental Health
- Dementia
- Epilepsy
- Diabetes
- Autism
- Challenging behaviour
- Communication issues
- Health checks

Value for money

Increased financial pressures make it even more important to have a clear, joint strategy and to work collaboratively to make best use of resources and harness innovation. It is evidenced that working inclusively with people, families and communities, to create individual and community led solutions, enhances people's quality of life, meets statutory duties and results in improved value for money.

This Strategy proposes the way that Bromley can deliver change and better outcomes for individuals whilst recognising the need for efficiency. Supporting Lives, Connecting Communities, Health and Social Care Integration and Co-production are key mechanisms and are integral to implementation.

Having choice and control, whilst core to leading good ordinary lives, does not mean being entitled to increased funding. It means being supported to:

- get the best from the money you are eligible for
- receive services you are entitled to
- value and maximise the non-paid natural support from family, friends and community

The number of people with a learning disability in Bromley is increasing and leads to increasing demand for services. The predicted level of increase exceeds national trends.

The premise in this Strategy is that by working with people who use services including; family, carers, providers and community groups, there will be effective partnership working with health and social care commissioners. This will create innovative solutions, drive improved outcomes and result in better value for money.

OUR VISION

“To enable people with Learning Disabilities to live the lives they want, as part of their community, with the right support, at the right time and from the right people”

We will establish a Learning Disability Strategic Board to represent service users and oversee the implementation of this Strategy. This will ensure people are heard, their views valued and that they influence future local provision.

Residents will be supported to develop their independence and enabled to lead active, fulfilling and successful lives. As a Borough, we strive to be flexible and responsive to the needs of our residents, embracing innovative ways of working with our partners, staff and our communities to improve services to those who access them within our available resources.

Over the next five years, we will develop services with other public sector agencies and our local communities. We will drive forward a new approach to improving the wellbeing of our residents through a collective agenda of promoting early intervention, independence, flexibility and choice, supporting local community based solutions to supplement and extend our core offer.

Where possible and desirable, we will seek to jointly commission services or integrate service delivery with our health and social care partners.

DEVELOPING THIS STRATEGY – OUR APPROACH

Consultation on the strategy began in April 2019. We invited Individuals of all ages, their parents, carers, siblings and supporters to discuss their experiences of living in Bromley and what this strategy should be about.

This took place through face to face meetings, online surveys and engagement with providers and other stakeholders.

We have spoken to:

- 189 individuals with learning disabilities
- 89 parents and carers
- 62 unique providers of services

We also had 100 responses to our online survey.

Our consultation targeted

- Existing groups run by the voluntary sector and paid providers
- Schools
- Hard to reach individuals through a survey published online
- Council and CCG staff
- Voluntary sector and private providers

This strategy has also been informed by national work carried out by central government, local government, voluntary organisations and academic institutions. This provided a significant amount of quantitative and qualitative information on what is important to individuals and which informed the key priorities of this strategy:

1. Autonomy, Voice and Control
2. Relationships and connections
3. Education, training and employment
4. Being active and well
5. Right support at the right time

PRIORITY 1 – AUTONOMY, VOICE AND CONTROL

Putting individuals and their needs at the centre of their care and giving them a voice and control over reaching the outcomes that help them achieve well-being through having a sense of identity, value and worth.

WHY IS IT IMPORTANT?

- Adults with learning disabilities have, by law, the same rights as anyone else to make their own decisions about their health, finances, accommodation and all other health and social issues that affect them. The only exception is when a professional multi-disciplinary team agree on a specific decision that the individual does not have capacity for, and then the decision is made in the “best interest” of the individual.
- Individuals are able to make unwise decisions which their families, carers and professionals do not agree with as long as they can demonstrate they meet the capacity requirements.
- Adults are presumed to have capacity, supported to make their own decisions, have the right to make unwise decisions and any decisions made on behalf of an adult is done in their “best interest” as well as the least restrictive option.
- Mental Capacity Assessments ensure individuals (1) understand the information given to them, (2) retain the information long enough to make the decision, (3) weigh up the options around the decision, (4) communicate their decision.
- For children, Gillick competence determines a child’s capacity to consent.

THE OUTCOMES PEOPLE SAID MATTERED TO THEM

- Identity
- Choice and control
- No labels
- Inclusion and integration with community
- Carers breaks
- Listened to and supported
- Building resilience
- Support for older carers to plan for the future

WHAT WE AIM TO DO

Key Actions will include:

- Engaging with people earlier during their transition to adulthood
- Ensuring transition is person centred and recognises personal choice
- Working to develop people’s confidence
- Assisting people to develop their strengths and to say what they want and be heard

Via the Learning Disability Strategic Board we will develop a priority working group to refine and develop the action plan(s) for this priority area.

PRIORITY 2 – RELATIONSHIPS AND CONNECTIONS

Recognising the importance of meaningful relationships when working with individuals to develop and meet their support needs.

WHY IS IT IMPORTANT

Difficulties with developing meaningful relations for Individuals include:

1. Lack of accessible social activities
 - Lack of accessible social activities or events for individuals with learning disabilities impacts their ability to make and maintain friendships. Transport to and from events requires accessible transport and support from others which can impact on forming relationships and developing/maintaining social networks
2. Lack of support
 - Individuals with learning disabilities often require support to understand and engage in social events. Support, particularly in the evenings and at weekends is often limited
3. Lack of accessible information
 - Lack of accessible information about local services including social events is often outdated or not publicized resulting in individuals being unable to participate
4. Affordability
 - Individuals may not be able to afford to take part in certain activities or events due to finances. Entrance fees, transport for the individual and their carer may be too expensive
5. Accessibility of facilities
 - Individuals may not be able to use facilities as toilets, step-less entry, wide door openings or accessible equipment may not be working / available or they may be dependent on carers to help them

THE OUTCOMES PEOPLE SAID MATTERED TO THEM

- Friendship
- Socializing
- Availability of transport
- Opportunities to meet new people
- Living close to friends
- Social opportunities for parents and carers
- Peer support for parents and carers
- Preventing Isolation

WHAT WE AIM TO DO

Key actions will include:

- Enabling people to develop and preserve relationships by commissioning services that support this aim
- Creating opportunities that support socialising and the building of new relationships

- Facilitating and connecting people and their carers so that they have greater opportunity to support each other and develop groups who socialise together within the community
- Commissioning services that are not constrained by set times and locations

Via the Learning Disability Strategic Board we will develop a priority working group to refine and develop the action plan for this priority area.

PRIORITY 3 – EDUCATION, TRAINING AND EMPLOYMENT

Support people to learn and gain employment so that we can increase the proportion of individuals who have learning disabilities in paid employment.

WHY IS IT IMPORTANT

People with a learning disability are far less likely to have a job than the general population.

- 6% of adults with a learning disability known to their local authority in England are in paid work, 3.3% in Bromley
- 17% of all adults with a learning disability in England are in paid work
- 47% of people aged 16 to 64 with any type of disability in Great Britain are in paid work
- 74% of people aged 16 to 64 in the general population in England are in paid work

Difficulties with employment include:

- Negative attitudes or low expectations
- Skills and qualifications gaps
- Lack of flexible, personalised employment programmes
- Unfair treatment
- Issues relating to access
- Public perceptions of people with a learning disability

THE OUTCOMES PEOPLE SAID MATTERED TO THEM

- Empowered to be independent
- Ordinary life
- Opportunities to learn and develop new skills
- Challenge
- Paid employment in a fulfilling job

WHAT WE AIM TO DO

Key actions will include:

- Listening to people and ensuring their views influence the development of training and employment opportunities
- Improving links with local employers to create more opportunities for paid work
- Educate employers and providers to reduce negative attitudes and low expectations that hinder progress
- Ensure relevant information is accessible to people with learning disabilities

Via the Learning Disability Strategic Board we will develop a priority working group to refine and develop the action plan for this priority area.

PRIORITY 4 – BEING ACTIVE AND WELL

Supporting people to achieve their own well-being and measuring the success of care and support.

WHY IS IT IMPORTANT

Individuals with learning disabilities have poorer health outcomes than the general population. Most of the inequalities start early in life and have a serious impact on quality of life. *Public Health England* has five determinants of health inequalities:

1. Greater risk of exposure to the social determinants of poorer health such as poverty, poor housing, unemployment, discrimination and isolation
2. Increased risk of health problems associated with specific genetic, biological and environmental causes of learning disabilities
3. Communication difficulties and reduced understanding of health issues
4. Personal health risks and behaviours such as poor diet and lack of exercise
5. Problems with access to healthcare provision.

Health services have an important role to play. The Local Authority and CCG need to do more to ensure services are accessible to individuals with Learning Disabilities. Individuals should be provided with the support they need to ensure good health and well-being. Social Care providers and support staff have an important role to play in ensuring well-being and access to primary health services.

THE OUTCOMES PEOPLE SAID MATTERED TO THEM

- Opportunities to leave the house
- Friendships and a sense of purpose
- Activities to prevent boredom
- Structure
- Transport to and from activities
- The cost of activities

WHAT WE AIM TO DO

Key actions will include:

- Developing an in depth needs assessment for adults with learning disabilities in Bromley
- Working in partnership with individuals and their carers to build resilience, increase activity levels and enhance health
- Commissioning services that promote the individual's wellbeing and sense of worth
- Working with providers to develop flexible services that recognise people's aspirations and strengths

Via the Learning Disability Strategic Board we will develop a priority working group to refine and develop the action plan for this priority area.

PRIORITY 5 – RIGHT SUPPORT AT THE RIGHT TIME

Supporting individuals to identify what is important to them, who supports them to achieve their goals, and how we can build skills in partnership with others. Making sure our services and support are responsive, working in a person centre way.

WHY IS IT IMPORTANT

- Individuals with learning disabilities are likely to use health and social care services throughout their lives. Lack of integration can impact on their quality of care. Best practice tells us that having a joint, integrated Health and Social Care commissioner and services can help to provide a more succinct and person centred approach to service delivery
- As services are under increasing pressure with a projected 10% increase in the next 10 years, it is important that individuals with learning disabilities have a sense of self-worth and a recognised social role
- 49% of Adults are in out of borough placements. Of that, 27% of those individuals are aged 18-45 with a large proportion of those 18-35 being placed out of borough in Residential accommodation
- A deep-dive into young people aged 18-25 identified that 60% of placements for this age group were related to behavioural needs and 30% were related to complex health conditions
- NHS Guidance, Building the Right Support, recommends that individuals are placed in the least restrictive setting

WHAT WE AIM TO DO

Key actions will include:

- Enabling children and young people with SEND to have a clear and transparent pathway as they progress to adulthood
- Ensuring parents and carers have access to the right information at the right time
- Ensuring assessments are strengths based, with the person at the centre of service provision
- Effectively planning for future demand in a co-produced way to ensure services are available and reflective of what people need

Via the Learning Disability Strategic Board we will develop a priority working group to refine and develop the action plan for this priority area.

WHERE DO WE WANT TO BE?

Over the next five years there will be changes in the way health and care services are provided in Bromley. Health and care services will become more integrated, services will become more flexible, they will be personalised and offer people greater choice and control over their lives.

In line with the Transforming Bromley Programme, the council and the CCG are committed to delivering a strengths-based model of support that recognises and builds upon strengths and social capital, whilst delivering social value and places our residents in as much control as possible of their own support arrangements.

We will develop new ways of working and innovative approaches to transform the current model of social care. We will work with a wide range of partners who can help people benefit from services and resources that improve their health and well-being.

Seven principles will underpin all the actions from this strategy:

- Services **co-designed** with the community
- **Enabling approach** – ‘helping people to help themselves’
- Ensuring **independence, choice and control**
- **Early help** and **good quality** intervention
- **Right services** at the right time
- **Effective and efficient** services that deliver great outcomes
- **Integrated commissioning** of health, social care and support services

NEXT STEPS TO ACHIEVING OUR VISION

The London Borough of Bromley and the CCG measures our success through the outcomes framework.

Our senior management teams monitor performance through the Transformation Board, and Policy Development and Scrutiny Committee meeting.

Our national indicators are desegregated down to Learning Disabilities to monitor our progress against other services locally and nationally.

We will develop a Learning Disabilities Strategic Board with representation from providers, service users, carers, commissioners and the voluntary sector to oversee the delivery of this strategy.

- We will develop task and finish groups to deliver an action plan against each of the five key priorities
- We will ensure the principle of co-production will inform the development and implementation of these work streams
- We will produce an annual easy read report on the progress of delivery

SUPPORTING STRATEGIES AND ACTION PLANS

The Learning Disability Strategy does not exist in isolation. It brings together the strategies of all its partners to deliver and support its priorities.

- Building a Better Bromley – 2020
- Children and Young People’s Plan 2018 – 2021
- Bromley CCG Integrated Commissioning Plan 2014 – 2019
- Homelessness Strategy 2018 – 2022
- Housing Strategy
- Ageing Well in Bromley Strategy
- SEND Strategic Vision and Priorities
- Health and Wellbeing Strategy 2019-23
- Mental Health and Wellbeing Strategy 2020-25
- Transforming Bromley Roadmap
- Joint Strategic Health Needs Assessment (JSNA)

GLOSSARY

Acronym	Definition
CCG	Clinical Commissioning Group
D2A	Discharge to Assess
JSNA	Joint Strategic Needs Assessment
SEND	Special educational needs and/or disabilities