

South Gloucestershire

Delivering for you

All-age Learning Disability Strategy



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Foreword

This strategy sets out our vision and priorities for people of any age with a learning disability in South Gloucestershire for the period from April 2022 to March 2027.

We are proud to present this All-age learning disability strategy because it has been co-produced with, and based on the views of, people with a learning disability and their parents and carers. This has been possible through extensive engagement to understand what is important to them. We are very grateful for the support of all those people who have taken the time to contribute their views either in person or through written feedback.

This strategy is the first All-age learning disability strategy for South Gloucestershire. It was developed with the Learning Difficulties Partnership Board and included input from key people including parents and carers, providers, practitioners, commissioners, schools, and adults and young people with a learning disability.

This strategy directly contributes to the Council Plan 2020-24 especially within the priorities:

Creating the best start in life for our children and young people

Identifying and supporting those most in need and helping people to help themselves

Promoting sustainable inclusive communities, infrastructure and growth.

The strategy does not try to cover everything we know about learning disability or every issue. It sets out the details of the six priority areas that form the basis of our aims. The Children, Adults & Health Directorate will lead and coordinate the delivery of the strategy through a five-year action plan. The Learning Difficulties Partnership Board will have close oversight and scrutiny of the strategy. The action plan will include key measures which will be used to track impact of the action plan.

As you read the strategy you will see a commitment to move away from a focus on disability to a focus instead on someone's ability. Together, we want everyone to be equipped, supported and empowered to live their best lives.

We the undersigned agree to be accountable for ensuring the delivery and implementation of this strategy.

CLLR BEN STOKES

Benjamin Sky ..

Deputy Leader of the Council and Cabinet Member for Adults and Housing, South Gloucestershire Council **CHRIS SIVERS**

Mistrio Suers

Director for Children, Adults and Health, South Gloucestershire Council

CLLR SAMUEL BROMILEY

Cabinet Member for Children and Young People, South Gloucestershire Council

All-age learning disability strategy

Our Vision

People with a learning
disability in South Gloucestershire
will be empowered to have more choice and control and will
live safe, good, healthy and fulfilled lives as part of their community.
They will have the right support at the right time to achieve their full potential.

"Together we can and we will achieve"

Core outcomes for people with a learning disability

- I have aspirations about what I can achieve in life.
- I am able to take positive chances in life.
- My ability is seen first.
- I have choice and control for the things that matter to me.
- I am able to take small steps to progress.

- My voice is heard and I am listened to.
- My parents, carers, family and friends' voice is listened to.
- I have the support I need at the right time, right place and in the right way.
- I am as independent as I can be.
- My accommodation needs are being met.

- I am part of an inclusive community.
- I am safe.
- I am able to access life long learning.
- I have the best health and wellbeing I can.
- I and my parents and carers have access to good information, advice and guidance.
- I am able to access employment.

Priorities

Effective planning for smooth transition for young people preparing for adulthood.

Increase employment and vocational education and training opportunities for people with a learning disability. Provide a range of good quality housing and support options for people with a learning disability. Promote independence ensuring people are safe and connected to their community.

Promote support network for family, friends, parents and carers who support people with a learning disability. Work in partnership with health to deliver better health and wellbeing outcomes for people with a learning disability and their parents and carers.

Foundation

- Good information, advice and guidance.
- Community focused.
- Commissioning need and demand led.
- Outcome based commissioning / progression focus.
- Face to face services show me not tell me.
- Workforce development programme.
- Clear pathways.
- Co-production.

In this strategy we use "parents and carers" to refer to the wide support network for people with a learning disability, including friends, family, parents and carers.

1 Our vision

OUR VISION IS:

People with a learning disability in South Gloucestershire will be empowered to have more choice and control and will live safe, good, healthy and fulfilled lives as part of their community. They will have the right support at the right time to achieve their full potential.

"Together we can and we will achieve"

As part of this vision, we aim to ensure that all people with a learning disability in South Gloucestershire:

- have the right to the same opportunities as anyone else to live satisfying and valued lives
- have the right to be treated with dignity and respect
- have more choice and control in key decisions in their lives
- have a suitable home within their community, good access to health services, can develop and maintain relationships and get the support they need to live a healthy, safe and fulfilling life.

Whilst our vision remains the Council focus for the next five years, this strategy builds on progress so far and seeks to maintain the very positive service developments achieved to date, delivering better health and wellbeing outcomes for people with a learning disability and parents and carers.

2 Our ambitions for children and adults with a learning disability

OUR CORE AMBITION FOR PEOPLE WITH A LEARNING DISABILITY IN SOUTH GLOUCESTERSHIRE

We will:

- raise aspirations for people with a learning disability, providing encouragement in what can be
 achieved and work together across the whole system to achieve the best possible outcomes for
 individuals.
- have a 'presumption of achievement' presume that someone can and will be able to do something, rather presuming that they can't and won't.
- recognise people's strengths and actively look for their unique skills, always taking a strengths-based approach.
- provide a caring and supportive community where all people feel safe and included and valued for who they are.
- provide good access to health services.
- enable support at the right time, in the right place, in the right way.
- ensure that parents and carers receive the right information and support at the right time in order that they can be supported.
- provide clear pathways for everyone with a learning disability and be user led in our commissioning activity.
- build on our work on evidence informed approaches.

WHAT, AS A PERSON WITH A LEARNING DISABILITY, CAN I EXPECT FROM THE LEARNING DISABILITY OFFER?

- I have a good and meaningful everyday life.
- I am encouraged by all those that support me to achieve my potential in education, employment and training.
- I am encouraged to be as independent as I can be, by taking small steps at a time.
- I am allowed to make choices of my own and I am allowed to make my own mistakes as part of my learning and development.
- I have a choice about where I live and who I live with.
- I have choice and control over how my health and care needs are met.
- My mental health and my wellbeing are considered and support is available to me when needed.
- I have good information and advice around relationships and sex.
- I am safe and I feel part of my community.

WHAT CAN MY PARENTS AND CARERS EXPECT FROM THE LEARNING DISABILITY OFFER?

- My parents and carers get the help they need to support me to live in the community.
- My parents and carers have access to good information and advice at the appropriate time using a variety of media that is appropriate.
- My parents and carers have increased opportunities to get together with other parents and carers of people with a learning disability and support each other.
- My parents and carers are supported in key transition stages of my development.
- The mental health and wellbeing of my parents and carers is considered and support to them is available.

WHAT PROFESSIONALS AND ORGANISATIONS CAN EXPECT FROM THE LEARNING DISABILITY OFFER?

- Commissioning of services will be data driven.
- More accountability for delivering outcomes within the system.
- More partnership working across practitioners, commissioners and providers to deliver the best for individuals to achieve their potential.
- More joined up services across health, education and social care.
- Clear pathways through key transition stages.

3 Introduction to our All-age learning disability strategy

OVERVIEW

People with a learning disability are first and foremost individuals. They should not be defined solely by their learning disability. People with a learning disability have the right to live full and equal lives, with access to the same opportunities as other members of our communities.

Despite this, we know that people with a learning disability often experience many disadvantages and inequalities compared with the rest of the population.

People with a learning disability have increased vulnerability. This is not simply the result of individual characteristics such as a learning disability but is also crucially affected by environmental factors such as wealth, social isolation and access to health and welfare services.

South Gloucestershire Council's Public Health team completed a learning disability needs assessment in 2019/20, with the aim to provide a comprehensive understanding of the health, wellbeing, education and social needs of people with a learning disability across South Gloucestershire; to identify gaps in current service provision; to make recommendations for changes to meet people's needs; and to reduce the inequalities experienced by people with a learning disability.

This strategy builds on the learning disability needs assessment and is for both children and adults with a learning disability in South Gloucestershire. It aims to capture the needs of all people with a learning disability in the area. This strategy has considered a wide range of needs, reviewing potential gaps in service provision relating to each of them.

This strategy also has a focus on the parents and carers of people with a learning disability, as it is acknowledged that carers have a huge impact on the lives of people with a learning disability at any age, and that caring can also have a big impact on an individual's own life and health.

In South Gloucestershire, our aim is to build a shared culture across the health, education and social care system where aiming high for all people with a learning disability is standard practice. This is underpinned by our vision statement:

People with a learning disability in South Gloucestershire will be empowered to have more choice and control and will live safe, good, healthy and fulfilled lives as part of their community.

They will have the right support at the right time to achieve their full potential.

"Together we can and we will achieve"

DEFINITION OF A LEARNING DISABILITY

In South Gloucestershire we have adopted the Eric Emerson and Pauline Heslop "<u>A working definition of</u> learning disabilities".

Learning disability includes the presence of:

- a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with;
 - a reduced ability to cope independently (impaired social functioning);
 - which started before adulthood, with a lasting effect on development.

Examples of this would be difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life. People with a learning disability tend to take longer to learn and may need support to develop new skills, understand complicated information and interact with other people.

Many people with a learning disability prefer to use the term 'learning difficulty'. The two terms are interchangeable when used in the context of health and social care for adults. However, in UK education services, the term 'learning difficulty' also includes people who have 'specific learning difficulties' e.g. dyslexia or those with a higher-level autistic spectrum disorder (sometimes also known as high-functioning autism), who have average or above average intelligence but who do not have a significant general impairment in intelligence. Appendix 1 outlines the differences between the terms learning disability and learning difficulty.

Many people with a learning disability also have physical and/or sensory impairments. The definition in this strategy covers children and adults with Autism who also have a learning disability.

This strategy will complement other existing strategies and areas of key priorities within South Gloucestershire and sit alongside them rather than replacing them, including:

- Joint Health and Wellbeing Strategy 2017-21 (currently being updated)
- Strategy for Children & Young People 0-25 years old with Special Educational Needs and Disability (SEND) in South Gloucestershire 2018 – 2023
- Early Help Strategy for Children, Young People & Families 2019 -2024
- The NHS plan where Learning Disability and Autism is one of the 4 priorities with a 3 year plan
- South Gloucestershire Carers Strategy (currently being updated)
- The Housing Strategy (currently being updated)
- National strategy for autistic children, young people and adults: 2021 to 2026
 - Needs Assessment: Autistic Adults and Children (currently being updated)
 - Needs Assessment: People with a learning disability (to be published)

4 The policy context

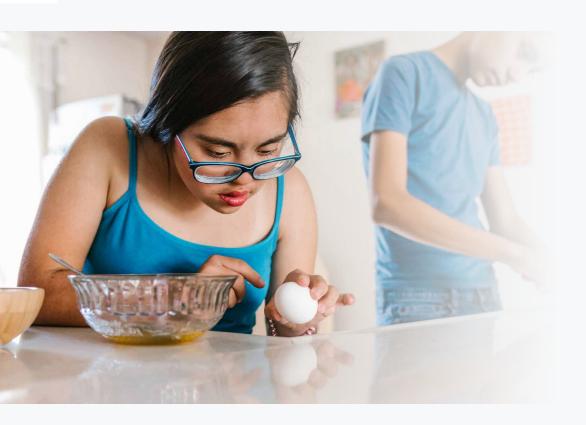
Several pieces of national legislation exist in relation to learning disability:

- The Equality Act (2010) is a legal framework to protect the rights of people with protected characteristics, including disability.
- The Mental Capacity Act (2005) aims to protect and empower people who may not have the mental capacity to make decisions for themselves, either some or all of the time.
- The Children and Families Act (2014) includes reference to children and young people under the age of 25 with special educational needs. Under the Act, children and young people with special educational needs will have their educational, health and social care needs outlined in a single Education, Health and Care (EHC) plan.
- Requirements for adult social care provision are outlined in the Care Act (2014).

In addition, there are several pieces of policy and guidance:

- Valuing People (2001) was the seminal policy document outlining the Government's approach to learning disability, followed by the publication of Valuing People Now in 2009. Both focus on the fact that "all people with a learning disability are people first with the right to lead their lives like any others, with the same opportunities and responsibilities, and to be treated with the same dignity and respect". Both policies place four principles rights, independence, choice and inclusion at the heart of action to improve the lives of people with a learning disability.
- In May 2011, the BBC's Panorama programme revealed the emotional and physical abuse of adults with a learning disability by staff working at the private Winterbourne View Hospital in South Gloucestershire, resulting in the Department of Health publishing Transforming Care: A national response to Winterbourne View Hospital in December 2012. The report focused on the need for community-based care for people with a learning disability and expectations for a "substantial reduction in reliance on inpatient care for these groups of people", with a rapid reduction in the number of hospital placements and the closure of inpatient services. Nevertheless, multiple subsequent reports highlighted slow progress towards the Government's goal of moving people with a learning disability out of hospitals and into the community.
- In 2015, a national plan was developed to close inpatient facilities and develop community services for people with a learning disability, to be delivered through 49 Transforming Care Partnerships (TCPs). TCPs brought together local authorities, NHS Clinical Commissioning Groups (CCGs), NHS England, service providers, the voluntary sector and service users and their families to develop a three-year transformation plan for their local area. The Government's mandate to NHS England 2018-2019 included the objective of improving out-of-hospital care for people with a learning disability, focusing on the need for better prevention, early intervention and access to integrated services, together with reducing inappropriate out-of-area placements and reliance on inpatient care.
- The NHS Long Term Plan was published in 2019, outlining the ambitions of the NHS over the next 10 years and including learning disability as one of its four clinical priorities. This includes improving community-based support, reducing the number of people with a learning disability in hospital settings and reducing health inequalities through a focus on increasing uptake of annual health checks and reducing overmedication of children and young people with a learning disability.

- Sir Stephen Bubb "The Building Rights report" May 2021, which is an independent review of services for autistic people and people with a learning disability in Bristol makes three key recommendations to help services and systems become more aware and have a better understanding of the challenges faced by autistic people and people with a learning disability. The report's recommendations are:
 - Establish a 'Charter of Rights'
 - Ensure a 'Right to Challenge'
 - Establish an independent commissioner for autistic people and people with a learning disability.
- Care Quality Commission (CQC) Right support, Right Care, Right Culture guidance (Oct 2020) sets out how CQC regulates providers supporting autistic people and people with a learning disability.
- The Work, Health and Disability Green Paper, updated (August 2021) sets out the Government plans to support disabled people and people with health conditions to achieve their full potential and live better for longer.
- The National Disability Strategy (July 2021) sets out the actions the government will take to improve the everyday lives of all disabled people.
- The People at the Heart of Care White Paper (December 2021). The white paper sets out a 10-year vision for care and support in England and is based around three key objectives:
 - 1) People have choice, control and support to live independent lives
 - 2) People can access outstanding quality and tailored care and support
 - 3) People find adult social care fair and accessible



5 The local context - population data

The following data has been taken from the Learning Disability Needs Assessment 2020. It outlines the predicted service usage that will need to be considered as part of this strategy.

ADULTS WITH A LEARNING DISABILITY

The prevalence of all learning disabilities in adults (aged 18 and over) in South Gloucestershire is estimated to be 2.4% (5,333 adults), with a 0.5% prevalence (1,108 adults) of moderate or severe learning disabilities and a 0.1 % prevalence (252 adults) of severe learning disabilities. Data from the Adult Social Care Outcomes Framework (ASCOF) indicates that there were 845 adults (aged 18 or older) with a learning disability receiving long-term support from South Gloucestershire Council in 2017/18 – a rate of 3.8 people per 1000 population.

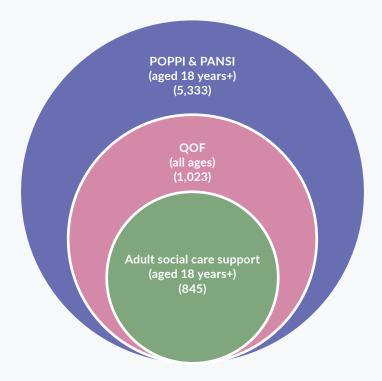


Figure 1: Comparison of reported numbers of people with a learning disability in South Gloucestershire from different data sources. [Sources: Projecting Older People Population (PANSI/POPPI). Quality and Outcomes Framework (QOF)[GP registered data)], Adult social care data (ASCOF)].

Age range (years)	All learning disability (n)	Moderate or severe learning disability (n)	Severe learning disability (n)
18-24	624	145	48
25-34	936	201	56
35-44	907	228	62
45-54	923	207	46
55-64	801	175	41
65-74	605	97	No data
75-84	387	40	No data
85+	150	14	No data
TOTAL	5,333	1,108	252

Table 1: [Source: PANSI/POPPI] 18 years and above estimated to have a learning disability in South Gloucestershire in 2020, by age.

Individuals with moderate or severe learning disability are generally expected to be known to health and social care services. The difference in the number of social care users known to services and number of people with a learning disability that we would expect to live within our population highlights that there are potentially large numbers of people within South Gloucestershire living with (probably milder) learning disability.

The data from the QOF and ASCOF when compared to other areas in the southwest is telling us we have fewer adults with a learning disability in the South Gloucestershire area; however we have a greater number of people accessing our social care services.

Table 2 shows the number of adults with a learning disability who are receiving long-term support from South Gloucestershire Council. Individuals may be using more than one service.

Service	Number of service users
Direct payment	298
Community-based support	282
Permanent residential placement	227
Building-based support	177
Supported living (shared support)	103
Nursing placement	44
Supported living (one-to-one support)	38
Transport	27
Permanent Shared Lives placement	16
Planned short break (residential placement)	8
Mental Health Act aftercare	8

Table 2: Utilisation of services by adults with a learning disability receiving long-term support from South Gloucestershire Council. [Source: Adult Social Care Database, South Gloucestershire Council].

Of the adults with a learning disability who are receiving long-term support from South Gloucestershire Council there is a higher proportion of male adults with a learning disability of 58.7% compared to the general population data of South Gloucestershire of 49.11%. There is a lower proportion of people aged over 65 with a learning disability of 10.12% compared to the general population data of South Gloucestershire of 23.78%.

The data for sexual orientation for those with a learning disability receiving support from South Gloucestershire Council shows that the majority of people with a learning disability would prefer not to say or is undeclared which equates to 87.8%. 12.2% have said they are heterosexual; this may indicate that this is an area not discussed openly.

The ethnicity reported for people with a learning disability receiving a service from South Gloucestershire Council shows 93.5% of people are White British or any other white background; 1.7% are of Asian or Asian British background; 0.9% are of Mixed or Multiple ethnic groups background; 0.9% are of African, Caribbean or Black British background; 0.3% from other ethnic minority groups with the remaining 2.6% reported as not known or not stated.

The religion reported for people with a learning disability receiving a service from South Gloucestershire Council shows 47.1% are either Church of England, Christian, Methodist, Baptist or Roman Catholic; 50.9% reported as no religion, not known, other or prefer not to say; 0.7% Muslim; 0.3% Jehovahs Witnesses; 0.3% Sikh; 0.2% Hindu and 0.1% Jewish.

CHILDREN WITH A LEARNING DISABILITY

In 2019, a total of 1,063 children with a learning disability as a primary Special Educational Need (SEN) were known to schools in South Gloucestershire, corresponding to a rate of 28.7 children per 1,000 population. This is lower than the rate for both England (35.5 per 1000 population) and the South West region (31.6 per 1000 population). This proportion changes across school year groups, with 1.0% of pupils in the reception year having a learning disability compared to a peak of 4.2% in Year 7. Overall, 3.4% of male school children had a learning disability compared to 2.3% of female school children. In South Gloucestershire, the highest proportion of schoolchildren with a learning disability were Mixed and then White British ethnicities, where 3.1% and 3.0% of schoolchildren with a learning disability respectively belonged to these ethnic groups. The proportion of schoolchildren with a learning disability was lowest among those of Asian ethnicity, at 1.7%. Within South Gloucestershire, 6.8% of pupils who are eligible for free school meals have a learning disability; this is compared to a learning disability prevalence of 2.5% among children not eligible for free school meals.

Broken down by severity, the rates of children with moderate (24.0 per 1000 population), severe (3.3 per 1000 population), and profound and multiple learning disabilities (0.9 per 1000 population) were all lower than for England and the Southwest. Table 3 provides a breakdown of these by learning disability type and school stage.

	Primary	Secondary	All
Type of learning disability	N (%)	N (%)	N (%)
Moderate learning disability	533 (2.2%)	383 (2.9%)	916 (2.5%)
Profound and multiple learning disability	15 (0.1%)	16 (0.1%)	31 (0.1%)
Severe learning disability	81 (0.3%)	35 (0.3%)	116 (0.3%)
TOTAL	629 (2.6%)	434 (3.3%)	1,063 (2.9%)

Table 3: Number and proportion of school children in South Gloucestershire with a learning disability, stratified by type of learning disability as a primary need and school stage, 2019 [Source: School Census, Department for Education]. (The figures above represent those with a learning disability only and do not include all of those with a statement or EHCP with other learning difficulties).

There is a substantial difference between the prevalence of learning disability-specific SEN among schoolchildren in South Gloucestershire (2.9%) and the learning disability prevalence according to the GP learning disability register for adults. This skew in learning disability prevalence by age is likely to be the result of medical advances that have increased the chances of survival among babies born prematurely or with birth complications. Some children with a learning disability may also have life-limiting conditions that prevent them from living into adulthood, which may in part explain the lower rates of learning disability among adults compared to children. However, when projecting future need, we should expect to see the rate of learning disability in adults rise over the coming years, as the cohort which has benefited from medical advances ages.

PROJECTIONS OF POTENTIAL FUTURE SERVICE USE

As the general population of South Gloucestershire increases, it is likely that the number of individuals with a learning disability requiring services from the council will also increase. Amongst 0-24 year olds, the number of service users in 2039 is anticipated to be 717 (expected range: 602 to 849), and adults with a learning disability that require services from the council could number 962 (estimated range 744 to 1,241). The modelling takes into account age specific survival probability rates. Due to the fact that people aged 18 – 24 years could receive services from either adult or children's social care, individuals aged 18 - 24 have been included in both sets of projections and therefore they should not be combined to give a total amount of individuals receiving services. These projections are displayed in Figure 2 and Figure 3.

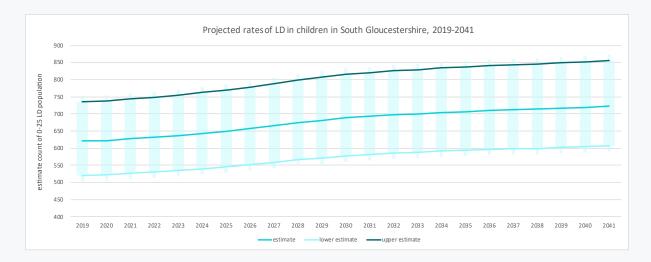


Figure 2: Projected rate of people requiring services for learning disability in 0-24 year olds in South Gloucestershire, 2019 – 2041. [Source: Department for Children Adults and Health, South Gloucestershire Council].

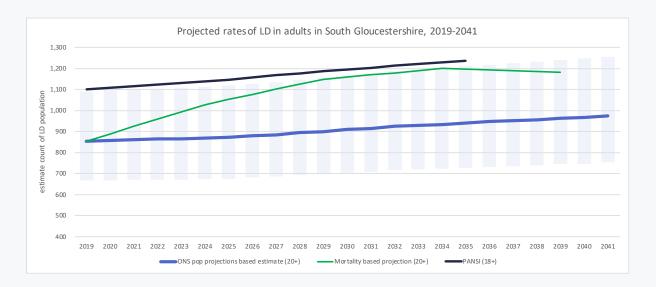


Figure 3: Projected rates of people requiring services for learning disability in adults (aged 20+) 2019 – 2041. [Source: Department for Children Adults and Health, South Gloucestershire Council].

SAFEGUARDING

In 2020-21, safeguarding referrals for individuals with a primary support reason of learning disability support accounted for 11.2% of all safeguarding referrals made to South Gloucestershire Council. The main abuse category is neglect and acts of omission, with these being most common among males between the ages of 21 and 67. However, the number of referrals due to acts of abuse – be that financial, material, physical, psychological, emotional, discriminatory, domestic and sexual abuse –are concerning and collectively account for 37.6% of all safeguarding referrals for adults with a learning disability.

EMPLOYMENT

In South Gloucestershire, 7.3% of working-age adults with a learning disability were in paid employment in 2018/19, higher than in the South West (5.9%) and England as a whole (6.0%). Despite this however, there is a 73.6% gap in the employment rate between those with a learning disability and the overall employment rate in South Gloucestershire.

ACCOMMODATION

Data from the Adult Social Care Outcomes Framework (ASCOF) indicates that 64.7% of working-age adults with a learning disability who receive support from social services at South Gloucestershire Council were reported as living in settled accommodation in 2018/19. This is lower than the proportion for the South West (77.2%) and England (77.3%) and was the lowest of all local authorities in the South West. 18.0% lived in unsettled accommodation, which was similar to the proportion for both the South West and England.

A key area of focus for the learning disability and autism NHS Long Term Plan is reducing the number of inappropriate out-of-area placements. Placing people with a learning disability in a local authority area away from their usual local authority of residence can be stressful for both the individual and their families, as well as incurring significant costs for the local authority of residence. Despite this, the number of new out-of-area placements for people in South Gloucestershire with a learning disability more than tripled in 2018/19 compared with the previous financial year. As of November 2019, a total of 145 South Gloucestershire residents with a learning disability were in out-of-area placements for residential and nursing care. The majority of the 145 were in placements in neighbouring authorities, with 33 placed outside neighbouring authorities.

TRANSPORT

Good transport links are crucial for maintaining independence, enabling people to seek and sustain employment, access health services and socialise. Many people with a learning disability cannot drive and therefore depend on public transport, or on family members, friends or carers.

As of December 2019, South Gloucestershire Council currently had 54,192 concessionary Diamond Travelcards on issue; however the data does not differentiate the number of travelcards specifically issued to an applicant with a learning disability.

HEALTH

Screening

People with a learning disability are less likely to receive screening for cervical, breast and colorectal cancer than people without a learning disability. Research has shown that barriers to cancer screening for people with a learning disability can include: a lack of accessible, easy read information about cancer screening, including a lack of easy read invitation letters to screening; time pressures faced by healthcare services; difficulties faced by individuals with communication and mobility; and limited training of healthcare professionals in providing screening services to people with a learning disability.

Health checks

Approximately two thirds (68.5%) of eligible adults with a learning disability in South Gloucestershire received an annual GP health check in 2020/21.

Hospital admissions

In South Gloucestershire, the rate of hospital admissions for people with a learning disability has risen significantly over the last decade, with a 141% rise in all hospital admissions and 166% increase in emergency admissions between 2009/2010 and 2017/2018. The rate of both emergency and general hospital admissions among people with a learning disability demonstrated a distinct correlation with local areas of deprivation, with those living in areas of higher deprivation having significantly higher hospital admission rates than those from less deprived areas. In the majority of cases, learning disabilities were a secondary reason for admission to hospital. Instead, hospital admission was the result of another condition, either connected to their learning disability or otherwise.

RELATIONSHIPS AND SEX

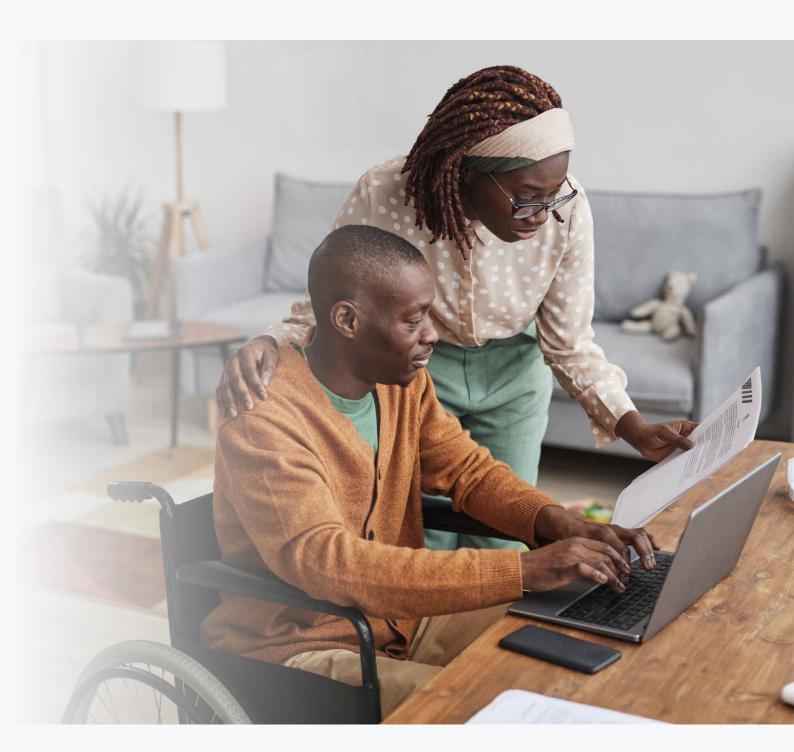
People with a learning disability often experience barriers to engaging in meaningful and intimate relationships, despite often aspiring to them in the same way as those without a learning disability. Government guidance emphasises the need for relationships and sex education (RSE) to be accessible and therefore differentiated and personalised for people with a learning disability. Despite this, people with a learning disability across the country are often not provided with sufficient, appropriately tailored or accessible RSE. As a result, people with a learning disability often lack information about sexual health and relationships and are therefore at higher risk of unsafe sex, sexually transmitted infections and unplanned pregnancies. Caregivers often play a key role in determining whether people with a learning disability feel supported to develop intimate relationships. Caregivers may feel conflicted between their desire to support people with a learning disability to engage in meaningful relationships and wanting to protect the individual from sexual abuse or other harms. Such concerns frequently mean that the sexuality of people with a learning disability is not acknowledged, leaving people with a learning disability feeling that they are being overprotected and not treated as adults.

6 You told us

During the development of this strategy, we have engaged and consulted with many groups including people with a learning disability and their parents and carers, practitioners, commissioners and schools. The following are just some of the key messages captured:

- The voice of people with a learning disability needs to be heard, listened to and acted on. When decisions are being made about services and facilities, there is a need for more co-production.
- Support for parents and carers of people with a learning disability is not always easily available especially around their mental health and wellbeing.
- Most of the support received by parents and carers was through friendship and peer groups which was invaluable.
- A range of good accommodation including adapted accommodation in areas with good transport links is important.
- People with a learning disability need to be supported to live and participate in the community in the day and night.
- There should be more opportunities for integrated working across teams, departments and organisations.
- People would like to see a focus on independence, working towards clear goals and outcomes. They would welcome a progression model.
- More attention is needed for preparing for adulthood, for example better planning and joined up working. We also need to hear the voice of young people better in relation to preparing for adulthood.
- More help to navigate available information and advice about support and how to access services is required. People would like to see more face-to-face advice giving.
- There is still a lot of work to be done to reduce health inequalities, for example better access to cancer screening, dental practice, GP and annual health assessments.
- Stakeholders would like more support in employing Personal Assistants and exploring alternative viable funding option(s) such as individual service funds.
- Some people need help to make and maintain relationships.
- We need to improve work opportunities for people with a learning disability including developing
 prospects with employers to support up skilling and personal development to enable advancement
 within a work setting.
- Using public transport can be a problem for some people.

- It is important for people to be able to access leisure and sport facilities in the community.
- People who work with people with a learning disability need better training to understand their needs better.
- More could be done to support siblings of children / young people with a learning disability who are often overlooked.
- There should be more advice on healthy meals and cooking.



7 Our priorities for people with a learning disability

Following the engagement and consultation with people with a learning disability and those directly connected to them between June 2021 and March 2022, we have identified six priority areas:

1

Effective planning for smooth transitions for young people preparing for adulthood

The planning for young people with a learning disability for adulthood will start at a much earlier stage. The views of young people with a learning disability will be listened to and acted upon, enabling young people to make choices about their future. There will be an embedded culture of the 'presumption of achievement' for all people with a learning disability, where positive risk taking to build resilience is the norm.

2

Increase employment and vocational education and training opportunities for people with a learning disability

Working together, we will raise aspirations in terms of what can and should be achieved in relation to education, employment and training from an early age for all people with a learning disability. We will increase and promote the education, employment and training opportunities available. We will work with local service providers and businesses to increase the range and nature of skills and training opportunities available across pathways, sector and qualifications, ensuring the support to individuals, their families and carers meets need and secures appropriate outcomes to access employment.

3

Provide a range of good quality housing and support options for people with a learning disability with a clear pathway on how to access them

People with a learning disability and their parents and carers will be able to access good advice, information and support to help them make choices over where they live and know how to access housing. We will commission a greater range of local supported living accommodation which is based on population demand and need, in areas with easy transport links and close to family networks. There will be a greater focus on developing independence across the whole system to support people with a learning disability which will also improve processes and pathways to housing.



Promote independence - ensuring people are safe and connected to their community

People with a learning disability and their parents and carers will be able to access good information and advice on what is available to them within the community. We will look to encourage the development of more community network clubs and groups and promote existing ones. We will provide more life skills training for people with a learning disability and look to work with our partners and the community to improve access to existing community resources and facilities to meet their needs. We will have a focus to ensure people with a learning disability are safe in the community. We will look to address the key issue of the shortage of Personal Assistants and to develop more individual service funds for people as an alternative option to direct payments.



Promote support networks for family, friends and parents and carers who support people with a learning disability

We will increase opportunities for parents and carers of people with a learning disability to get together and support each other. We will look to use some council buildings to enable these networking events to take place. We will set-up a think-tank steering group with representation from parents and carers to enable joined-up, creative thinking in the future design of services. We will also look at how we can make better use of the share the care schemes for children and adults with a learning disability to support parents and carers.



Work in partnership with health to deliver better health and wellbeing outcomes for people with a learning disability and their parents and carers

Working alongside health colleagues, we aim to increase the number of people with a learning disability who access their annual health checks, screening checks and other health checks. We will work together to reduce health inequalities for people with a learning disability in South Gloucestershire.

In this strategy we use "parents and carers" to refer to the wide support network for people with a learning disability, including friends, family, parents and carers.

8 Actions and outcomes





Effective planning for smooth transitions for young people preparing for adulthood.

This links closely to the Strategy for Children & Young People 0-25 years old with Special Educational Needs and Disability (SEND) in South Gloucestershire 2018 - 2023 priority "Plan ahead for smooth transitions."

LISTEN START EARLY CULTURE CHANGE Ensure the views of young Start preparing children Change the culture and people with a learning with a learning disability for language within our disability are listened to and adulthood at a much earlier learning disability system. acted upon; enable them to Promote positive risks stage. make choices and have some to build self-esteem and control. resilience. Work on the basis of a general 'presumption of achievement.'

"Parents and carers often have little or no info about moving into adults' services, how to get a social worker or understanding how funding works. Perhaps a DVD could be put together?" (Parent/Carer) "There is more they could do to tell us about being an adults – like how to make an appointment with our doctor. We did a little bit about money skills, but not the stuff like how to open a bank account. I get confused about my benefits. This should be made easier to understandthey could teach us more about doing things online. There is a lot of stuff my parents do for me – which if it was made more simple I could myself." (Adult with LD)

"Learning to go to the shops on their own gave independence and self-belief, increasing confidence and resilience." (Parent/Carer)

"I want to get my Masters in Mental Health" (Young Adult aged 21)

KEY ACTIONS

- Support the development of more selfadvocacy services that young people with a learning disability can access, considering the different types of media that can be used to support engagement. Provision to include the option for a Positive Peer befriending programme.
- Engage more with schools, colleges and community groups to enable young people to be more involved in the co-production of the future design and promotion of services that will build confidence and self-esteem for young people.
- Start conversations about transition planning with people with a learning disability and their parents and carers from year 8. This would include conversations about the adult services offer.
- Increase the rollout and use of transition assessments for young people with a learning disability.
- Plan for transition earlier, ensuring timely reviews especially for those with complex needs, and identifying clear timely transition goals and outcomes. Provide more taster days to visit provisions and settings.
- Have a focus on practical independence training within education and within the community.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?*

- The voice of young people with a learning disability will be listened to and included in their transition assessment, plans and reviews.
- Young people with a learning disability will feel more empowered to speak up about what is important to them.
- Young people with a learning disability and their parents and carers will have a clear understanding of their transition plan with clear goals and outcomes.
- Young people with a learning disability with be encouraged to think the possible and be encouraged to take positive risks, developing their self-esteem and independence.
- Young people with a learning disability will have more access to practical independence training which will prepare them better for the daily tasks of adulthood for example shopping, cooking and money management.
- Young people with a learning disability and their parents and carers will have access to good information and advice including case studies and have more knowledge of what is available to them.

*please refer to Appendix 2 – Long term performance indicators for more information on how we are planning to measure some of the changes.

My family did help me to learn new things, but they were worried about letting me go out to places on my own. I had to wait for them to take me places, but I wanted to go on my own. The support workers are a good help. They help me to learn new skills. There is a lot of stuff I need to learn and when I do learn they also remind me as I'm no good at remembering things or time management. I need to get better, but it's difficult." (Adult with LD)

"I want my children to fee there is hope for them and not to give up."

"I want to be a teaching assistant" (Young Person aged 8)

PRIORITY 2



Increase employment and vocational education and training opportunities for people with a learning disability.

RAISE ASPIRATIONS

Raise aspirations in terms of what can and should be achieved in relation to education, employment and training from an early age.

INCREASE AND PROMOTE OPPORTUNITIES

Increase and promote education, employment and training opportunities.

Work across the system to increase the range and nature of skills and training opportunities available across pathways, sectors, qualifications.

SUPPORT

Increase the support to individuals and their families and carers. Ensure that support meets need and secures appropriate outcomes to access employment.

"People not giving us a job.
People don't know what it's
like to have a learning disability.
It can be difficult, but with a
bit of help we are as good as
anyone else. People may think
we can't do the job or will be
extra work for the company."

"People should tell us about the stuff in the survey

– like where to get support to do a job, how to
retrain to do a different job or how to get work
experience. Talking about jobs etc. at school is ok,
but things change and they need to tell us again
when we leave college and get older. It takes longer
to understand all of this." (HIVE focus groups)

"Help from people to tell me the jobs I could do or teach me."

"I still get too confused about whether people can have a job and still get benefits. I worry my money would stop even if I have a part time job."

"I thought apprenticeships were just for people leaving school, but I would like to do it if it could help me get a job. I don't think Internship would be good as I volunteer instead."

KEY ACTIONS

- Work with partners in education and health and social care to raise aspirations regarding employment, starting with early years and promoting ability not disability.
- Increase the range of learning opportunities, courses, and qualifications by increasing the number of traineeships, work experience, supported internships and supported apprenticeships.
- Take a whole-system approach to improving employment rates among people with a learning disability. This will involve the council working across departments and with partners including education, job centres, employers, one stop shops and voluntary and community sector organisations (VCSOs).
- Work both regionally and locally to engage and support employers so they are confident and have the capacity to establish opportunities for those with a learning disability including how career progression for people with a learning disability can be developed and promoted.
- Work with providers and community support services to encourage more sustained and wrap around support for people with a learning disability to gain and maintain employment.
- Advocate for a change in timings of free bus travel associated with the Concessionary Diamond Travelcard, to help reduce transport as a barrier to employment.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?*

- There will be an increase in the range of employment opportunities for people with a learning disability. Employers will feel more supported and inclined to provide more employment opportunities and career pathways for people with a learning disability.
- The language used by professionals will change to focus on promotion of ability and high aspirations from an early age.
- There will be increased opportunities for people with a learning disability to access vocational pathways into employment such as work experience, volunteering, traineeships, supported internships and supported apprenticeships successfully leading to employment.
- Careers information will be available in an accessible format for people with a learning disability and people will know where to access support to find out range of options available to them to access employment.
- There will be more wrap around support for people with a learning disability and employers to maintain a placement or employment.

*please refer to Appendix 2 – Long term performance indicators for more information on how we are planning to measure some of the changes.

"Ensure drivers are educated about how patience and clear communication can help someone with a learning difficulty." (Adult with LD)

"Employers not knowing how to best support a person with a learning disability." "More information to be given about apprenticeships e.g. how old you have to be, where to look for these and what support would be given."

"If the parents don't know how to find out what's available, how will my son?" "Not all things start after peak hours. Transport support should not be limited to 9-5" (Parent/Carer)





Provide a range of good quality housing and support options for people with a learning disability with a clear pathway on how to access them.

IMPROVE HOUSING ADVICE

Improve the provision of advice, information and support to help enable people and their families make choices over their housing and know how to access housing.

INCREASE OPTIONS

A greater range of local supported living accommodation which is located in areas with easy transport links and close to family networks.

PROGRESSION MODEL

Develop a progression model across the whole system to support people with a learning disability to be as independent as they can possibly be.

INTEGRATED PROCESS

Join up processes and pathways between housing, social care and education departments, as well as health and the voluntary sector.

"I live with a carer, but it would be good to have my own place so I could do all my own housework, have people and family to visit and have my boyfriend [to come round] and spend time on my own." (Person with LD, 45-54) "I moved into my new house just before lockdown and I have managed well. I had help from a support worker, but have learnt lots of new skills. I like doing my own thing. No one to tell me when to clean. I do it when I want."

"[A training flat] is an opportunity to understand if it is right for them before making a decision – to understand their needs better before commissioning the package in full." (Professional/Commissioner survey)

"Secure parks with toilets and changing areas."

"Support living options need to be shared by agencies at an earlier stage to both staff and carers."

(Professional/Commissioner)

KEY ACTIONS

- Work with people with a learning disability and their families to clearly explain the available accommodation options. Explore options to enable a single point of access to housing options for people with a learning disability.
- Develop effective partnerships with housing and support providers to ensure a wide range of housing options and support is available including adapted accommodation.
- Offer different funding models to meet the forecasted need for people with a learning disability - feeding into the departmental commissioning plan and the council housing strategy.
- Ensure that appropriate, flexible local accommodation options are commissioned for people with a learning disability who have multiple complex needs.
- Support education provision and the voluntary sector to work with housing providers to develop their own supported living and independence training schemes.
- Look to develop opportunities for people with a learning disability to access a learning flat.
- Work with housing and support providers to deliver a sustainable supported living framework providing an environment that builds independence among people with a learning disability. Ensure the use of assisted technology is promoted and maximised.
- Advocate the increased use of a social value clause within the procurement and planning process to ensure effective contribution around housing for people with a learning disability, e.g. availability of housing stock, open spaces, transport links, employment opportunities.
- Ensure safe accommodation is provided for survivors of domestic abuse who have a learning disability via the council domestic violence and abuse strategy ensuring people know how to report and access support.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?*

- People with a learning disability and their parents and carers will have a clearer understanding of how to access housing and will be able to access the support they need at the time when it is needed.
- Working alongside parents and carers, people
 with a learning disability will be encouraged
 to trial independence, for example through
 accessing a learning flat to build the necessary
 confidence to live independently.
- There will be a range of supported living options available for people with a learning disability to meet their needs and people with a learning disability will feel happy and safe.
- People with a learning disability and their parents and carers will have the chance to be involved in the co-production of the design of any new housing scheme.
- Individual service funds and direct payments will become a real offering for people with a learning disability to have an input control into the management of their housing support.
- *please refer to Appendix 2 Long term performance indicators for more information on how we are planning to measure some of the changes.





Promote independence ensuring people are safe and connected to their community

COMMUNITY SUPPORT NETWORKS

Better use of council and partner buildings to enable community support networks to develop.

LIFE SKILLS

Have more of a focus on life skills training for people with a learning disability.

ACCESS TO COMMUNITY RESOURCES

Improve access to existing and future community resources, ensuring people with a learning disability is safe in their community.

PERSONAL ASSISTANTS

Increase the number of Personal Assistants (PAs) who can be employed to work via direct payments and develop more individual service funds as an alternative offering.*

"My son has also been offered the opportunity of attending a summer holidays forest school group for pre-schoolers with additional needs, which has been incredible!"

"All my life my family have helped me, but they were also worried about me living on my own and doing things for myself. People at day services and clubs are helpful and tell us about other stuff we can do to learn – like training courses that are running in different places – like The Hive." (Adult with LD) "I would also like to see more mainstream leisure centres to offer swimming options, gym or sports clubs that are in the same price range as other mainstream clubs, as well as going on peer group rather than age group which we cannot access."

"I didn't understand too much about benefits and I did have problems with filling in forms for PIP – they could have told us more about this at college. People are confused about what happens to their money if they get a job. My support worker is not sure what happens of if I am allowed to get a job." (Adult with LD)

"We need practical things cooking, cleaning, shopping, work life balance, finding a job they enjoy, getting employed, CV, relationships."

^{*}for those who meet the eligibility criteria.

KEY ACTIONS

- Enable more self-run networking schemes, for example stay and play schemes, clubs or holiday clubs by offering the use of council and partner buildings as host buildings especially those with adequate changing facilities.
- Work across education, health and social care as well as voluntary and independent sector to develop more life skills training options to promote independence.
- Develop a learning disability-friendly ethos locally to include awareness raising, training and a network of local champions to ensure that local communities and services are more aware and supportive of people with a learning disability and provide safe spaces for people with a learning disability to access within the community.
- Ensure there are services to safeguard people with a learning disability from being exploited in criminal, sexual, serious violence and/or modern-day slavery activity.
- Develop support for services and organisation about their responsibilities to provide reasonable adjustments for people with a learning disability and audit how these reasonable adjustments can be provided.
- Advocate large public venues in new developments, include adequate disability changing facilities to administer personal care.
- Increase inclusive play as part of public open spaces with input from parent and carer groups.
- Provide more support when filling out forms e.g. job applications, benefit applications.
- Working across health and social care, jointly redesign pathways and commission services that support people to remain in the community.
- Working with partners and providers, develop and promote the employment market for Personal Assistants and provide support around recruitment.
- Develop and promote individual service funds as an alternative to direct payments.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?*

- There will be greater choice available in accessing community activities during the day and evening which will be more inclusive.
- People with a learning disability and their parents and carers be able to find out what's available in their community via a variety of means, for example an online directory.
- The independence of people with a learning disability will increase though a range of life skills training.
- People with a learning disability will be able to access support to help fill out forms and navigate the system within the community.
- There will be a promoted directory of Personal Assistants who are looking for work.
- There will be more support around recruiting and employing a Personal Assistant.
- Individual service funds will become a real choice for eligible people with a learning disability to have more say and control in their support package.
- There will be more changing facilities in the community to access for personal care and there will be more inclusive play schemes.

*please refer to Appendix 2 – Long term performance indicators for more information on how we are planning to measure some of the changes.





Promote support networks for family, friends and parents and carers who support people with a learning disability.

HAVE YOUR SAY	SHARE THE CARE	INCREASE NETWORKING OPPORTUNITIES	MENTAL HEALTH AND WELLBEING
Set up a think-tank steering group with all stakeholders in order to allow joined-up, creative thinking.	Better use of the share the care schemes for children and adults with a learning disability.	Increase opportunities for parents and carers of people with a learning disability to get together and support each other.	Increase and promote the offering for parental mental health and wellbeing.

"Easily accessible support groups in more areas for those who can't drive." (parent/carer)

"A phone line.
Someone I can email.
Anything really.
It is very lonely."
(parent/carer)

"We have been attending Little
Treasure catch-ups through
lockdown which has helped so much
in keeping behaviours in perspective.
The lived experiences and knowledge
that comes from other families
is invaluable to understanding
and implementing support."

"Acknowledgement that older parents need support." (parent/carer)

"I attend twice monthly meetings with Little Treasures through a video calling platform. This helps me to offload and talk to parents in a similar situation and I know I am not alone. It's also brought me in contact with other charitable organisations like Bibic that have helped my son to be assessed."

KEY ACTIONS

- Enable parents and carers to have a better voice by being represented in an innovative think tank group.
- Improve the service offering of the existing share the care scheme, shared lives schemes and respite provision.
- Enable community and network groups to access more professional advice and guidance through scheduled question and answer sessions - with a particular focus on early years.
- Working with public heath, promote and expand the range of mental health and wellbeing services for parents and carers.
- Work with partners particularly the voluntary and community sector on our desire to develop support for siblings of children/ young people with a learning disability.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?*

- Parents and carers' voices will be listened to and will be represented at think tank meetings.
- There will be more opportunities to access share the care (children's) and shared lives (adults) schemes to help develop independence for young people and help parents and carers get the respite they need.
- Parents and carers will be able to support each other through shared life experiences.
- Parents and carers, through recognised networks, will be able to access professional advice and guidance.
- Parents and carers will know where to access support for their mental health and wellbeing.
- There will be improved wellbeing for siblings of people with a learning disability resulting from support for around schoolwork, home life and friendships.
- *please refer to Appendix 2 Long term performance indicators for more information on how we are planning to measure some of the changes.
 - 80% of parents and carers agreed that there should be more opportunities for informal support and networking with other parents and carers of children with a learning disability at pre-school age.
- % of parents and carers believe a think tank steering group would be useful.
- 65% of parents and carers said they would be interested in being a member.

All the professionals surveyed also thought a think tank would be useful, with only one respondent not interested in being involved.

In this strategy we use "parents and carers" to refer to the wide support network for people with a learning disability, including friends, family, parents and carers.

PRIORITY 6



Work in partnership with health to deliver better health and wellbeing outcomes for people with a learning disability and their parents and carers.

HEALTH CHECKS	ADDRESS HEALTH INEQUALITIES	PERSONAL HEALTH OPPORTUNITIES	RSE INFORMATION
Increase the number of people who access their annual health checks, resulting in health action plans.	Address health inequalities for people in South Gloucestershire and develop creative and flexible health options for people with a learning disability and their parents and carers.	Advocate opportunities regarding personal health budgets.	Improve access to information and services around relationships and sex.

"I have my annual health check every year and I go there with my Mum. It is very good. They always tell me what they are going to do like my blood pressure, listen to my heart so I understand not to be frightened."

(Adult with LD)

"As well as training we need more things to help us meet new people like events for singles. It's no good talking about relationships and stuff if you can't find anyone. My Mum won't let me look for a boyfriend on dating sites as it's dangerous, but somewhere safe for us to meet other single people would be great." (Adult with LD)

"I did get told about it at school.
I don't think I need more
information, but I may do if I
get a boyfriend. They could
have told us more about it at
college." (Adult with LD)

"People with a learning disability are vulnerable, but they are entitled to a fulfilling life." (Parent/Carer)

More information in Easy Read so I can look at it on my own." (Adult with LD) "I cannot always read the letters sent to me. Sometimes the signs are not big enough to see when I go to these places."

"They could get someone from dentists to come to clubs and day centres to give them check-ups."

KEY ACTIONS

- Support the work of the clinical commissioning group (CCG) and partners in improving the uptake and quality of annual health checks and health action plans for people with a learning disability across GP practices in South Gloucestershire. All people with a learning disability who are on the GP register should be offered an annual health check in a format that they understand. This should result in a health action plan. Ensure adequate measures are put in place to monitor the progress.
- Improve the uptake and quality of accessing core health and screening services such as dentist, optician, cancer screening and vaccine programmes for people with a learning disability, ensuring they have appropriate support to access these preventative services and treatment where required. Ensure that accessible information is provided and promoted about these services to desensitise the process and stress the importance of them for people with a learning disability.
- Ensure services know where they can obtain support to train their staff and get advice around reasonable adjustments, mental capacity and best interest decisions.
- Advocate and promote the opportunities for how personal health budgets can be utilised. Consider the use of pooled direct payments or individual service funds between health and social care.
- Develop sex and relationship training for practitioners, as well as for people with a learning disability, their parents and carers and schools. This should include the development of more creative resources to support conversations about sex and relationships with both people with a learning disability and their families.
- Provide good information and advice around healthy lifestyle including healthy meals and cooking.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?*

- People with a learning disability will know what an annual health check is and how to access one.
- More people with a learning disability will access:
 - annual health checks and will have health action plans
 - preventative health services for example dentist and optician
 - screening and vaccination services.
- Reasonable adjustments will be made by services to accommodate the needs of people with a learning disability.
- People with a learning disability will have accessible information on core services to help explain what will happen when they attend.
- Heath outcome measures for people with a learning disability will improve.
- People will know about the options on how people with a learning disability can use their health budgets (if eligible).
- There will be a variety of training and accessible information on relationships and sex that people with a learning disability and their parents and carers can access. There will be more open discussion by professionals on the subject.
- People will eat more healthily improving their health and wellbeing overall.

"People teaching us about it as I don't want to ask staff stuff like that." (Adult with LD)

"I would like to do another course if it wasn't embarrassing, but not just about sex. They didn't really tell us about finding the right person." (Adult with LD) **85**% of parents and carers said they were not familiar with a personal health budget (if eligible) that gives you more control over health and wellbeing choices. Only one person had been given information about a personal health budget.

ENABLING ACTIONS



To deliver these prioritise there are several actions that underpin this strategy. These have been captured as enabling actions.

INFORMATION AND ADVICE	BETTER DATA	PROGRESSION	DEVELOPMENT	RESOURCES
Improve the provision of information and advice.	Develop better data sets to inform future com- missioning and closer links to health.	Ensure com- missioned services are best value for money and promote inde- pendence.	Deliver a workforce development programme that has a focus on working with people with a learning disability.	Ensure adequate planning takes place to meet the future predicted growth of people with a learning disability.





KEY ACTIONS (SHARED ACTIONS ACROSS ALL OUR PRIORITIES)

- Improve our information and advice provision ensuring information is accessible, comprehensive, up to date and easy to find and understand for people with a learning disability, and parents and carers, using a variety of media including digital and face to face.
- Improve the recording of social care and health data for people with a learning disability, providing the necessary subcategories to identify future need, demand and patterns - so that commissioning services can be led by data regarding need.
- Develop an All-age commissioning plan that ensures future commissioned services are co-produced, best value for money, promote independence, use assisted technology, and is fundamentally driven by delivering outcomes.
- Deliver a workforce development programme that has a focus on working with people with a learning disability. Promote taking positive risks in the language we use as professionals, raising aspiration and delivering our priorities.
- Ensure adequate planning takes place to meet the future predicted increase in the number of people with a learning disability.

HOW WILL YOU KNOW IF WE ARE SUCCESSFUL?

- People with a learning disability and their parents and carers can access information about opportunities and will know what is available to them and how to access it.
- There is a range of material including video case studies on specific themes available to view online.
- There is a planned schedule of themed drop-in sessions that is published online for people with a learning disability and parents and carers to access across a range of venues. We will provide a co-ordinated response around information across health, education and social care.
- There will be a better range of services across health and social care to meet demand and need.



9 The All-age learning disability offer

Everyone has a responsibility to ensure people with a learning disability lead a happy and fulfilled life and are encouraged to reach their full potential.

We aim to deliver a system culture that starts from a presumption of achievement, so that ability is looked at first in every single person from an early age into adulthood.

Together we aim to develop an environment where people with a learning disability and their families, carers and support workers have easy access to the right information or support they need, when they need it. We want people to be well informed, in control of the important decisions they need to make and able to address issues and problems without unnecessary contacts or interventions from services.

The all-age learning disability offer is not about one setting, agency or service. It includes providing information and advice so that people with a learning disability and their parents and carers can access the wide range of opportunities they need to thrive in their communities. Examples include access to safe green spaces in which to play, appropriate housing, financial security, good quality universal services and settings such as nurseries and schools, health services and leisure services. The offer will reflect the significant changes that happen from conception to adulthood, to ensure it is relevant as needs change.



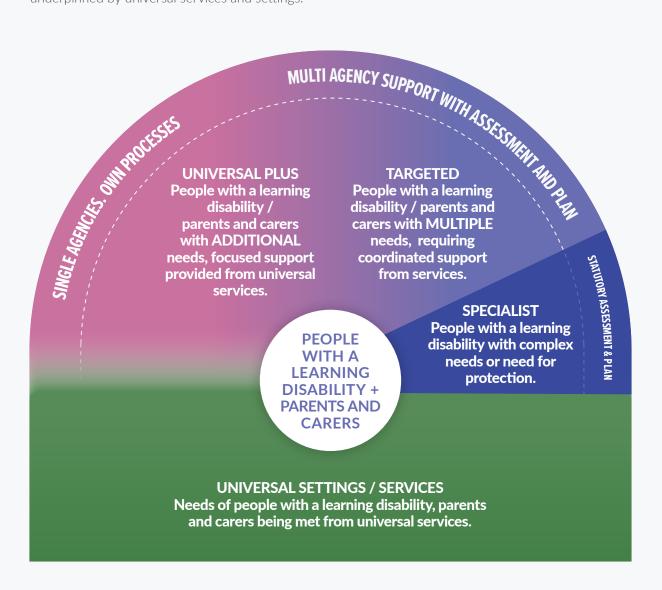
THE KEY ELEMENTS OF THE ALL-AGE LEARNING DISABILITY OFFER WILL INCLUDE

- Information that is easy to find, helpful and comprehensive. Online local information will be available for everyone. There will also be access to information within communities such as community centres, leisure centres, health centres, schools/educational settings and town and parish council buildings. There will be a focus on delivery of information not only via the web but face-to-face.
- Culture a system culture that looks at ability first and encourages people with a learning disability to meet their full potential. Working with families, carers, providers and professionals to support positive risks in life.
- Core offer a description of the core range of available opportunities for people with a learning disability, as well as additional opportunities and services in specific communities that are responding to local needs.
- Age-related focus supporting young people and adults through a progression model to be as independent as they can be.
- Focus on independence supporting children and young people through significant points of transition which for some can be a difficult time. This includes transitions at key stages of education, between services and to adulthood where opportunities and services can be different from those accessible up to the age of 18.
- Working together a model for working together that keeps people with a learning disability at the heart of any work and is well coordinated.

Response to Levels of Need

Window of help

The diagram below aims to illustrate different levels of need and response. These are always underpinned by universal services and settings.



In this strategy we use "parents and carers" to refer to the wide support network for people with a learning disability, including friends, family, parents and carers.

AT ANY LEVEL IN ANY SETTING:

Early identification of need, when things are not going well or there is a risk of things not going well. Engaging with children, young people and adults with a learning disability and families in conversations including what information or help they may need.

UNIVERSAL

The majority of children, young people and adults with a learning disability and their parents and carers will have access to the opportunities they need to thrive within universal settings. This includes education and health settings and in communities such as parks, libraries and leisure facilities.

UNIVERSAL PLUS

Universal settings provide additional information, advice, support, guidance or services for people with a learning disability and their families where needed, or will link to another agency or service for particular information or advice. Each setting will use its own processes to identify and assess needs, involving people with a learning disability to agree and review actions.

TARGETED

The identified, additional needs of a child, young person or adult with a learning disability and their family are best met from a coordinated, multi-agency approach, regardless of the level of service (i.e. could be a range at universal, or universal plus, or could include a specialist service).

STATUTORY AND SPECIALIST SERVICES

These services are generally accessed following specific assessments to establish need and criteria for the service. Universal services remain informed and involved, to ensure that children, young people and adults with a learning disability and their families continue to receive ongoing support, regardless of whether the specialist service remains involved.

Please see an outline of the types of services that can be accessed within the All-age learning disability offer in Appendix 3.

10 Making it happen

Delivery of the All-age learning disability strategy will be detailed in an implementation plan covering the life of this strategy (2022 -2027) and will involve all key partner organisations and departments across the local authority. This will be a dynamic plan which will be reviewed and updated on a sixmonthly basis to ensure that it is able to adapt to the pace of progress, as well as new developments, research and opportunities.

The governance of the All-age learning disability strategy will be managed by the Children, Adults & Health Directorate.

The Learning Difficulties Partnership Board will have close oversight and scrutiny of the strategy which reports into South Gloucestershire Health and Wellbeing Board.

HOW WILL SUCCESSFUL OUTCOMES BE MEASURED?

We will ultimately know that our All-age learning disability strategy is effective when people, their families and carers confirm that it is making a difference to their lives. Our learning methods for measuring success will include:

- Six-monthly update reports on delivery of strategy actions.
- Feedback from people with a learning difficulty and their parents and carers on a day to day basis and via more formal surveys.
- Individual case studies for key priorities.
- Improved outcomes measures for people with a learning disability.
- Staff training and performance management records regarding mandatory training.
- Performance indicators reported to the Children Adults & Health CAH Directorate, relevant Cabinet Member and other boards (please refer to appendix 2).

Appendix 1

Definition of subcategories of a learning difficulty vs learning disability

Under the Special Educational Needs (SEN) codes for children and young people aged 0-25 of 'moderate learning difficulty', 'severe learning difficulty' and 'profound multiple learning difficulty' all refer to generalised learning difficulty of varying severity. Taken together they can be interchangeable with the adult health and social care term 'learning disability'. However, people with specific learning difficulties such as dyslexia or those with a higher-level autistic spectrum disorder (sometimes also known as high-functioning autism) who have average or above average intelligence do not have 'learning disability'.

Using labels for learning disability can be both helpful and unhelpful at the same time. It can be helpful to the person, their family or those people who work with them to understand their needs and what support they might need. However, the categories can be unhelpful if the person with the learning disability is just seen as that label, for example 'profound learning disability'.

The continuum of learning ability

In an attempt to explain the wide range of different abilities the idea of a continuum of learning has been used for some time. The terms currently used are shown on the continuum below and are then described in more detail.



PROFOUND

People with profound intellectual and multiple disability, or profound and multiple learning disability (PMLD), can be some of the most disabled individuals in our communities. They will characteristically have a very limited understanding. In addition, they may have multiple disability, which can include impairments of vision, hearing and movement as well as other challenges such as epilepsy and autism. Most people may need support with mobility and many have complex health needs requiring extensive support.

People with profound intellectual and multiple disability may have considerable difficulty communicating and characteristically severely limited understanding. Many people express themselves through non-verbal means, or at most through using a few words or symbols. In addition some people need support with behaviour that is seen as challenging, such as self-injury.

SEVERE

People with a severe learning disability often use basic words and gestures to communicate their needs. Many need a high level of support with everyday activities such as cooking, budgeting, cleaning and shopping, but many can look after some if not all of their own personal care needs. Some people have additional medical needs and some need support with mobility issues

MODERATE

People with a moderate learning disability are likely to have some language skills that mean they can communicate their day to day needs and wishes. People may need some support with caring for themselves, but many will be able to carry out day to day tasks with support.

MILD

Someone with a mild learning disability is usually able to hold a conversation and communicate most of their needs and wishes. They may need some support to understand abstract or complex ideas. They are often independent in caring for themselves and doing many everyday tasks. They usually have some basic reading and writing skills. People with a mild learning disability quite often go undiagnosed. Most people may still need appropriate support with tasks such as budgeting and completing forms.

Appendix 2

Long term performance indicators

Whilst effective help at the right time should have a positive impact on the performance indicators, it will not be solely responsible for delivering these outcomes as there are a range of external factors which will also have an impact. The measures below are based on the All-age learning disability strategy 2022 -2027 and from outcomes which are already tracked by several different boards and forums. All these proxy indicators are potentially linked to the success of the delivery of this plan over time and will not necessary be available from the start of implementation 2022.

To enable focus on a small number of key targets, those in the first category have been identified as the most relevant in South Gloucestershire. These will be the focus of initial monitoring.

PERFORMANCE INDICATORS - PRIORITY TARGETS FOR SOUTH GLOUCESTERSHIRE

- Increase the % of young people with a learning disability known to social care who receive a transition assessment.
- Increase % of people with a learning disability in paid employment for those known to social care.
- Increase % of people with a learning disability of a working age living independently in stable accommodation.
- Decrease number of people with a learning disability on supported living waiting list over 90 days.
- Increase number of staff attending disability awareness course.
- Increase number of people with a learning disability and parents and carers attending scheduled drop in sessions.
- Increase the number of parents and carers who know where and how to access wellbeing material (to be monitored through a parents and carers survey).
- Increase % of people with a learning disability receiving their annual health check.*
- Increase % of people with a learning disability receiving a health action plan.*
- Increase % cancer screening rates for people with a learning disability for:*
 - Cervical cancer
 - Breast cancer.
- Increase number of people with a learning disability accessing joint personal health and social care budgets under section 117 arrangements.
 - *Some of these system indicators are not currently available. Our aspiration is to work with health partners over time to be able to report against these indicators for the learning disability cohort.

OTHER PERFORMANCE INDICATORS

- Increase the number of young people with a learning disability who have an EHCP who access advocacy services.
- Increase % of young people with a learning disability EHCP year 9 reviews attended by social care or education officer.
- Increase % of people with a learning disability in:
 - traineeships
 - supported internships and/or
 - apprenticeships.
- Decrease number of people with a learning disability and young adults living in out of authority residential care.
- Increase % of people with a learning disability accessing housing via home choice.
- Increase number of people with a learning disability accessing personal health budget*
 - Direct Payments
 - Individual Service fund.
- Increase number of people with a learning disability accessing personal social care budget
 - Direct Payments
 - Individual Service fund.
- Increase number of contracts that include reasonable adjustments clauses.
- Increase number of organisations that provide data returns for equality impact assessment dashboard input.
- Decrease the % of "did not attend" appointments for people with a learning disability.

^{*}Our aspiration is to work with Health colleagues over time to be able to report against a learning disability cohort. some of these system indicators are not currently available.



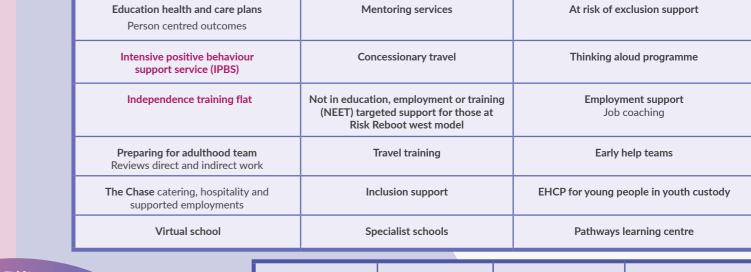
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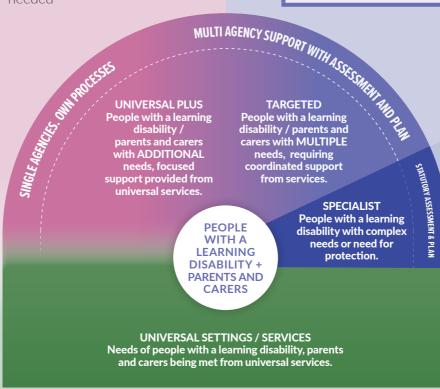
needed

development or growth

Speech & language therapy	Community paediatrics	Access to work			
Mindyou Emotional wellbeing website	Parenting programme(s)	Supported Internships/ traineeship programme(s)			
Community transport	Peer support and befriending Programme(s)				
Blue badge	Relationship and sex courses	Supported apprenticeships			
Wellbeing service NHS and VCSE	Hate crime training	Employability provision Prep for work			
Expand for parents and carers	Themed face to face drop in / QA events	Volunteering matters website			
Money management	Community programmes and project and learning	Assisted tech hub			
Mental Health Voluntary services in the community	to promote life skills Resilience skills development and training	Celestine home adaptation property			
FRANK Website (Drug information help and advice)		Homechoice social housing			
Additional support in schools	Local foundation learning	Access creative college			
Education psychologist support within schools	programme at colleges Prep for work and life / progression into independence	Information and advice to access Higher Education			
Transition assessment	Department of working pensions DWP - DEA	WE Work for Everyone (Career navigators)			
Youth service activities for SEND	Disability employment advisor	Works4Youth employment hub			
Advocacy services	Hospital passport	Voluntary support and advice groups			
West of England w Drop in Job clubs Job coaches,					

Appendix 3 All-age Learning Disability Partnership offer





Adults mental health services	Care Act Assessment	Residential / nursing homes	Independent schools & colleges (if need not met locally)		
Children's / Adult social care Service	Local building based services	Riverside adolescent unit	Community learning disability team (CLDT)		
Shared lives / Share the care	Supported Living Schemes	Occupational therapy equipment	Bristol intensive response nurse (BIRT),		
Short breaks	Support in own home Shared housing accommodation	Children with a learning disability team / SSCLD	response to people in crisis, community nurses, creative		
Direct payment Individual service funds	Future for me programme	Children therapists Occupational therapy /	therapists, dietitians, occupational therapists, physiotherapists,		
Local specialist residential accommodation	Resettlement, mental health, learning and work and participation	physiotherapy / speech and language therapy	psychologists, speech and language therapists, transition advice		
Blackhorse House supported living moving on scheme 24	Child adolescent mental health service	Personal budgets and Direct Payments Health and Social care			
hour managed front door Waking nights 24/7 support (move on in 12 months)		Continuing healthcare (CHC) Children and adults			

Midwives (pre birth & delivery)	Dentist	Early years settings & nurseries	Schools, colleges and university	schoo	Careers planning in schools	Post 16 further education and higher	National careers service	Department for working pension employment / Benefits	Youth clubs	LGBTQ	Off the record outreach in schools Resilience lab
Health visitors u5s	Health clinics	Childcare funding vouchers	health and economic education (PSHE programme)	Breakfast clubs & After school activities	Vocational profile r workbook	education local provision	Employment fairs and events		Holiday clubs	BME support	One you South Gloucestershire
GP / Practice nurse Annual health checks / action plan	Adults hospitals 16+	Free prescriptions and other health benefits		Schools and colleges work experience programme	Student loans / student finance England	Vocational education	Job centre	Independent financial support agencies	Social groups / clubs	Libraries membership & events	Family friends / carer support network
Optician	Children's hospital	Police	School / community Health Nurse	Public health nurses (school nurse)	Community learning	Duke of Edinburgh awards	Citizen advice bureau	Online support hub	Voluntary groups	Leisure and sports facilities	One stop shops LD triage
Other related infor	mation and advice	Information, advice and guidance portal	SEND local offer	Compass (Early Help) information	Care leavers offer	Early help partnership offer	Health promotion campaigns info and advice	Children's community health services	Adult services information and advice	Community learning disability team (CLDT 18+)	Community learning course 18+



