

## Valuing People Now:

### Partnership Board annual self assessment report template 2009-10

Please send your completed form to your Valuing People Programme Lead by 31 March 2010.

If you have any queries about your form, please contact your Regional Valuing People Programme Lead.

#### How to complete your form

1. Make sure you've included the name of your Partnership Board in the filename. This will help us to keep track of all the forms sent back to us.
2. Complete the form on your computer. You can key your answers into the spaces provided, and also copy and paste information if appropriate. You can save your form, so you don't need to complete it all in one go. **Always** make sure you save the form as you work.

#### What to do when you've completed your form

When you've completed your form, you need to share it with the members of your Partnership Board so that they can sign to say they agree with the information you've provided.

1. Save the file and print copies for all members of your Partnership Board. You can email the form to the members as long as they'll be able to open it.
2. Ask all of the people listed in section 20 of your form to date and sign the form to say they agree with the information you've provided. You can use electronic signatures or ask people to sign a hard copy. Make sure you keep the signed copy safe as proof that the members have signed.
3. Email the final, agreed version of the report to your Regional Valuing People Programme Lead.

#### What happens next?

Once they have all the forms, the Regional Valuing People Programme Leads will put together the regional overview report for the National Learning Disability Programme Board.

You can publish your report in April 2010 if you wish. Please use your form to help with future planning.

#### Regional Valuing People Programme Leads

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North East

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Valuing People Now: Partnership Board annual self assessment report template 2009 - 10

- All figures requested below relate to adults with learning disabilities (aged 18 and above unless otherwise stated) who are known to services (local authorities and/or health services) and their families. (Care should be taken not to double count those people known to both local authorities and health services.)
- All information to be collated from April 2009 to March 2010 data.
- The quantitative data should be drawn from existing data collections (see Appendix D in the full guidance document Good Learning Disability Partnership Boards for a list of sources). Health and social care data from national returns to be taken from the August 2009 figures.

1. Name of local authority and Primary Care Trust(s)
Northamptonshire County Council and NHS Northamptonshire

2. Local picture

Please give descriptions using full sentences or bullet points. Please give both amounts AND percentages, in all cases (where appropriate/possible).

**You may want to use information from your Joint Strategic Needs Assessment (JSNA) or Care Quality Commission Self-assessment return.** If your JSNA does not currently include this information, you may want to use the information you collect here to help with future assessments.

## 2.1 Description of area covered.

Please include:

- geographical spread
- whether rural or city
- local authority type, such as shire county, unitary authority, metropolitan district, London borough
- NHS bodies in the area
- Prison Partnership Board.

### 2.1

Northamptonshire is a Shire County which neighbours many other counties and has 7 districts and boroughs within it. It stretches from rural south Northamptonshire to urban Corby in the North and neighbours Cambridgeshire to the east and Warwickshire to the west.

There are 5 NHS bodies within Northamptonshire these being:

NHS Northamptonshire

Northampton General Hospital NHS Trust

Kettering General Hospital NHS Foundation Trust

Northampton Healthcare Foundation Trust

East Midlands Ambulance Service NHS Trust

There are 3 Prison Partnership Boards and 6 Crime and Disorder Reduction Partnerships in Northamptonshire

Northamptonshire County has a diverse population of 685 000 (estimated June 2008).

The county population has increased by over 50,000 since mid-2000, making it one of the fastest growing areas in the country.

There are large geographical area classed as Countryside and there are pockets of disadvantaged populations in urban areas in Northamptonshire.

The majority of people (441 000) live in areas that are considered Urban or Town and Fringe areas

About 14% of the Northamptonshire population live in rural areas.

There are seven clusters of urban areas (towns) across the county.

10% (1 in 10 people) of the county population (around 60,000) are said to be living in the bottom quintile i.e. the most deprived areas when compared to the rest of the country

## 2.2 Description of general population.

Please include:

- total population of adults aged 18 and above
- a breakdown of socio-economic status
- number of young people not in employment, education and training (NEETs).

2.2

The total number of adults aged over 18 living in Northamptonshire is 531 280 (June 2008)

Some of the social and economic considerations are:

Northamptonshire has a lower level of deprivation than England as a whole.

Corby and some of the smaller areas in the big towns have the most social needs.

People in the most rural areas have less access to services including hospitals and public transport is limited.

The demand for social housing in Northamptonshire is less than other areas in the East Midlands and the country but this changes a lot in different areas of Northamptonshire with Corby having the highest number of houses used for social housing.

Unemployment in Northamptonshire is going up quickly.

There are fewer houses with pensioners or older people in them than the rest of the country although this is going to change as the population increases.

There were a total of 21 260 young people aged 16-18 in Northamptonshire at 31<sup>st</sup> January 2010. Of whom 877 were Not in Education, Employment or Training (NEET).

## 2.3 Description of population of people with learning disabilities, aged 18 and above, known to services.

Please give the total population (number) of adults with learning disabilities known to services.

2.3

In March 2009, there were 1571 adults with learning disabilities known to Northamptonshire County Council. 150 of these people are over the age of 65

In December 2009, there were 1999 adults with learning disabilities known to General Practitioners (GP's).

It is therefore thought that there is likely to be no more than 2000 adults with learning disabilities known to services in Northamptonshire. During 2010/11, the process of checking GP data will be completed and checked against data held by the Council.

The detailed breakdown below is in respect of the 1571 adults known to the local authority.

## 2.4 Number of adults with a learning disability who are known to services (and percentages of total population as given in 2.2)

	Number	%
Age 18 to 64	1421	0.27
Age 65+	150	0.03
Male	916	0.18
Female	655	0.12

### Ethnic breakdown of adults with a learning disability (and percentages)

The ethnicity percentages are taken as a percentage of the population of adults with a learning disability NOT as a percentage of the total adult population of Northamptonshire.

Any other Asian Background	5	0.32%
Bangladeshi	1	0.06%
Indian	13	0.83%
Pakistani	5	0.32%
African	5	0.32%
Any other black background	3	0.2%
Caribbean	14	0.9%
Any other mixed background	4	0.26%
White and Asian	3	0.2%
White and Black Caribbean	8	0.51%
Any other ethnic group	6	0.38%
Chinese	1	0.06%
Any other white background	30	1.9%
White British	1464	93.2%
White Irish	7	0.45%
Information not yet obtained	2	0.13%

Total	1571
<p>Northamptonshire Learning Disability Partnership Board has funded a post specifically to understand and engage with people with learning disabilities and their families in BME communities. This post started in November 2009.</p>	
<p>In relation to the specific data requested below, at this time neither Northamptonshire County Council nor NHS Northamptonshire are able to supply this information. NCC is considering ways in which this information may be collected throughout 2010/11 and in future years .</p>	

The following three categories marked with a \* are mutually exclusive - please do not count more than once.

	Number	%
People with complex needs*		
People who exhibit behaviour that challenges services*		
People with learning disabilities who also have autism*		
Living with family carers aged 65+		
Who are parents		
Aged 18 to 25 in part-time education		
Aged 18 to 25 in full-time education		
Aged 18 to 25 in local education		
Aged 18 to 25 in residential education		

**2.5. How are the specific needs of people with learning disabilities highlighted in your JSNA met? Please give examples.**

The Northamptonshire Joint Strategic Needs Assessment (JSNA) tells us that Northamptonshire has the highest number of people with a learning disability when compared with counties with similar sized populations. The JSNA forecasts that:

\* The numbers of people with a learning disability will increase significantly by 2015 - by between 7 and 23 % throughout different parts of the County

\* The numbers of older people with a learning disability are forecast to increase by 28%

\* The numbers of people with Down's syndrome is estimated to increase by 7% by 2015. The majority of this increase will be in the 25-34 and the 45-54 age groups

\* The number of people aged 18 and over with autistic spectrum conditions in Northamptonshire (4300) is already higher than comparable counties. It is predicted that these figures will increase to 4600 by 2015

These numbers reflect the need to respond differently in terms of how we support this group of people in the future.

The wide-ranging requirements of these different groups of people are being considered in conjunction with both the recognition that people with a learning disability have the right to choice and control over all aspects of their lives and the reality of shrinking resources in the current economic climate.

This has resulted in ensuring a wide range of different support is available locally and includes:

- \* Community
- \* Accommodation based
- \* Employment
- \* Access to mainstream housing, leisure and education

Northamptonshire County Council (NCC) and NHS Northamptonshire (NHSN) continue to challenge mainstream and specialist organisations/services to ensure they are able to respond to all people with a learning disability. For example, responses to meet the needs of older people will also have to think about how they will support older people with a learning disability and health services for people with heart, gut, sensory, cancer or dementia will need to show that they are responsive to people with a learning disability with these needs.

The forecast increase in numbers of people with a learning disability makes this change in the way support is delivered imperative.

The County Council and NHS Northamptonshire have responded to this by commissioning a range of supports that will enable people to lead fully inclusive lives, with less dependency on traditional or specialist services and benefits.

NCC is also actively commissioning in the areas of employment support, supported volunteering and community connecting.

Northamptonshire is in the early stages of co-producing a housing and accommodation strategy that will consider:

- the housing needs of people with a learning disability,
- how we support older families to prepare for when they no longer want to or are able to support their family member to remain living in the family home;
- the needs of people who also experience early onset dementia.

The Council is already working in partnership with providers to increase the range of supporting living accommodation and discouraging the use of residential care throughout the county.

Although there are some examples of people with a learning disability accessing places to live within sheltered housing and Extra Care Schemes there is no current strategy to encourage this further, or to encourage providers to widen their services to support an older person with a learning disability, for example.

The lack of support for people experiencing dementia is on both national and local agendas - we are in early discussions about how we ensure the needs of people with a learning disability and dementia are also included in any developments. NHS Northamptonshire and the Council have also started a co-produced review of all short breaks services - in order to make sure that the breaks provided enable families to continue supporting their family member who has a learning disability and meet the outcomes of each person with a learning disability.

The Council's Developing Community Lives strategy focuses on how people spend their days, evenings and weekends - with a focus on inclusion, and community connecting.

There is increasing recognition within the Council and NHS organisations in Northamptonshire of the rights and expectation that people with a learning disability should be supported to gain and maintain paid employment, including younger people at transition. This is reflected by the:

Increased investment in employment support

Successful bids to become Getting a Life and Jobs First sites in either the region or nationally.

Amendments to Council application processes, including supported interviews and forms in order to ensure equitable access to posts within the Council.

Commitment from NCC to 'job carve' posts throughout its directorates and offer

people with a learning disability paid employment which has already seen more people with learning disability securing employment.

Inclusion of the need to increase employment opportunities in the Northamptonshire Better Healthcare Plan.

Specific creation of posts at Kettering General Hospital for people with a learning disability.

The Council and NHS organisations recognise that paid employment leads to both individual benefits in terms of increased income, independence, self-esteem and inclusion, as well as evidencing to the general public the value that people with a learning disability bring to their community. Similarly, being in paid work reduces the reliance on social care and health support and will free up resources for people who continue to need support.

In response to the new Autism Bill 2009 and the new strategy 'Fulfilling and Rewarding Lives' 2010 - partners in Northamptonshire have held an initial meeting to discuss how to develop and improve systems and supports to this group of people. Further meetings have been arranged and all meetings and subsequent work is being co-produced with people with autistic spectrum conditions. This work is in the very early stages.

## 2.6 **What is being done to improve information that informs planning and commissioning of services for people with learning disabilities?**

To make sure there is the right support, in the right place to meet the needs of all the people with a learning disability living in Northamptonshire, the Council and NHS Northamptonshire gathers information from a number of sources:

- \* National studies that forecast the likely numbers of people within the population who will have a learning disability – this is called Projecting Adult Needs and Service Information (PANSI).
- \* The numbers of people with a learning disability known to Health and Social services
- \* Growth in housing
- \* Information from partner organisations about people who are not known to the Council and Health, for example
  - o Family Carer organisation - Parents in Partnership
  - o Carers Organisations
  - o Education

- o Employment and Disability Team
- o Advocacy projects
- o Voluntary and Independent Providers

It is recognised that the numbers of people do not give us the whole picture - it does not tell us about people's 'extra needs', people with a learning disability who also have diabetes, for example.

In order to address this, the Council and NHS Northamptonshire have made a commitment to share and gather information:

- \* With customers and families via the learning disability partnership board.
- \* With support Providers
- \* With Care Management

The information that the partnership Board has been told about has included information on the:

- numbers of people known to services;
- the size and distribution of budgets and
- a further commitment to engage with people with a learning disability and families on all new areas of support development.

### Specific Projects

- As part of the Developing Community Lives project the Council organised a large number of meetings (at different times and locations) where people could tell us what they wanted to do in the day, evenings and week. Meetings were held for both customers and families, with appropriate advocacy support.
- The Council has engaged people with a learning disability in the selection of providers for new contracts.
- The Board funded the County Council Commissioning Team (£14,000) to organise for training for people with learning disabilities, who want to be fully involved in the commissioning process, i.e. writing specifications, short-listing and selection of potential providers. The training is taking place in

March 2010.

- The Council arranged a series of Market Place events where people with a learning disability and families meet providers and tell them what they want to do with their time. Support was available to customers at all these events to enable them to think about the outcomes they wanted to achieve and what questions they want to ask. More of these events are currently being planned - it is the Councils' aspiration that eventually customers will attend these events with knowledge of the value of their personal budget and having completed their support plan.
- The Council had some funding from region to undertake a series of Monitoring training events for any disabled person or family carer who wants to get involved in monitoring of support services. This training is taking place now and additional funding is being used to purchase equipment to support people in this role, i.e. electronic tablets, dictaphones. The next step is to agree how this group fits into the wider monitoring of contracted services and the information sharing with partners in the Care Quality Commission (CQC).
- In response to the 'Working better together' directive the Council has agreed to pilot for 6 months the use of PCP reviews to gather information about the needs and expectations of people with a learning disability who are currently getting support via a day opportunity service.
- The Council organised a 2 day event with people who told us they wanted to get paid work.
- Initial checks of the data held by GP's have been made by the primary care strategic health facilitators and this has confirmed the numbers of people known. A guidance booklet to help GP's in this task was produced as well as practical support from Strategic Health Facilitators - 65 practices had their information checked. Further checks are planned in the next year which will

help Commissioners to understand more fully the needs of those people.

- NHS Northamptonshire is one of the pilot sites for Personal Health budgets and people with a learning disability will be some of the 75 people who are part of the pilot. The pilot will start in April 2010 although work is already starting to get ready. This will help the Primary Care Trust to plan and commission better services in the future.
- Information about young people in transition to adulthood is collected and systems to improve how this information is used to plan services are being developed - a newly formed Social Care Operational Planning Group will help with this.
- Sharing of data between connexions and adult social services is being explored also

The Partnership Board has received information about the JSNA and has told the NHS Northamptonshire and the Council about the kind of information they think should be collected in future years so that the county can make good planning and commissioning decisions.

## **2.7 Please give details of any other progress made, including:**

- people with learning disabilities in the criminal justice system
- people with learning disabilities detained under the Mental Health Act (local authorities and PCTs have this information)

2.7

Initial contacts are being made with the probation service, local prisons and prison partnership boards in Northamptonshire by the Learning Disability Partnership Board. This has been to gain a greater understanding of the numbers of people with a learning disability who are involved in the criminal justice system locally and this will be an area for further work in 2010/11.

One of Northamptonshire's prisons has a part time dedicated speech and language therapist to work with prisoners with learning disabilities and those with communication difficulties. This worker is helping to identify people within the prison and help make sure that all prison information is understood by offenders.

The worker also runs training for prison staff in all departments and is currently checking that the annual health check for people with learning disabilities is being offered within the prison.

One local prison also held a disability awareness day for all prisoners.

Initial contacts with local crime and disorder reduction partnerships and Local Strategic Partnerships are being made and the work of the Keeping Safe Group (and other work) of the Board is being shared with them.

The numbers of people with a learning disability who have been detained under the Mental Health Act in Northamptonshire are:

2008/9	9 people
2009 until Feb 2010	14 people

The Partnership Board has funded an additional one year post to improve local services for people with a learning disability and mental health needs through a local Greenlight project and initial progress on this has been good.

A working group is developing a care pathway for people to receive mental health support through primary care and improvements in accessible information in mental health services are planned.

An analysis of the training and support needs of staff within Northampton Healthcare Foundation Trust (NHFT) has taken place and now an agreement has been reached that will make sure that all staff within the Trust are trained in both mental health and learning disability.

### 3 Partnership Board arrangements

#### **3.1 Please give details of your Partnership Board.**

##### Frequency of meetings

The Board meets every 6 weeks and has at least one full away day every year.

## Details of sub-groups

These are the work groups that we have at the moment:

A Place to Live  
Employment and Getting a Life  
One Health  
Healthy Living  
Person Centred Planning  
Communication  
Keeping Safe  
Relationships  
Transitions

All of our workgroups involve people with a learning disability and most involve family carers.

## Date of last review of Partnership Board arrangement

28<sup>th</sup> April 2009  
and further review  
planned for 16<sup>th</sup>  
April 2010.

## 3.2 Please give details of the structure and membership of the Partnership Board.

### Roles and representatives

New structures are currently being introduced but the membership during 2009/10 has been growing and developing.

Here is a list of the expected membership on our Board although it is not yet fully achieved. People who have not yet joined the Board are shown in italics.

Core Members are expected to come to each meeting and are:

2 Co-Chairs - Director of Social Services and a Self Advocate  
5 people with a learning disability (some supported by local advocacy organisations)  
3 family carers  
1 family carer advocacy organisation  
1 National Forum for people with learning difficulties representative  
1 County Councillor  
1 Non Executive Director from the PCT (Primary Care Trust)  
1 Associate Director - PCT  
2 Commissioners from County Council and PCT

- 1 Transitions Co-ordinator from Council Children's Services
- 1 senior manager from the Councils safeguarding service
- 1 Representative from the Learning Disability Thematic Partnership
- 1 representative from Mencap
- 1 Specialist Black and Minority Ethnic (BME) worker
- 1 Representative from the Council's Personalisation or Transformation team
- 1 Person Centred Planning Co-ordinator

Other members of the Board who work in specialist areas are:

- 1 person from Supporting People team
- 1 person from a local district or borough housing service*
- 1 person from the NHS Campus team
- 1 person from County Council short breaks service*
- 1 person from County Council Community Lives service
- 3 people from the independent sector representing different service provision
- 1 person from the local police force
- 1 person from probation/offenders service
- 1 person from local specialist health trust
- 2 representatives from acute hospital trusts
- 1 GP with special interest*
- 1 representative from Strategic Health facilitator team
- 1 person from Job Centre Plus
- 1 representative from Schools*
- 1 person from Learning and Skills Council this person will change in April 2010 when the Skills Funding Agency and Young People's Learning Agency are set up
- 1 representative from local colleges
- 1 person from Connexions
- 1 person from Council's Adult Learning Service
- 1 representative from employment support services

Number of people with learning disabilities	Male	4	Female	3
Number of family carers	Male	0	Female	3
Ethnic breakdown of people with learning disabilities and family carers				
All current family carers who are Board members are white British. 6 of the 7 people with learning disabilities on the Board are White British and the 7 <sup>th</sup> person did not wish to answer this question				
Members that have complex needs		0		

**3.3 Please describe how your Partnership Board has invested in, and supported, leadership, so that members of the Board and associated task groups who are people with learning disabilities or family carers have become real partners in the planning and decision-making processes alongside professionals.**

Include examples and evidence

Self advocates and family carers both have a pre meeting before the Board meetings. This helps make sure that the information to be presented is accessible and understood by Board members. It also gives a chance for representatives to think about the topics to be discussed and consider any questions they may have.

We have introduced new ways of working at Board meetings including the introduction of Dot Voting which makes sure that all board members have enough time to consider the vote and all people are able to see quickly the outcome. We also have some new voting cards to help with unplanned decisions that need to be made.

Also, self advocates on the Board and family carers now regularly co-facilitate any group discussions that are to be held at Board meetings.

We have funded a leadership course for family carers called Sharing the Knowledge, run by Partners in Policymaking that has resulted in 15 carers graduating.

The course ran for 2 days over a 5 month period and participants were caring for both young people and adults with learning disabilities.

Carers who completed the course are most positive about it and all feel that they have grown in knowledge and self confidence. 8 of the carers have formed a local network called Sharing Knowledge Together and this has continued beyond the course.

Other outcomes have been that carers involved in the course have offered training to service staff and participated in planning and monitoring of services.

They have also become involved in the newly forming local partnership groups that will elect representatives to the Partnership Board.

Comments from people on the course are:

“This course has opened my eyes tremendously. Before I didn’t know what I didn’t know – now I do”

“I’ve learnt so much and it has restored my confidence in my own abilities. It’s been so good to talk to other people who know where I’m coming from”

We are in the process of launching new local partnership groups who will provide a more local way of engaging people in the achievement of Valuing People Now in Northamptonshire and we have invested in 2 new jobs to make sure this happens and to make sure that the voices of people with a learning disability including those

with complex needs and family carers are heard.

The 2 workers will be engaging people who do not usually like or engage with formal systems like meetings and events and will also work with young people from 16 to make sure that partners on the Board understand the views of people who will be using adult services in the future.

21 people will be elected from the 7 local groups to serve on the County Partnership Board, 7 of these will definitely be people with learning disabilities and at least 7 will be family carers. All elections have now taken place and voting ends on 31.3.10

People with a learning disability and family carers have been actively involved in staff recruitment both for Partnership Board staff and for senior positions in Partner organisations.

2 people with a learning disability have been appointed into paid employment in the Partnership Board office and are able to influence much of our work at the earliest opportunity.

People have been very actively involved in planning co-production events and strategies including the Big Health Days, employment plan and the development of a joint NHS Northamptonshire and Council engagement policy

Board members are regularly consulted by partner organisations on a wide range of issues and the Partnership Board is able to determine how the Learning Disability Development Fund is spent in the county.

The Board has themed meetings where we talk about major topic. The topics are linked to the Board annual delivery plan in which outcomes are specified.

Partners report how well they are doing against the outcomes and group work and discussion is a key feature of all of our meetings.

The Board meetings are interactive and inclusive and are open to the general public.

Feedback about each meeting can be noted by anybody on “What works well” and “what isn’t working” flipcharts and actions are taken after each meeting to resolve any issues.

The Board meetings review all past actions so that important items are not forgotten about.




Attendance at Board meetings is monitored and our average attendance at planned Board meetings in 2009 was 28 Board members. People who have not been attending regularly have been written to by the Co- Chairs to encourage attendance.

Family carers on the Board have reported that they feel listened to and that the Board is able to achieve change and “has more teeth”. They have reported that they feel confident to challenge and feel that they and people with learning disabilities

have achieved real change in certain areas including a joint health and Council Common Assessment form and the County Council medication policy.

A self advocate on the Board has said that she feels listened to and her confidence has grown since she has been on the Board.

In the Board annual plan for 2009/10, and for the first time, we set 48 outcomes that we wished to see be achieved in Northamptonshire. We have so far monitored 42 of these outcomes:

- 17 have been achieved by March 2010 (Green) 
- 24 have been started but will not be fully achieved by March 2010 (Amber) 
- 1 will not be achieved this year but will be worked on in 2010/11 (red) 

#### 4 Overall budget

##### 4.1 What is the overall budget for services for adults with learning disabilities across health and social care?

£ 71 907 411

##### 4.2 Is it a pooled budget?

There is a limited pooled budget arrangement covered by the mental health pooled budget. This covers arrangements for the provision of several generic day centres offering work type activities. Apart from joint funding of placements all other expenditure is done separately.

##### 4.3 Is there a Section 75 agreement in place?

Yes  No

##### 4.4 How is it spent?

Please give actual figures and percentages	£	%
Residential care – inc nursing care	<b>29,756,291</b>	41.3%
Nursing care – see above		

Supported living	<b>11,697,123</b>	16.2%
Hospital care, including where known:		
- acute hospital		
- specialist inpatient services	<b>2,614,755</b>	3.6%
- NHS campuses	<b>11,195,933</b>	15.5%
Day services	<b>7,408,531</b>	10.3%
Community Learning Disability Team	<b>3,296,194</b>	4.6%
Advocacy arrangements and support	<b>248,460</b>	0.3%
Other (please specify)		
Residential respite/short breaks	<b>3,025,527</b>	4.2%
Care Management	<b>1,097,358</b>	1.5%
Community Services (PCT)	<b>683,239</b>	0.9%
Other (PCT)	<b>92,217</b>	0.1%
Contract Management	<b>22,433</b>	0.03%
LDDF	<b>485,000</b>	0.7%
Community Connecting	<b>170,000</b>	0.2%
Carers Support	<b>114,350</b>	0.2%
Total – Local Authority	<b>44,705,859</b>	62.17%
Total – PCT	<b>27,201,552</b>	37.83%

**4.5 Has there been an efficiency savings programme in learning disability services in 2009 -10?**

Yes	✓	No	
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**4.6 Is there a planned efficiency programme for 2010 -11?**

Yes	✓	No	
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Some people on the Partnership Board were involved in the County Council budget consultation. They sent comments to the Council about the savings that were planned for next year and some of these have now changed.

**5 The health of people with learning disabilities**

**5.1 Have you completed the regional health self-assessment and performance framework?**

Yes	✓	No		In progress	
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**5.2 If you have answered in progress or no, indicate when you expect this assessment to be completed or started.**

Started Completed 

**5.3 If you have answered yes**, please complete the following summary table based on the most recent results of that assessment.

<b>RAG rating</b>	<b>Red</b>	<b>Amber</b>	<b>Green</b>
NHS campus closure			✓
Addressing health inequalities		✓	
Making sure people are safe		✓	
Continuing to achieve other Valuing People Now health commitments		✓	

**5.4 If you have answered yes**, please give details of the overall headline health needs of people known to services - from regional health self-assessment and performance framework.

- The Direct Enhanced Service for Annual Health Checks for People with Learning Disabilities will continue for a further year and be reviewed in 2011
- Obtaining baseline data and information of health needs of People with Learning Disabilities in Northamptonshire will continue. This information will enable the NHS Northamptonshire to incorporate the needs of this vulnerable group into their planning
- Specialist Learning Disability Services will be redesigned

**5.5 If you have answered in progress or no**, please provide the following information. Otherwise go straight to section 6.

Percentage of GP practices in your area that have signed up to provide annual health checks as a Directed Enhanced Service (DES).

92.6%

Percentage of adults with learning disabilities known to local authorities who were offered health checks in the year up to 31 March 2010.

Not known at this time

Percentage of adults with learning disabilities known to local authorities who received a health check in the year up to 31 March 2010.

793 people at  
September 2009,  
likely to be 1500  
by end March  
2010

Are people with learning disabilities involved in learning disability awareness training to primary healthcare staff as specified in the DES?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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How are family carers being involved as partners in improving healthcare for people with learning disabilities?

Family carers have been active members of Partnership Board working groups on health and had full participation in the Health Self assessment including feedback to Strategic Health colleagues.

16 family carers attended the Big Health Day and 2 were part of a multi skilled team that met with people from the region.

The local independent Six Lives Audit commissioned by the Learning Disability Partnership Board actively engaged carers and 7 family carers were interviewed as part of the process.

Family carers have been part of the training for GP's.

Family carers are members of the Campus Re provision Project Board.

Percentage of people known to services who have health action plans that have been reviewed in the year up to 31 March 2010.

Not known at this  
time

What are the arrangements for strategic healthcare facilitation in your area?

Northamptonshire has 2 full time strategic health facilitators working in primary care and 1 half time person working in acute hospitals.

There is also a commitment to increase this number in 2010/11 by a further 1 and a half workers.

The strategic health facilitators are a valued service and have achieved many positive out comes that have made sure that health care is more accessible and responsive to the needs of people with learning disabilities in Northamptonshire. These have included:

- A range of accessible health materials and more in development
- A range of health education, for example, a specialist diabetes course
- There are measures in place to improve access to breast screening for women with learning disabilities
- Health promotion events across the county for people to have basic health checks and learn about and experience sport activities and health awareness
- An audit of women with learning disabilities to see how many people have been wrongly taken off the cervical screening programme

How many General Hospital (Acute) Trusts are there in your locality?

2

How many General Hospital (Acute) Trust Learning Disability Liaison/Facilitator (or similar) posts are employed in your area?

0.5 at this time but will increase shortly.

Are the needs of people with learning disabilities and the health inequalities faced by them highlighted within each Trust's Disability Equality Strategies/policies (PCTs and provider Trusts)?

Yes	✓	No	
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Has your Partnership Board taken the opportunity to comment on the performance of local Trusts as part of the Care Quality Commission's (CQC's) annual health check?

Yes	✓	No	
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What progress have you made on the Green Light Toolkit for access to mental health services? What was your rating in the last CQC indicator set?

At March 2009, Northamptonshire Healthcare Foundation Trust had plans in place to improve their rating in all of the 12 key standards taken from the Green Light Mental health Self Assessment checklist.

Of the 12 criteria, the Trust was rated as follows:

Green - 1

Amber - 10

Red - 1

See also 2.7 for details of a designated worker funded through LDDF to progress this work.

Is a local multi-disciplinary service in place to meet the needs of people whose behaviour challenges services, or is one being commissioned?

Yes	✓	No	
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Are there prisons or young offenders institutions or other secure settings in your area?

Yes	✓	No	
-----	---	----	--

If so, have you met with the Prison Partnership Board?

Yes		No	✓
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Progress in carrying out the review recommended by the Ombudsmen's report (Six Lives: the provision of public services for people with learning disabilities) and report to Boards due by May 2010.

The Northamptonshire Learning Disability Partnership Board commissioned an independent audit of local services in line with Six Lives.

66 people were interviewed about local services in the county and this included people with learning disabilities, family carers and a range of professionals.

The audit made 10 recommendations which have accepted by the Partnership Board and have been built into the Better Healthcare action plan for Northamptonshire. This plan will be monitored by a newly formed One Health group which is both multi

agency and multi skilled and includes people with a learning disability and family carers.

The County Council Health and Social Services Scrutiny Committee have set up a working group to look at Six Lives and the Northamptonshire audit. Acute and specialist health providers along with County Council providers and NHS Northamptonshire have given evidence of their action plans in regard to Six Lives and a full report with recommendations was taken to the full Scrutiny Committee on 24<sup>th</sup> March 2010.

A new One Health Group has been established in NHS Northamptonshire to oversee all areas of health improvement including Six Lives, Michaels report and the big health self assessment.

The group will be chaired by a non executive director and will also include a county councillor (deputy of the Scrutiny Committee) as well as people with learning disabilities and family carers.

The group will monitor the Better Healthcare Plan for Northamptonshire and will also report to the Learning Disability Partnership Board.

NHS Northamptonshire will additionally be reporting to their Board on both Six Lives and the health self assessment on 31<sup>st</sup> March 2010 and all other Trusts will achieve the deadline of reporting to their Boards by 31.3.10

## 6 Where people live

**6.1 Please use the data from your Adult Social Care Combined Activity Return (ASC-CAR) for NI 145 (see Appendix E for blank table), to give the numbers and percentages of individuals known to services (aged 18-64) who are defined as being in settled accommodation against the NI 145 categories.**

Please give actual figures and percentages	Total	%
Owner occupier / Shared ownership scheme (where tenant purchases percentage of home value from landlord)	0	0
Tenant - Local Authority / Arms Length Management Organisation / Registered Social Landlord / Housing Association	0	0
Tenant - Private Landlord	0	0
Settled mainstream housing with family/ friends (including flat-sharing)	479	93%

Supported accommodation / Supported lodgings /Supported group home (accommodation supported by staff or resident caretaker)	32	6%
Adult Placement Scheme	6	1%
Approved premises for offenders released from prison or under probation supervision (eg Probation Hostel)	0	0
Sheltered Housing / Extra care sheltered housing /Other sheltered housing	0	0
Mobile accommodation for Gypsy / Roma and Traveller community	0	0
Total	517	100%

**6.2 Please use the NI 145 data to give a similar breakdown for people (aged 18-64) defined as not being in settled accommodation.**

Please give actual figures and percentages	Total	%
Rough sleeper / squatting	0	0
Night shelter / emergency hostel / direct access hostel (temporary accommodation accepting self-referrals)	0	0
Refuge	0	0
Placed in temporary accommodation by Local Authority (including Homelessness resettlement) - eg bed and breakfast	0	0
Staying with family/friends as a short-term guest	0	0
Acute / long-stay healthcare residential facility or hospital (eg NHS or Independent general hospitals / clinics, long-stay hospitals, specialist rehabilitation / recovery hospitals)*	0	0
Registered Care Home*	201	97%
Registered Nursing Home*	7	3%
Prison / Young Offenders Institution	0	0
Detention Centre	0	0
Other temporary accommodation	0	0
Total	208	100%

**N.B. These numbers do not reflect the total learning disabled population known to services – please see 19.2**

**6.3 Please give additional data to show numbers:**

In residential settings (see categories marked*) <i>in local authority area</i>	177
In residential settings (see categories marked*) <i>out of area</i>	31
Supported to live independently (NI 136)	0 if refers to 6.2

7 Provider market

**7.1 Does your provider market reflect the needs of your current and future population?**

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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**7.2 If you have answered no, in what ways does it need to change?**

Despite all the positive developments in Northamptonshire there continues to be an over reliance on traditional support services.

This is partly due to reluctance from providers to change, but also to do with other people having concerns and worries about trying something different, new and not tested.

These other people include families, people with a learning disability and those who support and guide them.

These concerns will need to be taken into account when changes are made to how and where supports are provided and commissioned in the future.

Growth in the development of projects that support independence and deliver 'inclusion', community connection, paid employment need to be sustained and this includes some specific initiatives in relation to young people in transition.

The Council need to direct Prevention and Early Intervention strategies to include projects that support younger adults to realise their full potential and prevent the need for more formalised packages of support as they get older i.e. projects that support people to develop independent living skills, and into paid employment.

In order to engage providers in the agenda around customer choice and control the Council has:

- \* Used its Provider forums to inform them about the Personalisation agenda and some providers have genuine interest in responding to this agenda
- \* As a Total Transformation site the Council have identified some joint training days for commissioners and providers from In Control in order to develop tools and strategies to respond to this agenda
- \* Providers have been encouraged to engage in and respond to any new areas of development, i.e. the multi agency employment plan, in response to Valuing Employment Now (“We can Work it Out”), Developing Community Lives strategy and delivery plan. Newer areas of development, i.e. the accommodation plan and work in response to the new Autism Bill and strategy will identify what sort of changes are necessary, how and when.
  - It is already acknowledged that Northamptonshire requires more supported living accommodation and less residential care; more community connecting, more paid employment and less specialist day centres and existing and new providers are being encouraged to develop support in response to these needs.

Market capacity has been developed to meet the more complex housing and support needs of some people through the campus re-provision and this will need to continue to be able to respond to this growing population.

- \* The Council is in the process of re-designing contracts for providers wanting to support people during the day, evenings and at the weekend - the new contracts will identify outcomes to ensure providers
  - support the inclusion agenda,
  - support or direct people to connect with their local communities and
  - support people to get paid and voluntary work.

We have asked providers of Community Connecting, Supported Volunteering and Employment support projects to use the Inclusion Web tool (NDTi) to map how working in this way can fundamentally change people's lives when they are supported in this way. The results of this will be shared with providers at the next provider forum and with the Learning Disability Partnership Board.

- \* The Council has indicated that there is a requirement that all agencies and support providers respond to the rights of people with a learning disability to control

of all the support they receive. The monitoring of how providers respond to this requirement will be incorporated in the existing monitoring arrangements.

- \* Use of Market Place events to engage customers and providers directly in discussion about the type of support people are interested in.
- \* The roll out of Personal Budgets/Self directed support for all customers
- \* The piloting of Individualised Service Funds

A joint review (NHSN and NCC) of short breaks services involving customers and families will need to identify how to develop a range of non building/bed based services that meet needs and also meet increasing demands.

In relation to specialist health services, there will need to be increased capacity in community teams to meet the increasing numbers of people (including campus discharges) and this will also need to include a range of different therapies.

An increase involvement in case management of people with continuing healthcare needs is needed to make sure that needs are met and local and cost effective solutions are found.

NHS Northamptonshire will be developing new contracts and pricing within the independent sector and will be aiming to commission more cost effective and high quality services through specific care pathways for certain people e.g. people with learning disability who have dementia.

NHS Northamptonshire is also a pilot site for personal budgets and will developing the market to respond to this.

There is recognition in both NCC and NHSN that not all providers will be interested or able to respond to this whole change agenda and this may result in some providers ceasing operation.

However, it is Northamptonshire's aspiration to ensure that the right support, in the right quantities and in the right place are available to meet the needs and aspirations of people with a learning disability.

Therefore it is anticipated that in addition to those existing providers that are willing to adapt, Northamptonshire will also attract new providers and that mainstream and micro organisations will recognise the benefits of attracting customers with a learning disability.

Commissioners in Northamptonshire are committed to make sure that all people with a learning disability have the right to greater control of all of their support and will

influence the market to achieve this.

Family carers on the Board are keen to see that this does definitely include people with more complex needs and that time and support are available to achieve this.

### 7.3 What percentage of your market is:

	%
In house	39.5
Voluntary	14
Public sector (this should read private)	46.5

### 7.4 Do you plan to change these percentages?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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## 8 Employment

**8.1 Please use the data from your Adult Social Care Combined Activity Return (ASC-CAR) for NI 146 (see Appendix E for blank table) to show the numbers and percentages of working age learning disabled people known to local authorities who are in paid employment (including being self-employed) at the time of their latest assessment or review, against the NI 146 categories.**

Please give actual figures and percentages	Total	%
Working as a paid employee or self-employed (30 or more hours per week)	<b>34</b>	<b>53%</b>
Working as a paid employee or self-employed (16 to less than 30 hours per week)	<b>30</b>	<b>47%</b>
Working as a paid employee or self-employed (4 to less than 16 hours per week)	<b>0</b>	
Working as a paid employee or self-employed (more than 0 to less than 4 hours per week)	<b>0</b>	
Working regularly as a paid employee or self employed but less than weekly	<b>0</b>	
<b>Total</b>	<b>64</b>	<b>100%</b>
Working as a paid employee or self-employed and in unpaid voluntary work	<b>0</b>	Not currently recorded
In unpaid voluntary work only	<b>0</b>	Not currently recorded

**8.2 Please also state the number of people in paid employment who work for:**

The NHS

0

A local authority

6

**8.3 How many people known to services are not working?**

1357 of those  
aged 65 or under

**8.4 How many people known to services who currently work less than 16 hours a week are known to want to work 16 hours a week or above in the future?**

Not known

**8.5 Do you have an up-to-date local employment strategy for people with learning disabilities in line with Valuing Employment Now: real jobs for people with learning disabilities?**

Yes	✓	No	
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Our multi agency plan is called “We Can Work It Out” and it has been included in the national Valuing Employment Resources as an example of good practice for a local delivery plan.

**9 Advocacy and leadership**

**9.1 Has your Partnership Board developed a clear plan for working with and supporting all communities of people with learning disabilities and advocacy groups in the ways outlined in the Valuing People Now Delivery Plan?**

Yes		No	✓
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Not as a specific written plan although the inclusion and engagement of all communities is inherent in all of the Partnership Boards work.

**9.2 Can your Partnership Board show how it has invested in, and supported, self-advocacy and peer advocacy leadership so all people with learning disabilities are represented on the Board and have become real partners in local planning and decision-making processes through this representation and via strong links to work programmes?**

This should include leadership and representation from all ethnic communities and the inclusion of people with more complex needs.

The Learning Disability Partnership Board has an outcomes based delivery plan for 2009/10 which is inclusive of all people with a learning disability, including those with more complex needs and those in transition.

For all of the 09/10 outcomes specified by the Board, we expect partners to evidence how they are meeting the needs of all individuals with a learning disability.

During 2009/10, the Board had 7 members who have a learning disability and these people engaged with others through attendance at services, informal networks and talking to friends and specific forums including advocacy steering groups.

The planned changes to the way the Board works will mean that from April 2010, there will be at least 8 people with a learning disability on the Board and they will have a formal representational role with role description. 7 of the individuals will represent a geographical area and the other will be a joint Co-Chair of the Board.

By building local partnership groups with strong membership, and with the work of the 2 new jobs we have created to support the groups we hope that all people will be more fully represented on the Board including young people aged 16 and above.

We are also fortunate to have a local person on both the National Forum for people with learning difficulties and the East Midlands Regional Delivery Programme Board and this means that people with a learning disability and other Board members can keep up to date with national and regional news – the Board has offered practical support to this person in these roles over the last year.

People with learning disabilities from our Board have actively and regularly participated in regional events including the regional forum and the self advocates network.

All representatives on our Board are paid for their time and expenses. Any support that is needed is also paid for.

Other ways that the Board and its partners have involved people with learning disabilities in local planning; local decision making and work

programmes and service developments are:

- Appointment of a specialist worker for BME communities to engage with people with a learning disability and family carers to fully understand their needs and aspirations
- Engagement in the Developing Community Lives strategy and Delivery plan. A two year consultation and development project - this included a variety of opportunities to express individual and group views and opinions and engage in discussion.
- Co-production of the multi agency Employment Strategy, “We Can Work It Out”
- Co-production of 'Finding a place to Live' - Northamptonshire Housing and Accommodation strategy - major event set for May 2010. It is proposed that some of the preparation work be undertaken by a person with a learning disability
- Involvement in the Health Self assessment, the local Six Lives audit and in the new One Health Group
- Involvement in all of the Partnership Board workings groups
- One off involvement activities about changes in partner organisations including Council budget consultation, Council advocacy review and joint engagement policy development.
- By using part of the Learning Disability Development Fund (LDDF) for people to apply to to make sure they were involving everyone – this led to some exciting projects including creating

new jobs for people with a learning disability in one of the acute hospitals and the making of a special DVD to help people from BME communities understand learning disability. 2 people with a learning disability were on the panel of 4 people who decided which projects the partnership Board would pay for.

- Monitoring of services - a series of short training courses have been commissioned and promoted to people who use services and families in order to engage them in the monitoring of support services
- As trainers, people with learning disabilities are co training with a number of partner organisations

See also section 3 and 13

### 9.3 What is the combined local authority and NHS spend on advocacy?

£248,460

## 10 Family carers

### 10.1 Has your Partnership Board developed a clear plan for working with and supporting all family carers of people with learning disabilities in the ways outlined in the Valuing People Now Delivery Plan?

Yes		No	✓
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The Learning Disability Partnership Board does not have a specific action plan for Carers as it believes that the needs of family carers are integral to all other sections of the Boards plan.

For all of the 09/10 outcomes specified by the Partnership Board, we expect partners to evidence how they are meeting the needs of family carers as well as individuals with a learning disability.

**10.2 Can your Partnership Board show how it has invested in, and supported, family leadership so all family carers are represented on the Board and have become real partners in local planning and decision-making processes through this representation and via strong links to work programmes?**

During 2009/10, the Board had 3 members who were family carers and despite big efforts from these people it has been difficult for them to formally engage with significant numbers of other family carers.

The planned changes to the way the Board works will mean that from April 2010, there will be at least 8 family carers on the Board and they will have a formal representational role with role description. 7 of the family carers will represent a geographical area and the other will be a joint Co-Chair of the Board.

By building local partnership groups with strong membership, we hope that all family carers will be more fully represented on the Board and with the work of the 2 new jobs we have created to support the groups we hope that all people will be more fully represented on the Board including families of younger people with learning disabilities.

Family carers from our Board have participated in regional events including the valuing families forum when their personal circumstances allowed for this.

All representatives on our Board are paid for their time and expenses.

Northamptonshire also has a specialist advocacy organisation working solely with family carers of people with a learning disability. Their work covers both individual advocacy and wider representation and this organisation is currently on the Partnership Board and a number of its working groups.

Advocacy that is able to represent the needs of carers of people with learning disability has been beneficial both to the families but also in respect of wider policy development.

Other ways that the Board and its partners have involved family carers in local planning; local decision making and work programmes and service developments are:

- Appointment of a specialist worker for BME communities to engage with people with a learning disability and family carers to fully understand their needs and aspirations

- Involvement in most of the Partnership Board workings groups
- Involvement in the Health Self assessment, the local Six Lives Audit and in the new One Health Group
- Involvement in various working groups organised and run by partner organisations, for example in relation to policy development.
- Engagement in the Developing Community Lives strategy and Delivery plan. A two year consultation and development project - this included a variety of opportunities to express individual and group views and opinions and engage in discussion.
- Co-production of the multi agency Employment Strategy, “We Can Work It Out”
- Co-production of review of Short Breaks services – started in Feb 2010
- One off involvement activities about changes in partner organisations
- Family carer involvement in the NHS campus project group
- Monitoring of services - a series of short training courses have been commissioned and promoted to people who use services and families in order to engage them in the monitoring of support services
- Family carers have been involved in both training and interviews as

parts of multi skilled teams in various partner organisations.

See also Section 3.3

**10.3 How is the Partnership Board engaging with the mainstream carers' work arising from the National Carers Strategy\* work at a local level, and what outcomes have there been for family carers of people with a learning disability, including people with learning disabilities who are carers in their own right?**

\*Carers at the heart of 21st-century families and communities: A caring system on your side. *A life of your own.* HM Government (2008)

The Council facilitates a third sector Carers Thematic Partnership at which providers work together with the Council to develop services and meet needs.

A local specialist carer advocacy organisation has been part of this group for some time to represent the needs of those supporting people with a learning disability and has more recently been joined by family carer representatives from the Partnership Board.

The Thematic Partnership provides carers with an opportunity to gain information and updates on a variety of topics as well as to comment on policies, procedures and initiatives.

Greater work from the Board and its partners in terms of mainstream carers is needed.

The local carers strategy is inclusive of all carers including those who care for a learning disabled relative and those people with a learning disability who are themselves carers.

A county wide initiative to appoint carers support workers included specialist posts for carers of people with a learning disability

The mainstream carers lead is a regular contributor to the Learning Disability Partnership Board newsletter which is sent to approx 1500 people and so carers are advised of all useful initiatives.

A pilot within NCC for one off carers personal budgets was open to all

carers and a number of carers of a person with a learning disability were in receipt of these budgets.

Carers of people with a learning disability are able to log themselves on the carers register and are able to receive mainstream information packs.

NHS Northamptonshire is one of the Carers Demonstrator sites and as such is looking at improving information, assessment and pathways for all carers in the county. This will also include the development of personal budgets for carers.

**10.4 How many carers' assessments were provided in the last year?**

397

**10.5 How many carers with learning disabilities are known to the local authority?**

Approx 8-10

**10.6 How many family carers have benefited from regular short breaks?**

49 families in health and 145 families using NCC services

**10.7 What is the percentage of carers of people with learning disabilities receiving a needs assessment or specific carers' service, or information and advice (NI 135)?**

28.7% of all people with a learning disability had an assessment for their carers and this is 2.7% of the total population

**11 Parents with learning disabilities**

**11.1 How many parents with learning disabilities are currently receiving services in your area?**

Approx. 10

**11.2 Is there a joint planning process with children and family services to support parents with a learning disability?**

Yes	✓	No	
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**11.3 Are materials to support all parents produced in accessible formats?**

Yes		No	✓
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## 12 Transition

**12.1 How many young people with learning disabilities aged 13 -17 are there within your area?**

156 people with severe or profound learning disability and 2040 with moderate learning disability

**12.2 How many of those young people are placed out of area?**

Not known

**12.3 How many of those young people have had person centred reviews and have a person centred transition plan?**

50 and we have used the Helen Sanderson and Associates definition to decide this

**12.4 Are these reviews/plans focused on paid employment as an outcome?**

Yes	✓	No	
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**12.5 What total percentage of young people with person centred reviews have you achieved by 31 March 2010?**

Not known at this time.

## 13 Personalisation

**13.1 Does the Partnership Board have a current strategy to embed person centred planning and a check on the quality of person centred plans?**

Yes	✓ in draft	No	
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How does this inform commissioning?

A Council wide strategy to embed person centred working across all of adults and children's services is currently being drafted and will be completed in April 2010.

A pilot to feedback anonymous information from all person centred reviews with adults with learning disabilities to the Council commissioning team has started and will be reviewed in April 2010.

The person centred planning team alongside the County Council and some providers are also part of a national Provider Development Programme pilot to introduce person centred reviews.

**13.2 Are person centred plans being re-focused on getting a paid job as a goal?**

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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**13.3 How are you making sure that groups who might be left out (e.g. people from black and minority ethnic groups, older family carers, people with complex needs) are fully included and that person centred approaches reflect culture, age and specific communication needs?**

The Person Centred Planning Team is working closely with a specialist BME and older carers workers to engage with families and individuals from BME communities and older family carers.

One member of the team works specifically with people with complex support needs and has developed good expertise in multi media plans and approximately 10 people have such plans at this time.

Person Centred planning is a priority within NCC Children's services and Person centre reviews are being introduced across schools in the county.

NCC has 3 PCP facilitators (one specialising in working with young people in transition) and 1 PCP Co-ordinator. This is helping to ensure that person centred working is introduced at an early age and that hopes and expectations of young people and their families are influenced.

**13.4 How are people with learning disabilities involved in co-production in transforming adult social care?**

People with learning disabilities and family carers are involved in training in person centred planning and have made presentations to Board members and others including parents groups in schools.

The person centred planning teams in adults and children’s services work very closely together.

Northamptonshire has developed a Citizen Leader Academy where local citizens have been trained and are available to advise and train others in respect of personalisation. 3 of the local leaders are adults with a learning disability.

A local drama production demonstrating how self directed support and funding works in the county has been performed across the county at number of venues and has involved people with disabilities in both the planning and the performance

See also 17.2 and 9.2 and 10.2

**13.5 How many person centred plans include employment and accommodation?**

At least 20 adults but data not easily retrieved at this time and many of the plans/reviews with young people include these areas.

**13.6 What is the number (and percentage) of people in receipt of direct payments and personal budgets (NI 130)?**

274 people which is 17.4% of the known population with learning disabilities and 1.6% of total population

14 Workforce development

14.1 Does the Partnership Board have an up-to-date workforce plan?

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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14.2 Can you give details of the workforce which supports people with learning disabilities in your area (from the Skills for Care National Minimum Data Set for Social Care (NMDS-SC), the Integrated Local Area Workforce Strategy (InLAWS), the Social Services Staffing Collection (SSDS001) and other sources)?

Briefly describe what progress you are making on:

- learning disability awareness training for the workers in mainstream services
- involving people with learning disabilities and family carers in all workforce issues
- promoting human rights and Valuing People Now principles in all learning
- preparing the workforce for personalisation
- developing the workforce locally to support all people with learning disabilities, including people whose behaviour challenges services, people with complex needs, people from black and minority ethnic communities etc

Northamptonshire has an ageing adult social care workforce.

The National Minimum Data Set for Social Care (NMDS-SC) September 2009 records a total workforce of 9,098 staff members, of which we have detailed demographic records for 6,038.

The NMDS-SC shows that the adult social care workforce in Northamptonshire only 8% of 6,038 staff members recorded were aged 18-24 compared to 24% aged 45-54 and 16% aged 55-64.

However, it is not felt that these records are fully accurate at this time (due to under reporting) and it is estimated that the social care workforce may be double that shown above.

Northamptonshire has a disproportionately female adult social care workforce in comparison to the wider population. According to the NMDS-SC data, out of 6,038 staff members 79% were female, 14% male and 7% were unknown.

Learning Disability awareness training amongst primary and acute NHS staff has commenced and is being further developed. People with learning disabilities and family carers are involved in this training.

People with learning disabilities and family carers alongside Partnership Board staff have been involved in County Council led consultation events relating to the development of a county wide "Adult Social Care Joint Strategic Workforce Strategy".

The Partnership Board will concentrate on this area in 2010 and people with learning disabilities and family carers will be an integral part of the working group.

The county has a co-ordinated approach to the delivery of Mental Capacity Act training and the expansion of this to the non specialist workforce is commencing.

New Centres for Independent Living (CIL) will be opening shortly and will serve as a central hub for recruitment and support of personal assistants including training. This will mean that good information about this section of the workforce can be gathered and training needs identified and supported.

The specialist BME worker in the county is considering the training needs of people, both in communities and in the traditional workforce to ensure that cultural needs are fully met.

#### 14.3 What are the key workforce challenges in your local authority?

The key challenges are:

- Attracting new people into the workforce and retaining them.
- Raising the status of social care as a valued profession
- Encouraging a diverse workforce that is reflective of the population
- Meeting the training and support needs of people employed directly by people with a learning disability
- Meeting the training and support needs of family carers to enable them to continue in their caring role
- Engaging people with learning disabilities and family carers in the delivery of training
- Ensuring widespread knowledge and learning disability training for those who do not specialise in working with people with learning disability e.g. in mainstream NHS work, including dentists or local district councils and prisons

NHS Northamptonshire has identified workforce development as an important and crucial part of developing its Better Healthcare plan. They have recently held a whole system workforce planning event to identify the

important areas for their 2010 workforce strategy and this event included a focus on the Learning disability work programme.

Senior workforce representatives will be part of the One Health group and it is planned that a working group will be set up to look at this area.

This will include work on induction and ongoing awareness training and how to involve people with a learning disability and family carers in workforce planning and delivery.

Northamptonshire County Council is finalising a joint social care strategy at this time.

The Learning Disability Partnership Board will prioritise Workforce planning as a key area for development in 2010 and will work with all partners to develop a specific workforce plan.

## 15 Hate crime

### 15.1 Number of hate crimes/incidents reported against people with learning Disabilities

28 in 2008 and 33 in 2009
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### 15.2 What progress have you made in strengthening the link between the Board and your local Crime and Disorder Reduction Partnership?

We have only just started working in this area and we are making contacts now with the 6 local Partnerships.

A newly formed Keeping Safe Group is writing a Keeping Safe Plan for the county and has talked about the Hate Crime Action Plan. The plan will consider all aspects of Keeping Safe including training, reporting of hate crimes and safe places.

We will be launching a Keeping Safe card during 2010 and this will be linked to the Police held telephone line for people with disabilities.

### 15.3 Has your Board discussed the Cross-Government Hate Crime Action Plan\* (launched in September 2009)?

Yes	✓	No	
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The Keeping Safe Work group has discussed this plan.

\*Hate Crime - The Cross-Government Action Plan, HM Government (2009)

## 16 Quality assurance and monitoring

### 16.1 How are you including people with learning disabilities and family carers in assessing the quality of care and support in social and health care?

Monitoring of services - a series of short training courses have been commissioned by the Council and promoted to people who use services and families in order to engage them in the monitoring of support services. This training is taking place now and additional funding is being used to purchase equipment to support people in this role, i.e. electronic tablets, dictaphones. The next step is to agree how this group fits into the wider monitoring of contracted services and the information sharing with partners in the Care Quality Commission.

Northamptonshire County Council Planning and Commissioning Team have a number of monitoring officers who regularly monitor all support services purchase by Health and Adult Social Services (HASS) - the monitoring visit includes the use of feedback forms for people with a learning disability and families. These are circulated beforehand and the information in them is used as part of the contract discussions with the provider.

On the day of the monitoring visit - time is spent in contact with the people using the service, where appropriate and with the individual viewing their bedrooms and spending separate time with them so that views can be checked.

The quality of services is also checked through the annual review process by care managers or other local authority staff

The quality of services is also checked through monitoring of complaints in partner organisations and through Care Quality Commission reports.

NHS Northamptonshire through the One Health group will be requiring NHS partners locally to share information that has come to them through complaints, compliments and suggestions as part of the Better Healthcare plan.

The Partnership Board will be looking to receive more information about complaints from all partner organisations during 2010.

Young People and family carers are involved in quality evaluation of short breaks and summer activities within children's services and provided through Aiming High funding.

16.2 Does the Partnership Board receive reports from the Adult Safeguarding Board?

Yes	✓	No	
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16.3 Is the Partnership Board informed of poor performance by local providers (e.g. from Care Quality Commission reports)?

Yes		No	✓
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Local authority commissioners have now agreed to supply this information in the future.

16.4 Have you done an equality impact assessment, in relation to people with learning disabilities and their families, covering:

- gender
- disability
- race
- age
- sexual orientation
- religion or belief

Yes		No	✓
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If so, how has this informed service development and commissioning?

There is not one general Equality Impact Assessment but all partners complete an assessment in respect of new policies, practices etc.

16.5 How have people with learning disabilities and family carers been involved in this annual report?

We have formed a working group to help to write this report. The group has met monthly for 3 months and have done group work on certain questions and held general discussions.

Family carers and people with a learning disability have also met with the Partnership Board manager outside of this meeting to talk in more detail about the report and make changes.

The group involves a person with learning disability, a family carer, carer advocacy organisation, independent provider, voluntary organisation, specialist BME worker, Partnership Board staff and commissioners from the Council and NHS Northamptonshire.

The group has worked together to talk about the report and has looked at the different drafts.

All Board members have also been sent each draft so they can have a chance to comment on the report.

People with learning disabilities have talked about the report and are concerned about the amount of information in it. They are not all willing to look at it – please see comments/signing off page.

Family carers on the group have talked with each other and commented on written versions of the report – see also comments/signing off page.

16.6 Has this resulted in improved outcomes?

Yes	✓	No	
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17 Commissioning

17.1 Do you have a joint commissioning strategy?

Yes	✓	No	
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17.2 What improvements have been made in commissioning services for people with learning disabilities?

The self directed support agenda has greatly influenced the way social care support is being developed locally by the Council - there is a recognition that people with a learning disability need to control the support they receive and therefore the ways and degree to which people with a learning disability and their families are involved in the commissioning of support has dramatically increased.

The Council is a Total Transformation site and as such has invested in Independent brokerage Training; is piloting Individual Service Funds; and has supported people using Direct Payments to move to a Personal Budget. All new and reviewed customers will be informed of and supported to manage their own personal budget.

Although the Council continues to purchase support services on behalf of some customers it has significantly reduced the number of block contract arrangements it has in place. Some people are choosing to ask the Council to commission some of their support and are managing the remainder of

their budget themselves. Some people see this as an incremental approach and others want to ensure they are not losing out by having to pay VAT by paying direct for day care.

All of this has led to many more people being involved and directing the support they want.

As mentioned earlier

- a two year consultation and engagement process to redesign day services was undertaken. This involved large numbers of people with a learning disability and their families. The Council supported this work by commissioning support from family advocacy and self advocate support organisations.
- Market Place events - a series of these took place during the Developing Community Lives. The aim was to enable the provider and customer to meet, with the idea that people would know how much Personal Budget they had available and the outcomes they wanted to achieve - they would share this information with providers and ask how they could support them to achieve their goals. NCC has some more of these events planned for 2010.
- More plans are now co-produced and projects have included or are about to include: employment; finding a place to live; a joint NHS Northamptonshire and NCC review of Short breaks; review of support for people with Autistic Spectrum conditions
- Training and full involvement: Commissioning training for people with a learning disability who want to commission their own support and who want to be fully involved in the commissioning of support undertaken by the Council.
- In response to the 'Working better together' directive the Council has agreed to pilot the use of PCP reviews to gather information about the needs and expectations of people with a learning disability who are currently getting support via a day opportunity service.

- Northamptonshire has a commitment to Self Directed Support and NCC have started a pilot of Individualised service funds and NHS Northamptonshire will be developing personal budgets with people with learning disability as part of their Personal Healthcare budget Pilot
- The campus reprovision has used an innovative and personalised joint commissioning approach which will result in 89 more people living in settled accommodation
- The joint NHS Northamptonshire and Council commissioning strategy is being turned into a detailed action plan and people with learning disabilities and family carers will be involved in this process.
- A new group of senior managers from NHS Northamptonshire and NCC now meet to provide an oversight and direction to the commissioning of learning disability services. This group reports to the Joint Commissioning Board.
- There is more joint commissioning of support with partners in NHS Northamptonshire
- Our local six lives audit has also resulted in an increased financial commitment to strategic health facilitation.

See also 2.5 and 2.6

### 17.3 How have these resulted in improved outcomes for people with learning disabilities?

All the previous answers have evidenced the different ways the Council and NHS Northamptonshire is now planning and commissioning support for people with learning disabilities.

The impact that we are beginning to see from these changes and from the ongoing development of the Partnership Board include the following:

- People with learning disabilities who need support are in a more powerful and influential position now - they are more engaged in the planning and feel more confident about challenging commissioners and providers when they want things to be different.
- Increasing numbers of people with a learning disability are exercising choice and control over all or parts of their lives.
- The Council has started to ensure that the sort of support that people want is available, rather than fitting people into the service that the Council had previously purchased.
- For some people change has been swift - but for other's years of being institutionalised by years in traditional services is difficult to overcome.
- The wider public is beginning to see the valuable contribution that people with a learning disability can make to their communities.
- There is an increasing commitment by all stakeholders to people with a learning disability leading full and independent lives.
- Although the numbers are still low people are beginning to get paid employment and live in independently - in supported living and in their own homes
- The commissioning of annual health checks and Health Action Plans and the good take up of these are improving the health of individuals.
- Pathway re-designs in NHS have led to improved access and quality of services.

## 18 Future plans and targets

18.1 Have you agreed a local delivery plan for at least the next year?

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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This plan is currently being drafted and will be discussed at our forthcoming away day on 16<sup>th</sup> April 2010.

18.2 Does it include numerical targets where relevant around the following headings?

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If so, please set out against the headings below:

Health	
Where people live	
Employment	
Advocacy and leadership	
Family carers	
Transition	
Personalisation	
Workforce	
Including everyone	

## 19 Key success or best practice

19.1 Have you any particular achievements or good practice you would like to highlight that others can learn from? We are particularly keen to hear about successes in employment.

Our Delivery Plan for 2010/11 has not been agreed yet but is being drafted – there will be targets in many of the areas above but these have yet to be agreed.

The 2010/11 plan has been informed by the information gathered for this report.

Extra Information about some of the numbers

The figures for settled and non settled accommodation in 6.1 and 6.2 are very different to how things are. This is because in 2008/9 the numbers of

reviews that counted towards this number was low.

We think the more likely figures for this for 09/10 are likely to be as set out below although these are provisional and are to be confirmed:

**Settled accommodation**

Owner/Occupier	16	2%
Tenant – LA/RSL	154	19%
Tenant – Private	120	15%
Settled with family/friends	320	39%
Supported accommodation	78	10%
Adult placement	110	13%
Approved premises for offenders	0	0%
Sheltered housing	15	2%
Mobile accommodation	0	0%

**Non Settled accommodation**

Rough sleeper	0	0%
Night Shelter	0	0%
Refuge	0	0%
Temp accommodation	0	0%
Family/friends	5	1%
Acute health	0	0
Registered care	467	96%
Registered nursing	13	3%
Prison	0	0%
Other temp	0	0%

You will note that this does change significantly in terms of the kinds of settled accommodation people are now occupying when compared to the figures for 2008/9.

In terms of areas of good practice that we feel we have in Northamptonshire, they are listed below and more information can be provided if required:

- A Community Connecting project to ensure that people engage with their communities
- A supported employment contract with a provider that ensures that young people are engaging in voluntary or paid part time work and also encourages the use of personal budgets to secure employment
- A co produced multi agency employment plan called “We Can Work it Out” – this plan is included as good practice in the Valuing

Employment Now resources pack

- A local independent audit of services in relation to Six Lives and a Council Scrutiny working group
- We have worked hard to get more Changing Places and lots of people signed the petition we had in Learning disability week last year.

20 Declaration

**Name of Partnership Board:** Northamptonshire Learning Disability Partnership Board

We confirm that the data and information given in this report are accurate (as far as is known) and that this report has been agreed by Board members.

This report covers the period from April 2009 to March 2010.

It was formally agreed at a meeting of the Partnership on: Thursday 11<sup>th</sup> March that this report would be signed off by a working group who has been meeting for the last 3 months to talk about this report.

The working group met on Friday 19<sup>th</sup> March and agreed this report.

**Signed (Co- chairs):**

.....

Alex Bell  
29.3.10

.....

Charlie MacNally  
29.3.10

## **Comments from representative of people with learning disabilities**

### **About the report and how it is set up**

I have talked to people with learning disabilities on our Partnership Board and not many of them have looked at this report. They wanted me to tell you these things:

1. There is too much information needed for this report and it is very long – perhaps some guidance could have been given about the number of words
2. A lot of this information is complicated to understand and they do not want to read it.
3. Expecting people with a learning disability to understand all of this is not reasonable
4. The report and the way it is set out is not at all easy to understand and we hope you will think about this for next year

I also want to tell you that I have felt that there is a lot of pressure on me to ask one person to sign this for everybody else.

### **What we think about our report**

I have been supported to understand the report and I have made some changes to it. I already knew about lots of the things in the report because we have talked about them at the Board meetings. That was easier than seeing it all at once. I think the report tells the truth about what is happening in Northamptonshire.

I would like to know more at our Board meetings about providers of services who are not doing a good job and the Commissioner from the County Council has agreed to share this information at future Board meetings.

We have just found out that some people might be waiting a long time to see a care manager – we are finding out more about this.

**Signed (representative of people with learning disabilities):**

.....  
**Maisie Plumb**  
**29.3.10**

## **Comments from Family Carer representative**

### **About the report and how it is set up**

We have got quite confused about the different dates in this report – some of the information is for 2008/9, some for 2009/10 – next year – might it be better to have the report to be finished in September or October so one year figures and information can be used?

Will the Regional Board really look at all of this information and how will it be shared with them and the national board?

How will we get information back about what Boards are doing across the region and the country?

### **What we think about our report**

We have needed some support to understand the different facts and figures in this report as the dates are different for different things.

We did know a lot of this information before the report was written as we have talked about most of these things at previous Board meetings.

As carers, we feel very involved in the Board and we feel that we get good support. We feel that our views are listened to.

The length of the report is very daunting even though we do think that a lot of the information is useful.

The way the report has been written in Northamptonshire has been very inclusive and we feel that our views about the report have been included.

**Signed (Family Carer representative):**

.....

**Sharon Tansley**  
**29.3.10**

**Data Sources (please state which sources were used for quantitative data):**

As specified within main body of report and the following:  
Care First – Council client recording system  
Safeguarding database – Council system  
Police Hate Crime data  
Finance records – Council and PCT