

**Mayor and Cabinet**

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

**Date: 6<sup>th</sup> December 2023**

**Key decision: Yes**

**Class: Part 1**

**Ward(s) affected: All**

**Contributors: Executive Director, Community Services**

**Outline and recommendations**

The Lewisham Learning Disabilities Implementation Plan 2024-2029 ('the Plan') sets out a range of actions and commitments that the Council is seeking to deliver using its own resources and, in tandem with key partners, resources available across the public sector. The actions are based on existing national policies, procedures and best practice guidance each of which seeks to improve the lives of people with a learning disability and also their families.

The original Plan was developed following many discussions and events, some of them prior to the Covid19 Pandemic. There has since been a 6-week consultation on Citizen Space and some direct engagement sessions with people with a learning disability and their families. Feedback from the engagement sessions has further shaped the Plan.

The Plan proposes the establishment of a formal reporting structure of task focussed delivery groups reporting to a Learning Disabilities Partnership Board. At the core of these structures is a commitment to coproduction and codelivery principles between the Council and its partners.

The report recommends that Mayor and Cabinet:

- Note the outcome of the consultation regarding the Learning Disability Implementation Plan.
- Agree the seven priority areas as set out in the plan and their associated actions
- Agree the establishment of the Learning Disability Partnership Board and the five delivery sub groups
- Agree that the delivery of the Plan and its associated actions is reported annually by the Learning Disability Partnership Board to the Lewisham Care Partnership
- Agree the request of the Healthier Communities Select Committee that the delivery of the Plan is also reported to that Committee.
- Note that Adult Social Care will be responsible for identifying a budget to support the costs of the coproduction and codelivery.

## 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.

**02 November 2023** - Healthier Communities Select Committee

### 1. Summary

- 1.1 The Learning Disability Implementation Plan ('the Plan') 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 aims to bring into one place the identified priorities for development and improvement programmes that have already begun across the health, social care and education systems, with a focus on Transition and what is required by national policy. This review process highlighted seven priority areas for attention and development and identified a series of actions for delivery under each of those key areas.
- 1.2 The Plan proposes a governance structure that is designed to deliver the immediate actions identified in work to date and make proposals for longer term actions and resource allocation over the five years of the Plan. This structure includes the re-establishment of a Learning Disability Partnership Board, the establishment of five delivery subgroups, and an annual reporting structure ratified by the Lewisham Care Partnership.
- 1.3 The Plan was subject to a six-week consultation on 'Citizen Space'. There were additional sessions arranged for people with a learning disability led by Lewisham Speaking Up ("LSU"), and for family carers led by Adult Social Care. The outcomes of that consultation are summarised in this report.
- 1.4 The Plan was also considered at the Healthier Communities Select Committee on the second of November 2023. Comments from the Committee are summarised in this report.
- 1.5 As a result of feedback from the formal consultation and from the other discussions referenced above, the Plan that was used for the consultation has been reshaped to have an improved focus on measurable action and accountability.
- 1.6 The Plan intentionally does not seek to replicate the work of other strategies or initiatives already presented to Mayor and Cabinet such as the Autism Strategy, the Dementia Strategy, the Carer's Strategy or the Transition Plan. The work plans related to those strategies will address the needs of the adults with a learning disability and

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their families as appropriate.

## **2. Recommendations**

Mayor and Cabinet are recommended to:

- 2.1 Note the outcome of the consultation regarding the Learning Disability Implementation Plan
- 2.2 Agree the seven priority areas set out in the plan and their associated actions.
- 2.3 Agree the establishment of the Learning Disability Partnership Board and the five delivery subgroups.
- 2.4 Agree that the delivery of the Plan and its associated actions is reported annually by the Learning Disability Partnership Board to the Lewisham Care Partnership
- 2.5 Agree the request of the Healthier Communities Select Committee that the delivery of the Plan is also reported annually to that Committee.
- 2.6 Note that Adult Social Care will be responsible for identifying a budget to support the costs of the coproduction and codelivery.

## **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 provision of services for those who are assessed as needing care and support. It also makes local authorities responsible for taking steps that it considers will contribute to preventing, delaying, or reducing the care and support needs for adults and carers. Further the Care Act 2014 also sets out local authorities' responsibilities regarding market development in adult social care services.
- 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 appendices to the Learning Disability Implementation Plan. They all primarily focus on improving the lives of people and their families by increasing the choice and control people have over how their lives are lived. This is achieved by working with people to design the least restrictive care and support options and by promoting personalised care which maximises independence and enables self-reliance.
- 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 are met
  - 4) People should be supported to live in the community

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- 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 a strengthened approach 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 It also reflects other Council aspirations including:

- Co-Production and the codesign of services with those using them and ensuring 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', 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 initiatives relating to improving the lives of people with a learning disability immediately prior to the Covid-19 pandemic, particularly through the Transition workstream. Reports relating to this such as Transition, Day Opportunities Modernisation and LSU's report on Council services have been presented at Council Committees.

4.2 Like many, the world of people with a learning disability and their families changed on the 23<sup>rd</sup> of March 2020. 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. That was in addition to the government 'stay at home' guidance which restricted socialisation and isolated people from their natural support structures. Digital supports such as Skype and Zoom were not easily used by this population to maintain relationships and prevent isolation.

4.3 Access to primary care services was also restricted. People with a learning disability were not considered to be clinically at risk from the Covid-19 virus, and prioritised for vaccination, despite the higher probability of health-related issues, and particularly

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respiratory related illnesses.

- 4.4 Providers delivering 24 hour commissioned services were similarly hard to reach during the period, and there were no officer or service visits during this period.
- 4.5 The Council's attention was focussed on support for the pandemic such as foodbanks, NHSE reporting, PPE sourcing and distribution, and supporting vaccinations for the wider population. As a result, both the Council's and the NHS's working knowledge of people and their needs deteriorated as they became literally more hidden from view.
- 4.6 As the borough began to recover post pandemic, the memory of the development work begun in 2019/20 had significantly faded and had lost momentum. Recovery was impacted by changes in health and social care post holders and the general recovery pressures on the wider system.
- 4.7 Discussions with key organisations supporting people with a learning disability and their families took place in early 2023. They concluded that it would not be helpful to 'start again from scratch' by asking people what they want. That work had in some significant part already been done pre-Covid. Acting on what was already known about what people wanted was considered to be the best way forward to recovery.
- 4.8 Supporting the health and wellbeing of people with a learning disability and their family carers is a whole systems agenda cutting across health to social care, employment to housing, leisure to staff training. People with a learning disability are one of the most vulnerable and deprived groups of citizens for whom the Council and the NHS have responsibility. It is also the group on whose behalf significant levels of health and social care money is spent.
- 4.9 The system is, however, prone to defining people by their learning disability 'diagnosis' rather than their more important and immediate needs as people. When partners reviewed what was known about people with a learning disability in Lewisham, and in particular the hundreds of people not known to adult social care or specialist healthcare (only primary care) it was highlighted that there were significant numbers of people whose needs require accessibility to universal service offers. Any initiatives developed would need to pay attention to preparing and supporting those universal services.
- 4.10 The Plan (see Section 5 below) is conceptualised as a vehicle to bring together all the outstanding and proposed work into a single place. In part, this will help stop work streams operating in isolation from each other. It also makes the work that partners commit to do to support people with a learning disability and their families more visible across all of the workstreams, to all partners and, crucially to people with a learning disability and their families. The governance structure proposed would evidence a strategic commitment to supporting progress and delivery and hold the Council and its partners to account.
- 4.11 The version of the Plan used to support the process of formal consultation and wider discussions with stakeholders was developed as a partnership between health and social care staff, provider representatives and LSU advocacy group (Appendix 1). It captured what those partners considered to be key areas for action, some of which were identified pre Covid-19 and others identified through the process of iterative discussions. A six-week consultation on that Plan was then undertaken on Citizen Space. Opportunities for families and people with a learning disability to meet and discuss the proposals were also organised: the former supported by Adult Social Care and the latter by LSU. A report on the outcomes of the Consultation is attached as Appendix 2 and summarised in Section 6 below.
- 4.12 The successful delivery of a work programme of this size requires a system wide

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commitment from a range of teams and organisations. This is an aspirational and transformational agenda which requires a robust governance structure. While the Plan sets out many actions for prioritisation and delivery, the management and scrutiny of that delivery needs to be a system wide responsibility at a senior management level. The development of any new actions and priorities by the delivery subgroups proposed will also require system-wide oversight.

- 4.13 It is with this system and partner wide responsibility in mind that the Plan is being presented for consideration and agreement at Mayor and Cabinet.

### **Healthier Communities Select Committee**

- 4.14 The Plan was presented to the Healthier Communities Select Committee on 2<sup>nd</sup> November 2023. Brighter Horizons and LSU also addressed the Committee. A member of the public who was in attendance who is the mother of a young person with complex needs was also given opportunity to address the Committee directly.
- 4.15 The Committee received a presentation which reported actions which were already underway as an outcome of having written the Plan. The presentation also gave detail regarding the outcome of the consultation.
- 4.16 The Committee agreed the key recommendations of the Plan as follows:
1. Note the ambitions of the Learning Disability Implementation Plan
  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.
  3. Support the establishment of the Learning Disability Partnership Board and its associated delivery subgroups.
  4. Note 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.
- 4.17 The Committee noted the ambitions of the Learning Disability Implementation Plan and agreed its seven priority areas.
- 4.18 With regard to the recommendation - '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', the Committee undertook to have further discussion with officers outside of the Committee and before Mayor and Cabinet were scheduled to meet on the 6<sup>th</sup> December 2023.
- 4.19 The Committee strongly endorsed the importance of the Council's role in leading partners to work together to deliver this plan and the Learning Disabilities Agenda generally. In further acknowledgement of this, Healthier Communities Select Committee also asked that the annual report associated with this plan, that would be presented to the Lewisham Care Partnership, should also be presented at the Healthier Communities Select Committee for discussion.

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- 4.20 The Committee acknowledged the day care centre offer positively but also recognised that the offer needed to be improved. Particularly, the Ladywell Centre was mentioned which the Committee visited in August 2024. A cohesive corporate approach was required for enhancing our day centre offer as collaboration with colleagues in the regeneration department was crucial to make improvements to the physical estate of the day centres. It was discussed that these centres provided services that were important to the community.
- 4.21 Healthier Communities Select Committee also made the following recommendations for inclusion in the Plan:
- a. In recognition of the consultation feedback that the borough, as a whole, needs to be more accessible and supportive, a public awareness and education programme should be developed (like e.g. the Dementia Friendly programme). Including greater awareness as to what steps to take to make people with a learning disability more accepted as full citizens of the borough.
  - b. While recognising that the Plan sets out a direction of travel, its successful delivery will benefit from both outcomes against actions but also a risk register that will sit alongside it.
  - c. It would be helpful for there to be a strong(er) focus on Special Educational Needs (SEN) national policy and the journey across and between school aged education in schools and further education offers.
  - d. There needs to be a clearer focus on the delivery of a person-centred approach to supporting employability and the setting of specific employment growth targets, particularly given the possible numbers of people who will not meet eligibility for funded care, for that group of people also.
  - e. Committee highlighted paragraph 8.6 and the difficulties around sourcing capital, endorsing the need to go into partnership and also to be more creative about how we develop opportunities. There are clear linkages here with 'preparation for work' programmes and the All-Age Autism Strategy work programme.
  - f. Committee noted the focus on skills development and would like more detail regarding what interventions we have put in place and what outcomes are being delivered.
  - g. Committee discussed the low engagement in the consultation. It was noted that, although the formal consultation period had ended, officers continue to actively seek the views of families of people with a learning disability and people who do not meet eligibility for funded care. This should include both individual direct contact and also extending opportunities to meet at weekends. It was also recognised that family carers might not have time or motivation to participate in a consultation that does not directly impact on them.

## **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 make their lives better. As officers have developed the Learning Disability Implementation Plan (the Plan), we have been told consistently that people are tired of being asked what they want, and they do not want to be asked again. They want to see action.
- 5.2 The Plan has been developed in line with Care Act Principles, the Council's direction of travel for adult social care, NHS duties, best practice in service delivery and general policy guidance. It 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 rights as any other person living in Lewisham, be full members of their communities, increase

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their independence and improve their overall health and wellbeing. In short, they can be supported to live their best lives.

- 5.3 Information from previous discussions and events have been used to build the Plan which was subsequently used for the consultation (Appendix 1). This information 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 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 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 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 best use of the available resources.
  - Priority 7: Developing the Local market – Recognise the diversity of our local population and the expertise of people with lived experience by placing co-production at the core of our new market development approaches and initiatives.
- 5.4 Each priority area is presented 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 section that sets out the actions has been rewritten further to consultation feedback (See Appendix 3) with responsibilities, accountabilities, timescales, and a RAG rating now included. In line with adult social care practice, it has been written as ‘we will’ statements. The updated version of the action plan includes additional actions highlighted from consultation feedback and an update on progress on those actions that started by virtue of their inclusion in the consultation plan. This reflects the aspiration that the Plan will be a living document representing both the current and future aspirations and needs of people with lived experience, and incorporating new priorities and actions as they are identified through partnership and coproduction.
- 5.5 Many actions in the revised Plan are ‘cost neutral’ to the extent that they reflect a reshaping of adult social care existing spend or known future cost pressures, particularly those relating to the increasing costs relating to young people in transition. Some actions will be cost neutral because their delivery can be supported by the redirection of staff time and priorities across both the council and also partner agencies. However, the identification of capital to develop new housing and care settings is a particularly complex financial pressure across the system.
- 5.6 The Plan sets out a potential governance structure as follows:
- Five delivery groups to be established to manage the delivery of five (5) of the seven

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(7) key priorities in the Plan.

- The other two (2) priorities - Priority 4, Support for Family Carers and Priority 5 Managing Risks and Staying Safe - will be the responsibility of all of the delivery groups as they are cross cutting issues.
- Priority 4 will also be managed through the implementation of the Carers Strategy.

It is envisaged that the five subgroups meet quarterly to review delivery against agreed actions and to manage mitigation where delivery is delayed.

- 5.7 It is proposed that a Learning Disability Partnership Board is re-established. A significant part of its role will be to manage and receive quarterly update reports from the delivery groups, acknowledging achievements and directing mitigation and corrective action where there is underachievement. The Partnership Board will also be key in signposting linkages to other workstreams across health and care partners.
- 5.8 For both the delivery subgroups and the Partnership Board to be successful, they need to be well led. This means engagement from senior officers and also that the groups are led not only by social care, but by the key responsible agencies, teams and partners. This would suggest a possible leadership responsibility as follows.
- Priority 1: A Good Place to Live – Lead to be confirmed.
  - Priority 2: Health & Wellbeing – To be led by SEL ICB Primary Care
  - Priority 3: A Life with Opportunities – To be led by Lewisham Mencap
  - Priority 6: A Sustainable Workforce – To be led by Provider Services
  - Priority 7: Developing the local market – To be led by Integrated Commissioning

It is proposed that the delivery subgroups have representation from ‘experts by experience’ and that all delivery subgroups will have both people with a learning disability and family carer representatives.

The Partnership Board itself will be co-chaired by the Executive Director for Community Services and a person with a learning disability. There will be wider ‘expert by experience’ representation on the Board, both people with a learning disability and family carers.

A draft proposed Terms of Reference for the Partnership Board is attached as Appendix 4. The five delivery subgroups will establish their own membership and Terms of Reference as determined by the action plans, their complexity, their expected delivery dates and who is required to successfully deliver them.

- 5.9 To ensure public visibility of progress, or lack of progress, in the delivery of the Plan, it is proposed that the Partnership Board itself send an annual report to Lewisham Care Partners. That annual report is conceptualised at this (planning) stage as summarising the outcomes from each of the delivery subgroups’ action plans with a covering report from the Partnership Board. That covering report will set out key successes from the previous year and the key actions for the following year.

### **Co-Production**

- 5.10 Successful development and implementation of the Plan requires that priorities, actions and activities are co-designed and co-produced with the people they affect. It is fundamental that people with a learning disability and family carers are full members and owners of both the delivery subgroups and the Partnership Board.
- 5.11 The Plan shows co-production groups for both family carers and for people with a learning disability sitting as separate entities. The carers group will be supported by

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IMAGO, a charitable organisation which the Council contracted in June 2023 to support and promote the wellbeing of unpaid carers. The people with a learning disability group will be supported by LSU: this group is long established in Lewisham and is grant funded by the Council to support self and citizen advocacy.

- 5.12 These groups will act as reference groups for the five subgroups and the Board. As noted above, the Partnership Board will be co-chaired by a person with a learning disability: that person is likely to be nominated by the LSU supported group. The carers' group, once established will consider how it can best work with the delivery structures, but it is probable that family carers on the Partnership Board will be nominated from that group.
- 5.13 Real co-production and the meaningful inclusion of people with a learning disability and family carers is not just about presence at a meeting. Time and space needs to be created for pre and post preparation and debriefing.
- 5.14 The LSU People's Parliament MPs were paid to attend the previous Partnership Board meetings and it is proposed to continue with that arrangement when the Board is re-established. Delivery subgroups will make decisions regarding payment for attendance at meetings. The Learning Disability Health subgroup currently pay people with a learning disability to attend meetings.
- 5.15 It is proposed that expenses incurred by family carers who attend the Board are met. These include the cost of reasonable travel expenses and, where necessary, a sum equivalent to the Direct Payment rate for a personal assistant. This will support the attendance of family carers who may otherwise not be able to attend without support for their dependent family member at home.
- 5.16 The Plan currently rates Lewisham as being at the level of 'Engagement' on the Ladder of Co-Production. The aspirations for co-production set out in this Plan, if agreed and delivered, will further deliver on our work to embed coproduction in decision making.

## **6 Outcomes from the Consultation**

- 6.1 The full report of the outcomes of the Learning Disability Implementation Plan Consultation is attached as Appendix 2.
- 6.2 The Consultation ran on Citizen Space for a period of six (6) weeks between the 13<sup>th</sup> of September 2023 and the 16<sup>th</sup> of October 2023. It was widely publicised on social media and other informal communication systems. A wide range of organisations working with people with a learning disability were sent the Plan and the link to the Consultation. Provider organisations with direct contact with the families of people with a learning disability were asked to distribute (350) letters to families advising of the consultation.
- 6.3 The Citizen Space and the hard copy letters sent out contained a direct contact mobile phone number and also advised that hard copies were available. Sixteen responses were received from the on-line consultation.
- 6.4 Three sessions targeted at family carers were organised on the 2<sup>nd</sup> and 10<sup>th</sup> of October with a third session run slightly outside of the consultation period on the 26<sup>th</sup> of October 2023. A total of 14 family carers attended across the three events.
- 6.5 LSU ran five facilitated sessions for people with a Learning Disability – three (3) in person and two (2) online sessions. Fifty-two people with a learning disability attended these sessions.

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- 6.6 A written submission was received from Lewisham Mencap.
- 6.7 While overall the number of respondents was low, there was good engagement from both web-based and in person respondents. There was general support for the seven priority areas identified (94 – 100%).
- 6.8 There was opportunity for respondents to make additional comments on whether there were other priorities that the Council could be working on. Comments emphasised the importance of the wider accessibility across the borough to support citizenship. These will be included as actions to strengthen the Priority 3 – A Life with Opportunities - delivery plan. Another area which responses signposted as a priority area for more targeted consideration was a more formal and visible assurance process looking at the quality of staff: client interactions, not just contract compliance. This will be added as an additional action to Priority 6 – A sustainable workforce.
- 6.9 Respondents wrote less about what they felt the Council did well. Social opportunities such as those provided by 'Heart and Soul' and the Lewisham Mencap evening clubs were noted as positive, as was access to day opportunities and short breaks at home. This highlights the importance of socialisation and social interaction for people with a learning disability with peers, in addition to having supported access to other community opportunities.
- 6.10 The final discussion question was "What could the Council be doing better". Responses to this question were in ways interchangeable with the question on priorities. Many of the responses reflected actions that had already been included in the draft Plan. They also reflected the direct experiences of family carers that the draft Plan had not captured strongly enough, particularly with regard to social work assessment and the reported disjointedness of social work knowledge and interaction due to staff turnover. Responses have also resulted in new actions being added to the action plan e.g. access to warmer pools for people with complex physical needs and improved respite offers particularly during holiday periods and weekends for young people still at schools and college. These have been added to the action plan as part of Priority 3 – A Life with Opportunities.
- 6.11 The equalities analysis of respondents is most complete in the Citizens Space consultation. Respondents were mainly aged 45 – 85+. The overwhelming majority of respondents were women. Just over half had a caring responsibility, most probably for someone with a learning disability. The overwhelming majority of respondents were White British.
- 6.12 People with a learning disability who participated in the face-to-face focus groups were more balanced by way of gender with slightly more men than women. The main single ethnic group represented was White British, but the Black British Caribbean and African populations together represented half of the participants.
- 6.13 Of the carers who attended the face-to-face sessions, all but one were women.

## **7 Equalities Implications**

- 7.1 The full Equalities Assessment Analysis (EAA) has been attached as Appendix 5.
- 7.2 Information was collated from the Council's adult social care client system, National census data, Population Health data and the Lewisham Spring School Census.
- 7.3 A report from Population Health (people in Lewisham with a learning disability known to a GP practice) says that there are 1,674 patients, aged 14 years and over with a

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learning disability registered with a Lewisham GP practice. POPPI ([Projecting Older People Population Information System \(poppi.org.uk\)](http://poppi.org.uk)) and PANSI ([Projecting Adult Needs and Service Information System \(pansi.org.uk\)](http://pansi.org.uk)) data suggest that this is significantly lower than would be expected.

- 7.4 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 homes.
- 7.5 Approximately one third (266) of people in receipt of funded care are aged between 18 and 25.
- 7.6 There is a spread in 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). Data collected over a 5 years period (2018 – 2013) from the Council's client system shows a growth in people from the Black African community, and younger adults in particular.
- 7.7 The majority of people in receipt of funded services are male (509) with women numbering 296.
- 7.8 It has not been possible to establish religious belief and observance for 358 people (almost half) receiving funded care. However, the highest belief system is religion relating to Christianity (348) with the next highest reported being Islam (29).
- 7.9 It has also not been possible to establish information on sexuality and sexual preference for people with a learning disability. Given the reported preferences on sexuality known from the census, support with expressing sexuality and sexual self-determination is an inequality that requires further consideration.
- 7.10 The areas for action in the Plan will have a generally positive impact on people with a disability and particularly learning disability. Each priority area will need to consider the growing younger population and the shift in ethnicity towards more African and Caribbean people in receipt of services.
- 7.11 The Council's vision and strategy for adult social care in Lewisham has a focus on equalities and diversity and ensuring that the voices of all our citizens and service users are heard.
- 7.12 A separate EAA was completed for the Carers Strategy. This was not specific to the carers of adults with a learning disability. The actions set out in this Plan makes recommendations for improving knowledge of and support to family carers of people with a learning disability in order to better support the voices of known and also hidden carers, particularly older carers.

## **8 Financial implications**

- 8.1 Local Authorities, both children and adults' services in social care, education for young people with special educational needs (SEN) and the NHS are facing increasing financial challenges in their support to young people and adults 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. The majority of this spend is on 24 hour residential and

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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 short breaks. The quoted £32 million does not include grants given to organisations such as LSU, Lewisham Mencap Heart'n'Soul and excludes the costs of Lewisham Passenger Services.

- 8.3 The NHS spends approximately £12 million per annum on services for adults with a learning disability in the borough, 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 and an approximate £6 million on specialist learning disability clinical teams and learning disability specific psychiatric hospital beds.
- 8.4 This 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 cost neutral to the Council (and to partner agencies) as they will primarily be costs that would be incurred as 'Business as Usual'. That said, there is known significant and unfunded financial pressures on both health and social care spend from young people transferring from children services to adult services.
- 8.5 Some of the proposals reference the development of new housing and support services. Some of these will be the reshaping of existing housing and support offers and could be funded through 'invest to save' bids against future revenue costs and/ or Disabled Facilities Grant. Others will require a full capital business case and close partnership working between Adult Social Care and the Council's Housing Directorate. 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 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, and supporter costs to facilitate engagement in meetings plus some travel and respite expenses for family carers. No specific budget has been identified for this and so represents a cost pressure. Adult Social Care will need to identify an amount from its operating costs each year to support this pressure.

## **9 Legal implications**

- 9.1 Care Act 2014 – The proposed Plan sets out how the Council can best meet its responsibilities under the Care Act (2014) to people with a learning disability. The proposed Plan is fully compliant with the requirements of the Care Act 2014.
- 9.2 Equalities Act 2014 – The proposed plan is fully compliant with the Council's responsibilities under the Equality Act 2014.
- 9.3 All comments on behalf of the Director of Law and Corporate Governance have been incorporated in to the report. There are no specific legal implications arising from the report

## **10 Climate change and environmental implications**

- 10.1 The Council has made a commitment to making the borough carbon neutral by 2030.

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- 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 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 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 subgroups 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 in all supported housing, residential and day opportunities services. This will be monitored as part of contract compliance or through quality assurance visits. The Partnership Board and delivery groups will have opportunity to observe and promote Council policies around recycling and energy usage.
- 10.6 The use of sustainable transport options, including public transport and vehicle sharing, will be encouraged across all partners. The Partnership Board and delivery groups will also look for opportunities to promote sustainable transport across the Plan's priorities and actions.

## **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 the Plan's 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 than people who do not have a learning disability. On average they die 20 years sooner than members of the non-learning-disabled population.
- 12.2 They 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 They 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 They consistently report a lower quality of life than the general population.
- 12.5 Health and wellbeing implications are specifically addressed in the Plan's Priority 2 "Improving Health & Wellbeing" particularly in regard to improving the take up of Annual Health checks, the quality of Health Action Plans, ensuring that the person has

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a Hospital Passport (a personalised document that gives hospital staff important information about how to support the person when a hospital inpatient) , and ensuring that the person has a communication passport where one is required.

- 12.6 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 will have a direct and positive impact on health and wellbeing.

### 13 Social Value

- 13.1 Much of the cost and many of the services for people with a learning disability are commissioned by the Council and so have social value outcomes set as part of the procurement process. In particular, the payment of London Living Wage, paid annual leave, and occupational sick pay are contract requirements for staff. However, the Plan itself supports the Council’s social value aspirations.
- 13.2 **Responding to local need – digital exclusion** - The Plan recognises the how digital technology can be used to enhance people’s lives but also the risks it can present to vulnerable people. It supports initiatives to use technology to improve health and wellbeing, communication, and connection and to enable positive risk taking. It recommends a focus on promoting skills development and online safety.
- 13.3 **Responding to local needs – Local Jobs** - The Plan recognises that having access to education, learning and employment can improve the wellbeing and quality of life of people with a learning disability. It includes specific targets to improve the number of people who have a job and recommends specific actions designed to increase apprenticeship opportunities, job support and has a commitment to growing local community-based employers.
- 13.4 **Responding to local needs – Local Jobs** - The Plan also includes a specific action to support local care and support providers by organising a support worker recruitment fair targeted at local people, who are not part of the social care workforce. This will improve local employment opportunities and will potentially enhance community connections for those people with a learning disability, supported by Lewisham residents.
- 13.5 **Responding to local needs – Employment Inequality** - The Plan recognises that people with a learning disability experience significant employment inequality, with only 7.5% of all adults in employment. The Plan sets specific targets to address these inequalities and puts improving the employment pathway, from education to training to job support and sustainable employment opportunities, at the core of its commitments to enabling people with a learning disability to have a life with opportunities.

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## 15. Appendices

1. Lewisham Learning Disability Implementation Plan – Consultation Version
2. Consultation Outcomes Report
3. Revised Action Plan for the Five Delivery Groups
4. Draft Terms of Reference for the Learning Disability Partnership Board
5. The Learning Disability Equalities Assessment and Analysis (EAA)

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