



Healthier Communities Select Committee

Report title: Lewisham Learning Disabilities Implementation Plan (Adults and Young People) 2024-2029

Date: 2nd November 2023

Key decision: No

Class: Part 1

Ward(s) affected: All

Contributors: Tom Brown, Executive Director Community Services

Outline and recommendations

This report is to share with the Committee the Lewisham Learning Disabilities Implementation Plan 2024-2029 ('the Plan'). The Plan seeks to collect and collate what is known to be important about the lives of people with a learning disability and their families both from policies and the experiences and preferences of Lewisham citizens.

Using that information, and in partnership with people with a learning disability, their families and key provider stakeholders in the borough, that knowledge and information has been distilled into seven key priorities, each with a number of actions. The focus of the plan is on these actions, which citizens and stakeholders can hold the Council and its partners to account for.

The plan has been subject to a 6-week consultation which has just ended at the point that this paper has been written for dispatch. It is probable that this draft Implementation Plan will be amended in light of comments from that consultation, and the priorities for action more clearly identified.

The Plan proposes the establishment of a formal reporting structure of task focussed delivery groups reporting to a re-established Learning Disabilities Partnership Board. At the core of both of these structures, is a commitment to co-production and co-delivery principles.

Healthier Communities Select Committee is asked to:

- Note the ambitions of the Learning Disability Implementation Plan.
- Agree the seven priority areas as set out in the Plan.
- Comment on the importance and appropriateness of the associated actions,
- Agree the establishment of the Learning Disability Partnership Board and the delivery sub-groups.
- Note that the intention is for the Plan to be a living document with outcomes reported annually to the Lewisham Care Partnership through the LD Partnership Board.

Timeline of engagement and decision-making

June – November 2022 Discussion and engagement at various forums and with various groups including: LD Day Services and Employment Consultation; Young Adults in Transition Consultation; Lewisham Speaking Up; Health and social care officer meetings; Adult Integrated Commissioning Team; Adult Learning Disability & Transitions Team.

January – March 2023 –Initial discussions with health and social care staff, providers and Lewisham Speaking Up about the potential content of the Plan.

July and August 2023 – Re-presentation of the revised Plan to health and social care staff, providers and Lewisham Speaking Up.

13 September - 24 October 2023 - Citizen Space six-week public consultation survey plus targeted events for family carers and people with a learning disability.

1. Summary

- 1.1 The Learning Disability Implementation Plan (the Plan) for Adults and Young People represents one aspect of the Council's Covid-19 Pandemic recovery process. It was developed to reflect the 'current position' of support for, and knowledge about, people with a learning disability and their families in Lewisham. It has sought to bring into one place identified priorities for development and improvements that had already been identified prior to the Covid-19 pandemic across the health, social care and education systems. In particular, there had been a significant amount of work completed relating to the Transition of young people into adulthood. It also reviewed the 'must do's' of national policy.
- 1.2 The Plan has been written to have a focus on measurable action rather than strategy. This first iteration was drafted by social care and health officers, by service provider partners, and by people with a learning disability supported by Lewisham Speaking Up using both historical and recent information and conversations.
- 1.3 The Plan has been subject to a six-week consultation on 'Citizen Space'. There were additional targeted sessions for people with a learning disability and for family carers. The outcome of that consultation is not yet available. Some comments made at engagement sessions have been included in the report and early analysis will be available for the Healthier Communities Select Committee meeting.
- 1.4 The Plan identifies seven priority areas for attention and development each with a series of actions. Discussion with key stakeholders through the consultation period have also highlighted that to be a plan, these actions need to be more concrete with deadlines, accountable officers or departments, and outputs attached.
- 1.5 The report also sets out a proposed recommended governance structure to ensure the delivery of those actions and the development of new actions and action plans, over the five years proposed for the delivery of the plan. This is to ensure ownership by the Council, who leading with its partners will be accountable for the delivery of improvements that meet the learning disability 'agenda'. This governance structure includes the establishment of a Learning Disability Partnership Board and an annual reporting structure to the Lewisham Care Partnership.

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2. Recommendations

Healthier Communities Select Committee is asked to:

2.1 Note the ambitions of the Learning Disability Implementation Plan

2.2 Agree the seven priority areas as set out in the Plan:

- Priority 1: A Good Place to Live
- Priority 2: Health & Wellbeing
- Priority 3: A Life with Opportunities
- Priority 4: Support for Family Carers
- Priority 5: Managing Risks & Staying Safe
- Priority 6: A Sustainable Workforce
- Priority 7: Developing the Local Market

2.3 Comment on the importance and appropriateness of the associated actions and advise if any specific actions should be included in the five-year work programme.

2.4 Support the establishment of the Learning Disability Partnership Board and its associated the delivery sub groups

2.5 Note that the intention is for the Plan to be a living document with outcomes reported annually to the Lewisham Care Partnership through the Learning Disability Partnership Board.

3. Policy Context

3.1 Lewisham Council is the lead agency for commissioning services for adults with a learning disability.

3.2 The Care Act (2014) requires local authorities to ensure the provisions or arrangements of services, facilities, or resources to help prevent, delay, or reduce the development of needs for care and support improving people's independence and wellbeing. The Care Act also sets out the law around market development in adult social care. The Act makes Local Authorities responsible for local market shaping to encourage quality, choice and sufficiency of provision.

3.3 There are a significant number of historic policies and strategies that have influenced and shaped the lives of people with a learning disability. These are set out as an appendix to the Learning Disability Implementation Plan. They all primarily focus on increasing choice and control for people and their families over how their lives are lived, the delivery of least restrictive care and support, promoting personalised care and maximising independence through enabling the building of self-reliance and building individual asset bases.

3.4 Service Delivery and market shaping also need to reflect the principles set out in the Learning Disability and Autism Programme (2019) and "Building the right support" (2015). These principles are:

- 1) People should be supported to have a good and meaningful everyday life.
- 2) Care and support should be person-centred, planned, proactive and coordinated.
- 3) People should have choice and control over how their health and care needs

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are met.

- 4) People should be supported to live in the community.
- 5) People should have a choice about where and with whom they live.
- 6) People should get good care and support from mainstream NHS services.
- 7) People should be able to access specialist health and social care support in the community.
- 8) People should be able to get support to stay out of trouble.
- 9) When health needs cannot be met in the community people should be able to access high quality assessment and treatment in a hospital setting.

3.5 The Plan links with the following priorities set out in Council's Corporate Strategy (2022 – 2026):

- Cleaner and Greener through the promotion of more active and independent travel and working to support climate emergency initiatives.
- Quality Housing through the development of new housing or repurposing existing properties, to reflect the changing needs of people with a learning disability.
- Safer Communities by giving people the tools they need to be safe but active in their local communities, supporting anti hate crime initiatives and strengthening approaches to safeguarding.
- Health and wellbeing, collaborating with other organisations to deliver the places, activities and programmes our residents need to feel empowered to live a physically active lifestyle, to improve the take up of annual health checks, to improve carer support, and to challenge inequalities that lead to poor health and wellbeing outcomes.

3.6 The Plan also reflects other Council aspirations including:

- Co-production and the co-design of services with those affected by them and ensure strong consultation processes that reach out to people whose voices are seldom heard.
- A strong local economy through offering volunteering and work placement opportunities for people with a learning disability, shaping services and education to support 'employability' and promoting the rights, training and competency development of staff, and improving staff terms and conditions including salaries.

4 Background

4.1. Lewisham was in the process of developing and implementing a number of initiatives relating to improving the lives of people with a learning disability just before the Covid-19 pandemic hit. A number of reports relating to Transition, Day Opportunities Modernisation and Lewisham Speaking Up's report on Council services had been presented at Healthier Communities Select Committee.

4.2 As was true for many people, the world of people with a learning disability and their families changed because of the Pandemic. It became smaller. The formal and informal support that had been available to people living at home with their families shrank as visits to family homes by support services stopped and families themselves became wary of letting people into their homes. This is in addition to the government 'stay at home' guidance which restricted socialisation and isolated people from their natural support structures.

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- 4.3 Digital supports such as Skype and Zoom were not easily used by this population to maintain relationships. This was highlighted in the Task and Finish Group report to Mayor and Cabinet at the 9th of March 2022 meeting.
- 4.4 Access to primary care services was restricted. It is hard to remember, and indeed believe in retrospect, that people with a learning disability were not considered to be clinically at risk from the Covid-19 virus despite the higher probability of health-related issues.
- 4.5 Where people were in 24 hour commissioned services, given the Council's focus on support for the pandemic, NHSE reporting, PPE and vaccinations, alongside the fact that officers were not visiting service for over 2 years during the Pandemic period, the working knowledge of the quality of support in those services suffered.
- 4.6 As the borough began to recover post Pandemic, the memory of the work in progress in 2019/20 had significantly faded and had lost momentum. This was as a result of both changes in the health and social care staffing infrastructure, and the recovery pressures on the wider system generally.
- 4.7 Discussions with key organisations in the borough concluded that it would not be helpful to 'start from scratch' asking people what they want. That work had in some significant part already been done pre-covid. It was felt that acting on what was already known was the best way to support recovery for this client group.
- 4.8 Supporting the health and wellbeing of people with a learning disability and their family carers is a vast agenda. From health to social care, from employment to housing, from leisure to staff training. It is one of the most vulnerable and deprived groups of citizens for whom the Council, Education and the NHS have responsibility, and the group on whose behalf significant levels of health and social care money is spent.
- 4.9 The system is prone to define people by their 'diagnosis' as much as their needs as human beings. When partners reviewed the work that had been happening in Lewisham, it was clear that it was looking to address the width and scope of people's needs, those who were eligible for funded services and those whose needs were dependent on the accessibility of universal services. Partners, therefore, took the view that the recovery needed to show the width and scope of that agenda.
- 4.10 The Plan (see Section 5 below) is conceptualised as a vehicle to bring together all the outstanding and proposed new work into a single place. This will help stop work streams operating in isolation from each other. It makes the work that partners commit to, to support people with a learning disability and their families more visible in the borough. The governance structure proposed would evidence a strategic commitment to supporting progress and delivery.
- 4.11 It was developed in discussion with health and social care staff, provider representatives and Lewisham Speaking Up. It captured what those groups considered to be key areas for action, some of which were identified pre Covid-19 and others identified through these more recent discussions. A six-week consultation on the draft Plan was then undertaken on Citizen Space (see Section 6 below).

5. The Learning Disability Implementation Plan

- 5.1 People with a learning disability and their families have told the Council and its partners many times what they want and need to improve their lives. People are tired of being asked what they want and seeing no outcomes or improvements and do not want to be asked again. They want to see action.

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- 5.2 The Plan has been developed in line with Care Act Principles, the Council's direction of travel for adult social care, NHS 'must do's' and best practice and other policy guidance. The Plan is underpinned by the belief that, with the right type of support and the right opportunities, people with a learning disability can access the same opportunities and rights as any other person living in Lewisham. That they can be full members of their communities, increase their independence and improve their wellbeing. In short, they can be supported to live their best lives.
- 5.3 The following sections summarise what has been written in the plan and used for the consultation (Appendix 1). Information from previous discussions and events have been used to build the Plan. This was distilled into seven key priority areas for action:
- Priority 1: A Good Place to Live - People have told us that choosing their home, who they live with and feeling secure in that home is key to improving their wellbeing.
 - Priority 2: Health & Wellbeing – Recognising and working to reduce health inequalities, improve people's health outcomes and enable them to live longer, healthier lives.
 - Priority 3: A Life with Opportunities – Create opportunities for people to live fuller lives by enabling them to take risks, try new things, develop new skills, form relationships, take part in the wider community, access education and training, get and keep a job and feel confident using new technology.
 - Priority 4: Support for Family Carers – Listen to families and unpaid carers and ensure that they receive the support they need to feel valued and supported in their caring role.
 - Priority 5: Managing Risks & Staying Safe - Provide young people and adults with a learning disability with the additional support and guidance they need to understand the potential risks and their responsibilities when living a more independent life.
 - Priority 6: A Sustainable Workforce - Creating a sustainable local workforce by working together with people with a learning disability, their families and support providers. Planning ahead to ensure that Lewisham can provide people with the high-quality support they need and make best use of the available resources.
 - Priority 7: Developing the Local market – Recognise the diversity of our local population the expertise of people with lived experience by placing co-production at the core of all of our new market development approaches and initiatives.
- 5.4 Each priority area is set out the same way, in four sections: the current picture; what the plan is hoping to achieve; the commitments to deliver the plan; and a set of actions. The final actions may change following the consultation based on feedback. It is envisaged that the Plan will be a living document representing both the aspirations and needs of people with lived experience, and clarity from partners about what is deliverable in the current particularly financial climate. In line with Adult Social Care practice, actions will be written in the final draft of the plan as 'we will' statements.
- 5.5 The Plan sets out a proposed governance structure. It proposes that five groups are established to manage the delivery of the key priorities and their associated actions. Priority 4 Support for Family Carers and Priority 5 Managing Risks and Staying Safe are envisaged as being the responsibility of all of the groups, as they are cross-cutting issues. Priority 4 will also be embedded in the roll out of the Carers Strategy and supported by IMAGO, the Lewisham carers support organisation. Each of the groups will develop task-focused SMART workplans that show clear outcomes and timescales, along with identifying the responsible person/ team to deliver. Those groups will meet quarterly.

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- 5.6 It is proposed that a Learning Disability Partnership Board is re-established. This will receive progress reports from the delivery groups, acknowledging achievements and advising of corrective action to be taken on underachievement. Delivery groups will also send new recommended actions and plans to the Partnership Board for agreement.
- 5.7 To ensure public visibility of progress, or lack of progress, in the delivery of the Plan it is proposed that the Partnership Board send an annual report to Lewisham Care Partners. This will also strengthen 'whole system ownership' of the Plan, as the lives of people with a learning disability and their families are impacted on both by specialist and universal service offers.
- 5.8 Successful development and implementation of the Plan requires that priorities, actions and activities are co-designed and co-produced. It is fundamental that people with a learning disability and family carers are full members and owners of both the delivery groups and the Learning Disability Partnership Board. Though not explicit in the Plan, it is envisaged that the Board will be co-chaired by a person with a Learning Disability.
- 5.9 Real co-production and the meaningful inclusion of people with a learning disability and their carers is not just about presence at a meeting. There needs to be time and space for pre-meetings and debriefing. For people with a learning disability this needs to be facilitated and supported. The previous Lewisham Partnership Board paid people with a learning disability who attended the Partnership Board as a small but important sign of parity with officers. The Learning Disability Health group currently pay people who attend for the same reason. The Plan rates Lewisham as being at the level of 'Engagement' on the Ladder of Co-Production. The aspirations set out in this Plan would put Lewisham at the level of real co-production.

6 Consultation and Engagement

- 6.1 A six-week Consultation ran on Citizen Space from the 13th of September 2023 to the 16th of October 2023. It was widely publicised on social media and other communication systems. A wide range of organisations working with people with a learning disability were sent the Plan and the link to the Consultation. Commissioned provider organisations with direct contact with the families of people with a learning disability were asked to distribute letters to families advising of the consultation.
- 6.2 There were three sessions targeted at family carers organised on the 2nd and 10th of October with a third session to run slightly outside of the consultation period on the 26th of October 2023.
- 6.3 Lewisham Speaking Up were also engaged to run independently facilitated sessions for people with a Learning Disability. They have planned six, a mixture of remote and face to face.
- 6.4 The analysis of the Citizen Space consultation is not available at the time of writing. However, regarding the carers' sessions, none attended the 2nd of October session, and 3 carers attended the 10th of October session.
- 6.5 It is expected that a preliminary analysis will be available for presentation at the 2nd of November meeting. However, some informal feedback from the sessions that have taken place, and some further discussions with partners include:
- There are some important areas missing, particularly consideration of quality and value for money.

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- It needs to be written so that there are timescales and people responsible, and more importantly associated costs.
- The Council needs to raise more awareness among staff and also the general public, if people are to be full citizens in their communities as they often feel unwelcome in their community.
- The Council needs to do more to deliver what it has already said it would do e.g., employment for young people who won't be eligible for funded services.
- Social events for carers would help inclusivity as people do not have a lot of money and in this cost-of-living crisis, would help people come together more equally.
- Information days for families to find out about what is available in the borough would help people make decisions about their future and the future of their loved ones.

7 Equalities Implications

- 7.1 There are 1,674 patients, aged 14 years and over with a learning disability registered with a Lewisham GP practice. Population Health data suggest that this is significantly lower than would be expected.
- 7.2 There are 806 adults aged 18+ in receipt of funded care and support, 71 of whom are older adults aged 65+. One hundred and seventy people (170) are people placed in services out of borough, mainly in registered residential care.
- 7.3 Approximately one third (266) of people in receipt of funded care are aged between 18 and 25.
- 7.4 There is a wide spread of ethnicity with an almost equal balance of number between White British (365) and Black British (314) with an almost equal number of people from the Caribbean (139) and Africa (135).
- 7.5 The majority of people in receipt of funded services are male (509) with women numbering 296.
- 7.6 It has not been possible to establish religious belief and observance for 358 people (almost half) in funded care. However, the highest belief system is religion relating to Christianity (348) with the next highest reported being Islam (29).
- 7.7 The priority areas and actions in the Plan will have a specific impact on people with a disability and particularly learning disability. It will need to consider in each priority area the growing younger population and the shift in ethnicity towards more African and Caribbean people in receipt of services, particularly in the younger population.
- 7.8 The Council's vision and strategy for adult social care in Lewisham is a focus on equalities and diversity and ensuring that the voices of all our service users are heard. The Plan highlights that there are still areas where those voices continue to not be heard. Identifying hidden carer groups, particularly older carers and independent support to the voices of people with a leaning disability, is key to successful co-production.

8 Financial implications

- 8.1 Local Authorities, both children and adults, the NHS and Special Educational Needs service providers are facing increasing financial challenges in their support to children

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and young people with a learning disability. How those challenges are approached and managed both now and, in the future, will affect what support is delivered and how it is delivered. This is a national cost pressure.

- 8.2 Lewisham Council spends approximately £32 million a year on social care services for adults with a learning disability over the age of 18. The majority of this spend is on 24 hour residential and supported living services for people who have left home (£30million), with the balance (£2 million) being spent on services to support people who are living at home with their family (e.g., personal care, day services and respite). This does not include grant costs for Lewisham Speaking Up or Lewisham Mencap and excludes the costs of Lewisham Passenger Services.
- 8.3 The NHS spends approximately £12 million on services for adults with a learning disability, split between community residential and supported living services, with a small number of high-cost packages of care at home funded through Continuing Health Care. A further approximate £6 million, is spent on specialist learning disability clinical teams and learning disability specific psychiatric hospital beds.
- 8.4 The report sets out recommendations and actions for the prioritisation of services for people with a learning disability and their families. Most actions are likely to be costs that would be incurred as 'Business as Usual' to the Council (and to partner agencies)
- 8.5 Some of the proposals reference the development of new housing and support services. Some of these will be achieved through the reshaping of existing housing and support offers and could be funded through 'invest to save' bids against revenue costs and/or the Disabled Facilities Grant. Others will require a full capital business case and close partnership working between Adult Social Care and the Council's Housing Division. There is also potential for attracting NHS Capital to these schemes.
- 8.6 There are opportunities for the Council to approach providers willing to invest capital in new build/significant refurbishment of buildings in the borough, funded by return on investment through weekly fees. There is no specific pathway for this kind of development, and they will be considered on a case-by-case basis.
- 8.7 The report highlights the importance of Co-Production. There will be costs associated with this: the report particularly highlights costs associated with the employment of people with a learning disability to participate in meetings, supporter costs to facilitate engagement in meetings plus some travel and expenses for family carers. No specific budget has been identified for this and so represents a cost pressure.

9 Legal implications

- 9.1 There are no specific legal implications arising from this report.

10 Climate change and environmental implications

- 10.1 The Council has made a commitment to making the borough carbon neutral by 2030.
- 10.2 The recommendations in this report will not have any negative impact on the rate of energy consumption or increase of carbon admissions.
- 10.3 However, there are many opportunities for the different partners to take steps to address climate and environmental variables. All new contracts will include environmental initiatives. All new and refurbished buildings commissioned as a result of

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the Plan, will include environmentally friendly measures and there will be discussion with existing partners to address the energy efficiency of their buildings.

- 10.4 The delivery groups and The Partnership Board steering the delivery of the Plan, will also identify opportunities for climate change initiatives.
- 10.5 Recycling will be proactively promoted with all partners, particularly those managing supported housing and residential services. This will be monitored as part of contract compliance and/or through quality assurance visits.

11 Crime and disorder implications

- 11.1 There are no specific crime and disorder implications arising from this report.
- 11.2 However, the actions that relate to Priority 5 “Support to Manage Risks & Stay Safe” will support people with a learning disability who are both at risk of hate crime and people who are at risk of offending.

12 Health and wellbeing implications

- 12.1 People with a learning disability are more likely to experience long term health problems and have poorer health and wellbeing outcomes. On average they die 20 years sooner than members of the non-learning-disabled population.
- 12.2 People with a learning disability have a reduced ability to understand new or complex information, learn new skills and to safely manage their daily lives and social interactions. The type and level of support people need varies from person to person and can depend on factors such as their physical and mental wellbeing, their familial support networks and the skills they have been supported to learn.
- 12.3 People with a learning disability frequently experience discrimination and isolation because of their disability. They often find it difficult to talk about these experiences due to communication challenges and because systems and processes are not accessible and do not recognise and support their communication needs.
- 12.4 People with a learning disability consistently report a lower quality of life than the general population.
- 12.5 Health and wellbeing implications are specifically addressed in Priority 2 “Improving Health & Wellbeing” particularly in regard to improving the take up of Annual Health Checks and the quality of Health Action Plans and hospital and communication passports. However, health and wellbeing implications for the lives of people with a learning disability cut across and will be supported by actions in all of the priorities such as ‘A Good Place to Live’, ‘Workforce Competence’, and ‘A Life with Opportunities’. These priorities will deliver ‘softer’ outcomes relating to the learning of new skills and the making of new friends, that will support real and sustainable improvements that have a direct and positive impact on health and wellbeing.

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14. Appendices

Appendix 1 - The Lewisham Learning Disability Implementation Plan

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