

# **Review of Services for People with a Learning Disability**

## **Report by the Adult Social Care and Strategic Housing Scrutiny Committee – July 2006**

**...Putting** people first  
**...Promoting** our county  
**...Providing** for our communities  
**...Protecting** our future

***Quality life in a quality county***

## **Note**

The Adult Social Care and Strategic Housing Scrutiny Committee made a number of amendments to the Review report presented to it at its meeting on 26th July, 2006. This final report reflects those amendments.



## Contents

	<b>Page</b>
<b>1. Introduction</b>	<b>3</b>
<b>2. Methods of gathering information</b>	<b>4</b>
<b>3. National Drivers</b>	<b>7</b>
<b>4. Demographics/future trends</b>	<b>8</b>
<b>5. Local Services response</b>	<b>9</b>
<b>6. Key Findings</b>	<b>9</b>
<b>7. Recommendations</b>	<b>11</b>

## Appendices

	<b>Page</b>
<b>1 Scoping statement and terms of reference</b>	<b>13</b>
<b>2 List of consultees</b>	<b>15</b>
<b>3 Visits list</b>	<b>16</b>
<b>4 Resources</b>	<b>18</b>
<b>5 Performance indicators</b>	<b>20</b>
<b>6 Needs Analysis</b>	<b>23</b>
<b>7 Project plans</b>	<b>26</b>
<b>8 Association Of Directors of Social Services report – Recommendations</b>	<b>35</b>
<b>9 Valuing People Partnership Board Plan</b>	<b>36</b>
<b>10 Definition of a learning disability</b>	<b>41</b>
<b>11 Service Map</b>	<b>42</b>

## 1. Introduction

- 1.1 The purpose of the Review was to examine Herefordshire Council's services for people with a learning disability in the light of significant financial pressures.
- 1.2 The review was intended to understand the pressures on the current service; examine the existing change project plans and review the current balance of services.
- 1.3 The Review's aim was to provide guidance to the Cabinet Member (Social Care Adults and Health) on the current and future service needs and service models, and the allocation of resources.
- 1.4 At a meeting on 2nd December 2005 the Committee agreed to split into groups to examine the services and project plans as follows:-

**Assessment and Care – Catherine Nolan** (Lead Officer): Cllr. Mary Bew, Cllr. Rees Mills, Cllr. Glenda Powell

**Accommodation and support – Lydia Bailey** (Lead Officer): Cllr. Polly Andrews, Cllr. Phil Turpin, Cllr John Hope, Chris Penning (HPCT Non-executive)

**Day opportunities – Laura Ferguson** (Lead Officer): Cllr. Keith Grumbley, Cllr. Dick Burke, Cllr. Marcelle Lloyd-Hayes

The Scoping Statement of the Review and Terms of Reference are attached in Appendix I.

- 1.5 The review was undertaken between March and June 2006. This report summarises the key findings of the Review and contains recommendations to the Cabinet Member (Social Care Adults and Health)
- 1.6 The Review Group would like to express their thanks to those people they met and talked to during the Review, in particular those people who use the services. The Review Group is also very grateful to members of the Valuing People Partnership Board for giving of their time and expertise. Particular thanks are extended to those who gave very moving and personal presentations about their personal experiences.

## **2. Methods of gathering Information**

### **2.1 Presentations**

The review group was given a series of presentations about the national and local service context. These are summarised below;

#### **Presentation on Demography**

The distribution of people with learning disability across the age range is changing as mortality rates decrease:

- Between 2001 – 2004 (nationally) the numbers of people with learning disability aged 65 + rose by 31%
- by 2011 – 41% in 60 – 79-year olds
- 56% in 80-year old +

More children are surviving into adulthood with severe and complex needs and requiring a different and more intensive level of support than those who came into the service 10 or 20 years ago.

Informal carers are ageing – a generation who provided direct care for their children into adulthood in the family home.

#### **Presentation on Demand for Services**

The organisation of who provides services has changed. The policy of Care in the Community has led to the closure of large NHS campus, institutional models of care. Local authorities have taken responsibility for the majority of care arrangements for people with a learning disability under community care legislation.

Most adults using social care services do so for limited period – people with learning disability have a life-long need for support.

#### **Presentation on Changing Expectations**

Consistent with society as a whole, generational differences are now more pronounced. Family carers today want their children to have the chance to leave home.

A “one size fits all” approach is no longer sustainable. People expect services to be tailored to an individual’s wishes and aspirations.

## **Presentation on Threats to Existing Funding**

A variety of funding streams contribute to the support of people with a learning disability. However if these funding streams are reduced, individuals and organisations look to the local authority to pick up any deficit. Some examples are:

Supporting People - an important initiative, helping more people with learning disability into supported accommodation and housing related support. A Government review of the allocations to Local Authorities is likely to reduce funding.

NHS funding – the move from NHS hospital care to care in the community has reduced NHS contribution year on year. Tighter eligibility criteria for NHS funding (free nursing care) have meant responsibilities have been transferred to L.A.s.

Nationally there has been a large increase in spending by Local Authorities – however, recorded spending by NHS has fallen, despite the increase in numbers with complex health needs.

Further Education Funding – Potential reductions are planned on F.E. courses to reallocate funding to vocational courses. Individuals will look to replace this with LA day opportunities services.

Preserved rights - Central Government funding formula assumed a rapid reduction in need for residential care. L.A.s are required to pick up the loss of grant if individuals are still in residential care.

## **Presentation on Assessment and Care Management**

This is the access point to services, both for people with a learning disability and their carers, usually parents. The service is provided in partnership with HPCT, with HC having managerial responsibility for a team of professional staff, social workers, nurses, occupational therapists. The team provides Community Care and Health assessments, followed by a personalised care plan. Resources to meet needs identified in the care plan as meeting the Council's eligibility criteria are agreed through a funding panel.

Personalised care budgets have been proposed in the White Paper "Your Health Your Care Your Say" as a means of giving people who require care more choice and control over the way services are provided. Herefordshire has been successful in joining the 2<sup>nd</sup> phase of a national programme (In Control) to pilot this approach.

The team has a significant number of vacancies of key staff groups i.e. social workers and community nurses. Staff need support in risk management to promote independent living options.

## **Presentation on Accommodation and Support**

Without suitable accommodation the principles of Valuing People, “rights, independence, choice and inclusion” are compromised.

The current housing options available to people range from remaining in the family home, supported accommodation, home ownership, to residential and nursing care.

A housing needs analysis has scoped the local supply of accommodation and asked all people known to the service about their accommodation requirements and plans through a housing questionnaire.

Herefordshire is fortunate not to have anyone accommodated in a long-stay hospital environment but has a disproportionate number of people in residential care.

A number of people placed in registered care some years ago could be supported in more independent models more cost-effectively. However in order to support them to move into a more independent living model, we will need to decommission some services.

Some residential services established many years ago are not able to adapt to the increasing needs of people as they age. Some people will have to move as their needs change and other models of accommodation are developed.

## **Presentation on Day opportunities modernisation**

People with a learning disability are keen to have paid employment wherever possible – this can be achieved in a variety of ways through the development of social firms and self-employment. However many individuals will not be able to obtain work and require purposeful activities during the day.

Local authorities are required to provide a range of day opportunities for people with disabilities. The best models offer a variety of options and not a “one size fits all”. Services should focus on quality outcomes for individuals.

Services should promote ordinary lifestyle opportunities, which compare to other community members. In order to achieve a range of opportunities, the LA needs to make strong working partnerships with a range of providers.

The current day opportunities service has developed some positive links with other providers and community partners. There is a need for innovation to create more integrated provision in smaller localities, with an identity of their own, rather than as a “day service ”.

## **2.2 Visits**

The review group attended visits to services between 9<sup>th</sup> February and 9<sup>th</sup> March linked with the three project groups. A full inventory is in Appendix 3.

### 2.3 Joint meeting with Valuing People Partnership Board on 16th March, 2006.

Every LA is required to set up a Valuing People Partnership Board to take responsibility for the local delivery of the White Paper<sup>i</sup> to be led by the LA with active participation of all key stakeholders. Herefordshire Partnership Board is co-chaired by Stephanie Canham (Head of Adult Social Care) and Brian Paisley, a member of the Peoples' Union a self-advocacy Group for people with a learning disability.

The review group held a joint meeting with the Valuing People Partnership Board at Withington Village Hall on 16<sup>th</sup> March, 2006, to begin the process of developing the review recommendations.

## 3. National Drivers

A number of Government initiatives have been published to support: a national drive for inclusion of people with learning disabilities in society.

### 3.1 “Valuing People”<sup>ii</sup> in 2001 – this was the first major policy statement on Learning Disability for 30 years

- Key principles - Rights, Independence, Choice and Inclusion. Involving people with learning disabilities in services, planning and developments is a “given”.
- Emphasis on person-centred approach as the basis for new Government objectives and targets re. transitions, day opportunities, employment, accommodation, etc. (i.e. most aspects of life). Small Development Fund to kick-start developments; recycled health money.

### 3.2 “Improving the Life Chances of Disabled People”<sup>iii</sup>

“By 2025, disabled people in Britain should have full opportunities and choices to improve their quality of life and will be respected and included as equal members of society”.

- Independent living - by moving to individual budgets for disabled people to give better choice.
- Support for families with young disabled children – access to mainstream childcare and early education, and child & family centred approach to services.

- Smooth transition into adulthood – effective planning, removing cliff edges in service provision, and access to more opportunities and choices.
- Employment - support for getting into employment and staying in it. Getting people off benefit dependency by changing entitlement rules, work-focussed training and support.

### 3.3 **“Independence Well-Being and Choice”**

A “transformation” in adult social care, aiming to give people more choice, higher quality support and more control over their lives.

- Individual budgets - for people with assessed needs (extension of Direct Payments with “care navigators”).
- More emphasis on preventative services and early intervention.
- Leadership role of the Local Authority – strategic needs assessments for 10 – 15 years. Increased role for voluntary sector
- Significant change over the past 30 years – from hospital care to the social institutions of care homes and into enabling people with a learning disability to take their rightful place in society and lead more fulfilled and valued lives.

## 4. **Demographics and Future Trends**

- 4.1 In response to the ongoing financial and service demand, the Director of Adult and Community Services has commissioned an assessment of the social care needs for older people and adults with learning disabilities
- 4.2 Notwithstanding substantial additional investment over recent years and changes in the patterns of services aimed to enable people to lead safe and fulfilled lives in their own homes and communities rather than in residential care, the Council’s patterns and levels of social care services for older people and for adults with learning disabilities or difficulties (LDD), place it in the lowest quartile of local authorities in England.
- 4.3 In addition, the level of demand for the Council’s services for these groups has risen substantially in recent years and continues to do so, to the extent that, in both 2004-05 and the current year, expenditure has greatly exceeded budget provision.
- 4.4 In the light of these considerations, the Council wishes to work with its partners, and with the client groups themselves and their families and

representatives, to develop and deliver better, sustainable services in the future. It wants, in particular, to strike the best possible balance between preventative services and the provision of more intensive care.

- 4.5 The development of services for people with LDD will continue to be planned through a Partnership Strategy developed by the Valuing People Partnership Board. It will take decisions about the future development of services, and associated investment, in the light of the results of this assessment.
- 4.6 This assessment will relate to social care for people over 18 with LD, but including the support necessary to ensure the smoothest possible transition from adolescence to adulthood. Within this group, it will consider the particular needs and service requirements of different age groups and of people who have both LDD and mental health problems.
- 4.7 Looking forward to 2020, the study will assess:
  - the principal factors that will determine the need for social care services. These will include demographic change, taking into account the expected levels and characteristics of in-migration; the implications of changing patterns of health, treatment, and the development of health care services in response to them; the proportion of people who may be able to pay all or part of the costs of their social care; and the nature and condition of housing
  - the possible patterns and levels of services to meet those needs, including the balance of services between preventative measures and intensive care that is likely to produce the best outcomes, measured in terms of independence, well-being and choice; and what is necessary to secure equal access to services for especially vulnerable or excluded groups and different ethnic communities
- 4.8 This long-term picture will be the context for a more detailed assessment on similar lines covering the period to 2011. In addition to estimating needs and the possible patterns and levels of service to meet them, this medium-term assessment will estimate the associated revenue and capital costs, taking into account the scope for efficiency savings in moving from the present services to a new pattern.
- 4.9 This assessment is intended to provide the starting point for Council decisions about future patterns and levels of services. Its conclusions will need to be supplemented by proper consultation with customer groups and partners, and with the drawing up of a precise programme for implementation, including the organisational implications, management arrangements, detailed workforce planning and budgets.

4.10 This analysis will provide the basis for costing three possible patterns and levels of services.

**A – adequate services:** a broadly average level of provision and outcomes, equating to a solid 2\* inspection rating

**B – good services:** better than average, equating to 3\*

**C – excellent services:** equating to 4\*

4.11 An interim report, with initial findings, was produced in May 2006. This concentrated on the assessment of need for services as the foundation for the remainder of the assessment. It highlighted issues which may be relevant to the development and funding of services in 2006-07. A final report by 30 August 2006 will provide costed options for Cabinet consideration and consultation.

## **5. Local services response.**

5.1 Local services have developed a modernisation project to respond to national and local drivers. The project plans in Appendix 7 provide the framework for the change programme.

5.2 The three projects reflect the need for change in the following areas:

Assessment and care management – providing person-centred approach, and individualised care, based on the principles of Valuing People.

Accommodation and support – reshaping services to respond to changing needs and financial imperatives.

Day opportunities – to ensure opportunities are created for paid employment or participation in valued and useful activities such as education, leisure and volunteering.

## **6. Key Findings**

The key findings of the three Groups of Members conducting the Review were as follows:

### **Assessment & Care Management**

1. People with a learning disability need to be supported to join in fully with ordinary activities. The Council's diversity, disability and social

inclusion policies should actively involve people with a learning disability.

2. People with a learning disability may be prevented from fully engaging in society because of a concern about their vulnerability. Risk assessment and risk management strategies should be developed for individuals.
3. More choice about services and more control regarding how they are delivered can be promoted by the In Control pilot (personalised budget).
4. The period of transition from Children's services to adulthood is an opportunity to promote inclusion.

### **Accommodation & Support**

1. A disproportionate number of service users are accommodated in registered care settings.
2. The availability of affordable housing of the right type has hampered a move on to more independent living for many people.
3. Some of the registered care settings still have an "institutional" feel to them.
4. Some registered care settings have increasing costs, as they are not able to adapt to individuals' changing needs.
5. The costs of care fall to the Council in registered care. Other funding streams in supported accommodation, e.g. housing benefit and Supporting People, can be used.

### **Day Opportunities Modernisation**

1. Some areas have achieved more community integration than others. The best practice offers a variety of options.
2. Fewer people are in genuine employment and too many spend too long in work preparation.
3. The free 'bus pass policy for people with a disability should support a move away from supported transport. The review highlighted the scope to achieve efficiencies in the use of transport provided for service users, also recognising that the greater use of public transport would promote a more inclusive approach benefiting service users.
4. Buildings-based services tie up resources that cannot be released to offer more individualised options.
5. The "in-house" services do not operate on the same commercial footing as those in the independent sector.
6. Society as a whole needs to support the integration of people with a learning disability.

## **7. Recommendations**

- (a) An over-arching aim of the Directorate's service should be adopted that seeks to support individuals to live as full and independent lives as possible, based on the premise of "ordinary lives" and social inclusion.**
- (b) Appropriate accommodation is the key to achieving this aim. The Council and its partners should explore all opportunities for providing different options for accommodation and support.**
- (c) All the Council's existing sites must be reviewed, with a view to using capital receipts for developing alternative accommodation.**
- (d) Examine the possibility of providing an extra care housing model for people with a learning disability.**
- (e) Following the needs analysis, engage partners in the independent sector to develop the balance of community and residential services.**
- (f) Develop a greater understanding of the costs of individuals' care arrangements, using the In Control Model.**
- (g) The Council move away from a building-based day opportunities model and work with the voluntary and independent sector to develop more opportunities for choice and inclusion. A review of the unit costs of providing transport across the County and a range of in-house services is required.**
- (h) Models of provision should be developed which maximise funding streams.**
- (i) The Council should use its wider inclusion and disability and diversity strategies to support the social inclusion of people with learning disabilities.**
- (j) That the Executive's response to the Review including an action plan be reported to the first available meeting of the Committee after the Executive has approved its response;**

- (k) That a further report on progress in response to the Review then be made after six months with consideration then being given to the need for any further reports to be made.**

### **References**

<sup>1</sup> Valuing People: A New Strategy for Learning Disability for the 21<sup>st</sup> Century: Implementation Guidance. Department of Health, LAC(2001)23, 31 August 2001

<sup>2</sup> Valuing People: A New Strategy for Learning Disability for the 21<sup>st</sup> Century: A White Paper  
Department of Health, Cm 5086, March 2001

<sup>3</sup> Improving the Life Chances of Disabled People,  
Department for Work and Pensions, Department of Health, Department for Education and Skills, Office of the Deputy Prime Minister, January 2005

<sup>4</sup> Independence, Well-being and Choice: Our vision for the future of social care for adults in England  
Department of Health, Cm6499, March, 2005.

## Appendix 1

### Scoping Statement and Terms of Reference

<b>REVIEW:</b>	<b>Service for people with a Learning Disabilities</b>	
<b>Committee:</b>	<b>Social Care and Housing Scrutiny</b>	<b>Chair: Cllr Lloyd-Hayes</b>
<b>Lead support officer:</b>	<b>Stephanie Canham HOS adults</b>	

#### **SCOPING**

##### **Terms of Reference**

Members will review the three project plans – Assessment and Care management, Accommodation and Care and Day Opportunities as follows;

- To understand the pressures on the service of changing demography, spending patterns and changes in expectations.
- To review the current use of resources and the future needs
- Review the current range of services available against the principles of Valuing People
- Examine the relationship between funding, performance and policy.
- Examine partnership arrangements.
- Review the development project plans.
- Following the review to make recommendations to the Cabinet Member about policy development.

##### **Desired outcomes**

To make recommendations to Cabinet Member on;

- The service needs and service model for today and tomorrow
- The process of allocating resources.

---

---

**Key questions**

- What are the current resources available to the service and how are they committed?
  - How is the service currently performing – what are the performance indicators?
  - What services that people with a learning disability want?
  - Are we being sufficiently creative in Service options?
  - What are the national drivers?
  - What are the future demands on the service and how are they different to today's requirements?
  - Eligibility Criteria – Who does Social Care help – what is the role of other agencies health, education, Connexions?
  - What support do informal carers want? What are they getting at the moment?
- 
- 

---

---

**Time Scales**

- January – confirm the scrutiny brief and scope
  - To be agreed.
- 
-

## **Appendix 2**

### **List of Consultees**

Staff and Services met on visits

V.P. Partnership Board

MENCAP local Committee

### **Appendix 3**

## **Scrutiny Visits**

**17<sup>th</sup> February 2006**

<b>Time</b>	<b>Visit</b>	<b>Details</b>
9.30 – 10.30	Windsor Place Respite Service	Ryelands Road Leominster Herefordshire 01568 613098
10.30 - 11.30	Ferlys House 4 bed group home	Leominster Stokenhill Road, Leominster, Herefordshire, HR6 8PP 01568 612558
12.00 -1.00	Housing Related Support (discussion with provider)	Corn Square, Leominster Herefordshire 01432 261543
1.00 – 3.00	Lunch and travel to Hereford	
3.00 – 4.00	Honeysuckle Close (cluster flats)	Honeysuckle Close Hampton Dene Road Tupsley HR1 1XL  01432 343679

**24<sup>th</sup> February 2006**

<b>Time</b>	<b>Visit</b>	<b>Details</b>
9.30 am – 10.30	Adult placement – Supported Lodging	Carol Pitt and Julie Napper, at 7 Heywood Ave, Tupsley, 01432 263391
10.45 – 11.45	South Bank Close Residential Campus (3 bungalows + resource	6 – 10 Southbank Close Southbank Road Hereford

	centre)	01432 268258
12.00 – 1.00	Adult Placement	Ian Edwards and Andrew Mckean, 81 Dorchester Way, Belmont, 01432 343090
1.00 - 2.00	Lunch	
2.00 – 3.00	Ivy Close	1-4 Ivy Close Ledbury Road Hereford 01432 274311
3.00 – 4.00	Hafod Road 6 beds/2 flats  People with Autistic Spectrum Disorder	Hafod Road Hereford  01432 375926

**9<sup>th</sup> February, 2006.**

10.00 – 10.20	Presentation by Billy McAlinden “What is the CLDT and what do we do”	
10.30 – 11.30	Allocation Meeting	
11.30 – 1.00	Visits to three people the team worked with	
1.00 – 2.00	Visit to Barrs Court School An opportunity to discuss Transition issues and implications for Adult Services	
2.30 – 3.30	Hillrise Palliative Care and Sexuality work in which the team has been involved and issues associated with services for people whose behaviour challenges	
3.30 – 4.00	Brockington Discussion	

## Appendix 4

### Resources

#### Final Figures for 2005/06 - Learning Disabilities

	Budget £	Expend £	Variance £
<b>Residential Placements</b>			
Blocks	842,423	906,246	63,823
Spot	100,000	125,139	25,139
Community Care Residential	2,175,610	2,664,748	489,138
Community Care Nursing	39,880	251,574	211,694
In-house	575,419	535,284	(40,135)
	<u>3,733,332</u>	<u>4,482,991</u>	<u>749,659</u>
<b>Support At Home</b>			
Community Supported Living	493,720	550,863	57,143
External Home Care	338,880	386,372	47,492
Direct Payments	178,450	95,432	(83,018)
	<u>1,011,050</u>	<u>1,032,667</u>	<u>21,617</u>
<b>Assessment and Care Management</b>			
Social Work Teams	350,527	306,830	(43,697)
Staff Training	17,917	10,793	(7,124)
Community Support Unit	75,663	80,591	4,928
Person Centred Planning	12,500	12,500	0
	<u>456,607</u>	<u>410,714</u>	<u>(45,893)</u>
<b>Day Ops</b>			
External - Including Workmatch	130,680	182,668	51,988
In-house	1,149,406	1,167,869	18,463
	<u>1,280,086</u>	<u>1,350,537</u>	<u>70,451</u>
<b>Grants to Voluntary Organisations</b>	<b>147,140</b>	<b>152,238</b>	<b>5,098</b>
<b>Transport</b>	<b>385,340</b>	<b>436,347</b>	<b>51,007</b>
<b>Southbank Close - All three Areas</b>	<b>0</b>	<b>81,252</b>	<b>81,252</b>
<b>GRAND TOTALS FOR YEAR</b>	<u><u>7,013,555</u></u>	<u><u>7,946,746</u></u>	<u><u>933,191</u></u>

Figures are Net

S'bank expend is net after Pool Contribution from PCT

**2004/05 Outturn**

**Final Figures for 2004/05 – Learning Disabilities**

	<b>Budget</b>	<b>Expend</b>	<b>Variance/ Overspend</b>
	<b>£</b>	<b>£</b>	<b>£</b>
<b>All Budgets</b>	5,708,630	7,222,632	1,514,002

## Appendix 5

### Performance Indicators

#### Performance Assessment Framework (PAF)

There is only one Performance Indicator specifically for adults with learning disabilities in the PAF. People with learning disabilities over 65 are included in the data for all older people, and at present cannot be distinguished in the figures.

C30 - Adults 18-64 with LD helped to live at home (per 1000 pop 18-64)  
(This Includes support in the home, day services and short breaks)

The latest published data is for 2004-05 when the Herefordshire figure was 2.2, placing the authority in Band 3 (low). There are 5 Bands from low to high.

#### Delivery and Improvement Statement (DIS)

This produces more detailed performance data on a wide range of service types.

In March 2005, The Valuing People Support Team analysed DIS-information from 150 councils. Most related to activity in 2003/04. The comparisons below are drawn from this work:

- Percentage of young people referred to adult services who have a Person-centred Plan (2004/05)

Herefordshire	57	<i>England average</i>	39
		<i>West Midlands average</i>	22

- People with learning disabilities getting direct payments Sept. 2004 per 100,000 population aged 18-64

Herefordshire	7.7	<i>England total</i>	7.7
		<i>West Midlands</i>	7.4

- The amount spent by local councils on advocacy for people with learning disabilities per person with learning disabilities known to the council (£000s)

	Spend in 2003-04	Planned spend in 2004-05
Herefordshire	85	113
<i>England average</i>	126	140
<i>West Midlands average</i>	127	141

- The percentage of family carers of people with learning disabilities known to the council who have had an assessment or review in the last year

	Carers aged 18-64	Carers aged 65+
Carers' assessments and reviews in 2003/04		
Herefordshire	75	75

<i>England total</i>	28		36
<i>West Midlands</i>	31		27

- The percentage of people with learning disabilities receiving services who have planned short breaks 2003-04

Herefordshire	22	<i>England average</i>	21
		<i>West Midlands</i>	22

- The number of units of supported accommodation and floating support for people with learning disabilities funded by the Supporting People programme (March 2003). Units per 100,000 population aged 18-64

	Supported Accommodation	Floating support	Total
Herefordshire	113	88	202
<i>England</i>	95	17	112
<i>West Midlands</i>	71	18	88

- The number of people with learning disabilities who get help from the Independent Living Fund (December 2004) per 100,000-population aged 18-64

Herefordshire	34	<i>England</i>	11
		<i>West Midlands</i>	16

- The number of people with learning disabilities who are living in a care home or private hospital at 1 April 2004 per 100,000 population aged 18-64

Herefordshire	210	<i>England total</i>	129
		<i>West Midlands</i>	135

- The number of adults with learning disabilities living outside the council area at 31 March 2004 per 100,000 population aged 18+

Herefordshire	14	<i>England</i>	28
		<i>West Midlands</i>	23

- The number of people living in NHS long stay hospitals at 1 April 2004, showing the council from which the person originates.

Herefordshire	0	<i>England total</i>	1,062
		<i>West Midlands</i>	86

- The percentage of people with learning disabilities known to the council who are in paid work 2003-04

Herefordshire	14	<i>England average</i>	11
		<i>West Midlands</i>	12

- The percentage of people using services who are from minority ethnic groups, and the percentage whose ethnicity is not recorded (2003/04)

	% of people using services whose ethnicity is not recorded	% of people using services who are from BME groups	% of local population which is non-white (2001 census)
--	--	--	--

Herefordshire	0%	2%	1%
<i>England</i>	14%	6%	9%
<i>West Midlands</i>	10%	8%	11%

- The time taken to complete assessments for people with learning disabilities in 2003/04. Assessments for people with learning disabilities completed within 4 weeks

	Started within 2 weeks	Completed within 4 weeks
Herefordshire	0%	84%
<i>England</i>	61%	45%
<i>West Midlands</i>	52%	53%

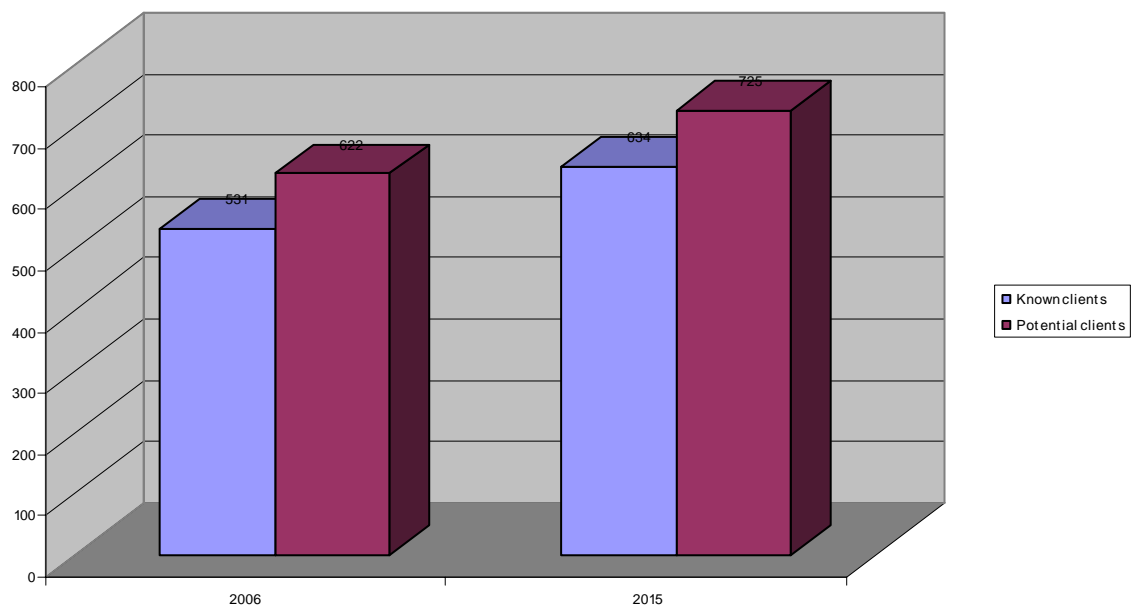
## Appendix 6

### Needs Analysis – Executive Summary

*(A slightly revised version of this analysis is being prepared but that will not affect the substance of the analysis)*

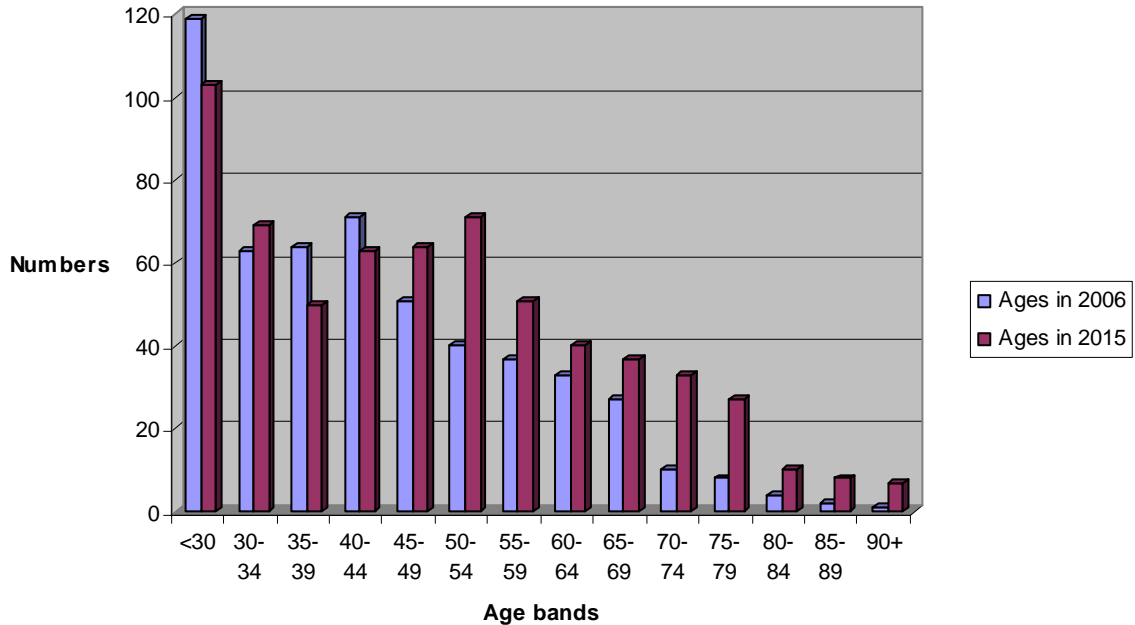
#### Population and trends

- 531 adults are known to Herefordshire Learning Disability Services in April 2006. The majority of these people have a moderate, severe, or profound learning disability, but the service also supports some people with mild learning disabilities.
- 531 is lower than the number that could be anticipated by national prevalence rates for people with moderate to profound learning disabilities, and might imply that some people who would be eligible for services are currently unknown. It is quite possible that these people will be referred for services in the future. The chart below shows the range between known and potential numbers of service users.



- As in the rest of the population, people with learning disabilities are living longer, and the effects of this on service demands are already being felt. The age profile of the client group for the service will change substantially over the next 15 years, and shift towards the older groups, as shown in the chart below.

Age bands in 2006 and 2015 (known clients only)



### Demands for social and health care

- By the time people with learning disabilities reach their mid 40s, most have moved from the family home into other accommodation and support (ranging from independent living to intensive residential or nursing care). At this age, most family carers are around 70 years old or more. In Herefordshire, there are currently 27 people over 45 living with a family carer (18% of those in family care).
- The level of demand for care and support services is largely reflected in the dependency levels of the client group. Two major factors influence the changes to the dependency profile of the client group in 2006 and future years:
  - the transfer of children and young people with learning disabilities to adult services (many of whom are now surviving very severe disabling conditions into adulthood)
  - the ageing population of people with learning disabilities, who consequently need more care and support in daily living.

In Herefordshire, clients are assigned into 6 dependency bandings (with 1 being lowest and 6 highest). The changing dependency profile is shown in the table below:

	2006	2015	% change

Lower dependency (Bands 1 & 2)	226	245	+8%
Higher dependency (Bands 3 – 6)	305	388	+27%

- Overall, the number of people in the higher dependency bands will rise by ¼ in the next 10 years.
- An important but unknown factor is that people with milder learning disabilities who are not eligible for a service at present may become eligible in the future as their age and dependency increases.
- Another factor is a purely local phenomenon. Herefordshire has a high level of learning disability residential care beds per head of population compared with other authorities (the highest in the West Midlands). The availability of beds has led to an influx of people from outside Herefordshire. At present, out-county people comprise up to 22% of the total population of adults with learning disabilities living here.
- The impact on local services is twofold:
  - Demands for health services from both general teams and the specialist Community Learning Disabilities Team (CLDT)
  - Referrals to the Community Team for adult protection investigations (this currently amounts to between 25-30 per annum)

These already impinge on the capacity of the CLDT to meet local needs, and any further expansion of residential facilities will add to these demands.

## Appendix 7

### Project Plans

#### Learning Disability Accommodation and Support Modernisation Plan 2005 - 2007

Action	Outline	Detail/timescale
<b>Part One – where we are: July 2005 – December 2005</b>		
<u>Needs Analysis</u>	<ul style="list-style-type: none"> <li>• Community needs Analysis: Detailed analysis looking at current users, age profiles, current and future needs (5-10 years)</li> <li>• Current User Needs Analysis: This would include work with stakeholders and other professional's, as well as a housing needs questionnaire.</li> </ul>	<ul style="list-style-type: none"> <li>□ Collate and clean available data for people aged 14+</li> <li>□ Develop and send questionnaire to all known individuals and other key groups</li> <li>□ Gather information from all other sources (sp etc)</li> <li>□ Develop methodology for presenting above</li> <li>□ Write report on above</li> </ul>
<u>Analysis of current provision</u>	<ul style="list-style-type: none"> <li>• Analysis of respite care.</li> <li>• What we are currently purchasing, and at what cost</li> <li>• What needs are being met what are the commissioning difficulties etc.</li> <li>• What is working well</li> </ul>	<ul style="list-style-type: none"> <li>□ Collate info including transport for respite care</li> <li>□ Full analysis of current provision of residential Including risk areas, what is working well and pressure areas</li> </ul>
<u>Research and identification of potential models of service delivery</u>	<ul style="list-style-type: none"> <li>• Best practice within LD services</li> <li>• What solutions authorities have found</li> <li>• What is happening across the region,</li> <li>• Innovative approaches to service delivery (assistive technology etc)</li> <li>• Use of innovative design build</li> </ul>	<ul style="list-style-type: none"> <li>□ Research across region and nationally. Look at who is doing, what. And how this could relate to local needs analysis.</li> </ul>

<u>Philosophy and agreement of models</u>	<ul style="list-style-type: none"> <li>• What is the philosophy of Herefordshire?</li> <li>• What are the needs over the next 5-10 years</li> <li>• How do we propose to meet these needs</li> <li>• What resources do we have in Herefordshire?</li> </ul>	<ul style="list-style-type: none"> <li>□ Pulling together of all of the information gathered in the first 3 sections, in a format that is useful and accessible to a range of people</li> </ul>	Jan/Feb 2006
<u>Recommendations based on above</u>	<ul style="list-style-type: none"> <li>• Recommendations on current and future commissioning</li> <li>• Links with other areas of provision (day op's, domiciliary support etc.)</li> </ul>	<ul style="list-style-type: none"> <li>□ First report based on all findings to be presented to the Commissioning group May 2006</li> <li>□ Agree programme for In-house care homes</li> </ul>	April 2006

**Part Two - Development Jan 06 – March 06**

<u>Commissioning Plan (including Housing strategy)</u>	<ul style="list-style-type: none"> <li>□ Detailed plan for the whole spectrum of supported housing (including short breaks) needed over the next 5 – 10 yrs.</li> </ul>	<ul style="list-style-type: none"> <li>□ What provision of spectrum do we need</li> <li>□ What will it look like, what sort of services will be offered</li> </ul>	May 2006
<u>Managing the market</u>	<ul style="list-style-type: none"> <li>□ Identify current and potential providers</li> </ul>	<ul style="list-style-type: none"> <li>□ Ongoing throughout project, but more intensive once commissioning plan is developed</li> </ul>	

<u>Consultation</u>	<ul style="list-style-type: none"> <li>□ Share and consult (on agreed aspects) of the commissioning plan</li> </ul>	<ul style="list-style-type: none"> <li>□ Agree consultation process with current providers, as well as other stakeholders, to gather final feedback</li> </ul>	April - June 2006
<u>Agree Commissioning priorities</u>	<ul style="list-style-type: none"> <li>□ Finalise commissioning Plan and agree priorities for commissioning and/or reconfiguration and timescales.</li> </ul>	<ul style="list-style-type: none"> <li>□ Agree final plan</li> <li>□ Agree what needs to change and what needs</li> </ul>	End June 2006
<b>Part Three - Commissioning/Reconfiguration of new services April 2006 – April 07 onwards</b>			
<u>Specifications for services to be commissioned and/or reconfigured</u>	<ul style="list-style-type: none"> <li>□ Detailed specifications for provision to be commissioned/reconfigured</li> <li>□ Specifications for existing services</li> </ul>	<ul style="list-style-type: none"> <li>□ Agree best practice model for specifications</li> <li>□ Draft specifications for different bands/types of services</li> <li>□ Final specifications for services</li> </ul>	
<u>Development and/or reconfiguration of existing services</u>	<ul style="list-style-type: none"> <li>□ Co-ordination of reconfiguration in line with agreed specifications</li> </ul>		
<u>Commissioning of new services as identified in part two</u>	<ul style="list-style-type: none"> <li>□ Work with commissioning support to commission new services</li> </ul>		
<u>Development of protocols and pathways</u>	<ul style="list-style-type: none"> <li>□ Work with care management on protocols, procedures and best practice for assessment and access to supported housing (pathways)</li> <li>□ Framework and protocols for ensuring people are placed in correct level of provision</li> </ul>		

<u>Framework for recording need</u>	<ul style="list-style-type: none"> <li>□ Identification of ways to monitor ongoing and future need to ensure best use of resources and demand.</li> </ul>		
-------------------------------------	---	--	--

Note: Work will also cover the partnership agreement for the care homes which will have it's own action plan and timescale.

### **Learning Disability Day Opportunities Modernisation Plan 2006 – 2008**

Action	Details
<b>Part One– where we are ( First part of the project - year 1) Indicative times February 06 – August 06</b>	
<u>Needs Analysis</u>	<ul style="list-style-type: none"> <li>□ Detailed analysis looking at current users, age profiles, current and future needs (5-10 years) This would include work with stakeholders and other professionals</li> <li>□ Establish systems for data to remain live and link to other relevant databases i.e. transitions</li> </ul>
<u>Visioning</u>	<ul style="list-style-type: none"> <li>□ Work across the county to involve stakeholders in visioning events to create a backdrop for change and to inform the culture of the strategy.</li> <li>□ Seek political support for changes ahead.</li> </ul>
<u>Consultation/communication plan</u>	<ul style="list-style-type: none"> <li>□ Maintain contact and networks with key stakeholders.</li> <li>□ Develop a detailed consultation and communication plan to ensure engagement and involvement of key stakeholders throughout project.</li> <li>□ Working links with H.R. and Unions and other key groups.</li> <li>□ Recruitment of development assistant ( a person with a learning disability )</li> </ul>
<u>Current budgets &amp; interim arrangements</u>	<ul style="list-style-type: none"> <li>□ Unpick current L.A. base budgets to reflect true costs and levels of service.</li> <li>□ Review current systems</li> <li>□ Restructuring within teams to create capacity to develop.</li> </ul>
<u>Analysis of current provision</u>	<ul style="list-style-type: none"> <li>□ What we are currently purchasing, what cost, what needs are being met what are the commissioning difficulties.</li> </ul>

	<ul style="list-style-type: none"> <li>❑ Eligibility and legislation.</li> <li>❑ Identify process for reviewing and monitoring S.L.A.'s and tendering processes.</li> </ul>
<u>National picture</u>	<ul style="list-style-type: none"> <li>❑ National developments and what other authorities are doing.</li> <li>❑ What is happening across the region, and the local network.</li> <li>❑ Links to valuing people, Green Paper etc.</li> <li>❑ Identify shared pieces of work across authorities</li> </ul>
<u>Options Appraisal</u>	<ul style="list-style-type: none"> <li>❑ What are the needs over the next 5-10 years</li> <li>❑ What are the gaps in the current provision</li> <li>❑ Impact of Direct Payments and In Control.</li> </ul>
<u>Strategy to Modernise Day Opportunities</u>	<ul style="list-style-type: none"> <li>❑ Create a visible and accessible document to communicate the way forward for Day opportunities and employment options in Herefordshire and promote the vision.</li> <li>❑ Launch and promotion of the strategy</li> </ul>

<b>Part Two - Development of project in Localities (Second phase of the project.)</b>	
This will happen in differing time frames according to each locality and it's readiness to modernise February 06 –Spring 07- locality Plans to be developed and staged implementation	
<u>Workforce Planning</u>	<ul style="list-style-type: none"> <li>❑ Workforce strategy</li> <li>❑ Restructuring of services / roles to deliver new services and build infrastructures</li> <li>❑ Identifying and meeting training needs</li> <li>❑ Agree support structures / mentors for managers and staff</li> <li>❑ Job Descriptions &amp; person specifications.</li> </ul>
<u>Modernisation plan for council provided and commissioned services</u>	<ul style="list-style-type: none"> <li>❑ Prioritise L.A. services to modernise first</li> <li>❑ Work with services that are ready to move first and will be models of good practice.</li> <li>❑ Develop plans in localities that connect to communities.</li> <li>❑ Identify plans around buildings.</li> <li>❑ Evolve plans for day opportunities modernisation including timescales, key partners, key objectives and indicators.</li> <li>❑ Link to local and national strategies</li> </ul>
<u>Ongoing Consultation and Engagement</u>	<ul style="list-style-type: none"> <li>❑ Formal engagement and consultation with stakeholders (including members, family carers, service users, staff, community members, councillors, current and potential providers)</li> <li>❑ Creation of local champions to take the work forward.</li> </ul>
<u>Feasibility Study based on agreed model</u>	<ul style="list-style-type: none"> <li>❑ Detailed work on feasibility of proposals</li> <li>❑ Work with partners to create win/win situations and skills mix.</li> <li>❑ Seek to “grow our own” providers where appropriate.</li> <li>❑ Identify external funding opportunities.</li> <li>❑ Detailed financial appraisals, best value, and models of purchasing.</li> <li>❑ Plan the steps for how we manage the changes</li> </ul>
<u>Agreed Outcomes for individuals</u>	<ul style="list-style-type: none"> <li>❑ Identify service specifications</li> </ul>

	<ul style="list-style-type: none"> <li>❑ Measurable targets for outcomes for individuals.</li> <li>❑ Links to and informed by person centred approaches.</li> <li>❑ Agree monitoring and review arrangements</li> </ul>
<u>Final modernisation plan for council provided and commissioned services</u>	<ul style="list-style-type: none"> <li>❑ Agree next steps for project and beyond.</li> <li>❑ Develop links with other areas of service delivery, i.e. transport.</li> <li>❑ Communication of changes to those who link with services.</li> </ul>

<b>Part Three – Implementation of local modernisation plans (final part of project) August 06- February 08</b>	
<u>Delivery Strategy</u>	<ul style="list-style-type: none"> <li>❑ Plan for managing the components of the agreed changes</li> </ul>
<u>Ongoing Consultation and Engagement</u>	<ul style="list-style-type: none"> <li>❑ Continued engagement and consultation with stakeholders at a local level (including members, family carers, service users, staff, community members, councillors and current and potential providers)</li> </ul>
<u>Development and/or reconfiguration of existing services</u>	<ul style="list-style-type: none"> <li>❑ Co-ordination of reconfiguration in line with agreed specifications</li> <li>❑ Development of staff roles and HR changes</li> <li>❑ Support for key managers</li> <li>❑ Use of regional and National support</li> </ul>
<u>Commissioning of new services as identified</u>	<ul style="list-style-type: none"> <li>❑ Commissioning of any new services as agreed within timescales</li> <li>❑ Agree remit and function of each service.</li> <li>❑ Identify monitoring and review processes</li> </ul>
<u>Development of protocols and pathways</u>	<ul style="list-style-type: none"> <li>❑ Work within existing systems where appropriate and reinvent systems as required.</li> <li>❑ Communicate protocols, procedures and best practice to ensure access to appropriate day opportunities with organisations.</li> </ul>

<u>Review and evaluate</u>	<ul style="list-style-type: none"> <li>❑ Performance management, ongoing processing of data against set targets.</li> <li>❑ Evaluate progress to date and develop plan for any further action to be taken outside of project with identified timescales and leads.</li> </ul>
----------------------------	---

### **Learning Disability Community Team – Modernisation Plan 2005**

Action	Details
To utilise work already in development to achieve the following:	
1. <u>Where we Are</u> <u>Review of community team</u>	<ul style="list-style-type: none"> <li>❑ Agreed Philosophy and operational policy</li> <li>❑ Review of skill mix within team and future need (management structure)</li> <li>❑ Clear Allocation and agreement of tasks</li> <li>❑ Training and development plan for team</li> <li>❑ HR arrangements (Review of Secondments)</li> </ul>
2. <u>Development</u> <u>Review and development of operational systems</u>	<ul style="list-style-type: none"> <li>❑ Develop Single systems for <ul style="list-style-type: none"> <li>○ Care management (referrals, Assessments, reviews, case coordination)</li> <li>○ Integrated operational systems</li> <li>○ Duty arrangements</li> </ul> </li> <li>❑ Risk Assessments – development culture and tools</li> <li>❑ Workload management tool</li> <li>❑ Financial systems – ILF, costed care plans</li> <li>❑ Data Collection</li> <li>❑ Operational links to other services and departments</li> <li>❑ Review support structures (Admin, Finance etc)</li> <li>❑ Review of business structures (meetings etc)</li> <li>❑ Professional and management supervision structures</li> <li>❑ Review of IT support systems</li> </ul>

<u>3. Ongoing Responsibilities</u>	<ul style="list-style-type: none"> <li>❑ Management of specific budgets</li> <li>❑ Performance management – HR, PI's etc</li> <li>❑ Allocation of resources</li> </ul>
<u>4. Specific Projects</u>	<ul style="list-style-type: none"> <li>❑ Savings Targets</li> <li>❑ Resource allocation/Community Access</li> <li>❑ Crisis Support Response</li> <li>❑ Review Gateway Assessment (currently pilot)</li> <li>❑ Health Facilitation (HAP's)</li> <li>❑ Development of accessible information</li> <li>❑ Mental Health Green Light Toolkit</li> <li>❑ HR Issues (Review of PCT secondments)</li> </ul>
Develop Team Business Plan based on above work for next 3 – 5 years	

## Appendix 8

### Association of Directors of Social Services Pressures in Learning Disability Services Report, 2005 - Recommendations

- ⇒ No changes in policy by any government department that might affect services for people with learning disabilities, without consulting other Government departments.
- ⇒ The same to apply locally between local government, NHS and education, employment or housing.
- ⇒ Maintain funding for people with learning disabilities across Government at 2005/6 levels before the forthcoming spending review.
- ⇒ Use the spending review to fundamentally review the real level of investment required in learning disability services.
- ⇒ Update funding and performance monitoring at national and local level to reflect inclusion and citizenship, not past models of care. Give national support to strengthen local commissioning for this.
- ⇒ Set up a “transformation fund” to enable local commissioners to “invest and save” on services which:
  - Prevent the need for residential or nursing care;
  - Ensure community based specialist support for people with health needs;
  - Ensure individualised support arrangements for people with complex needs;
- ⇒ Financial incentives for local government and the NHS to shift investment away from residential and nursing care – linked to local area agreements and local public service agreements.
- ⇒ The Learning Disabilities Development Fund should be ring-fenced and passed directly to local authorities or be protected within pooled budget arrangements.
- ⇒ Supporting People funding for people with learning disabilities should be protected by Central Government.
- ⇒ Central Government should use the demographic projections (above) to plan future funding.
- ⇒ The Formula Spending Share (FSS) for older people should be refined to reflect the higher costs of people with learning disabilities aged over 65.
- ⇒ People with learning disabilities and family carers should be fully involved in planning and funding changes. There should be investment in local centres for independent living.

## Executive Summary of the Herefordshire Learning Disabilities Partnership Board Plan September 2005

 charter of rights

### 1. Why the Plan has been made

**Valuing People** is a plan from the *Government* for improving the lives of all people with learning disabilities. In Herefordshire a plan was needed to make sure that things get better here.

### 2. Herefordshire Learning Disability Partnership Board

**Valuing People** say that everyone should work together to make sure that people with learning disabilities can have better lives.



There is a lot of work to do so the Partnership Board has set up smaller groups to look at different things.

These groups were asked by the Partnership Board to think of 3 or 4 targets that they would make sure happened in a year's time.

### 3. 2005/6 Targets

Here are the 3 or 4 important things each group has said will happen over the next year

#### **Better planning for young people leaving school**

- To find someone to do the job of making sure there are good plans for young people leaving school
- For all the senior workers who work with these young people to get together to make sure there are good plans. These people will be called the Transitions Board
- To make sure that about 1 in 3 young people have a good plan by 1 years' time

### **More Choice and Control**

- In Control project will take place. This work will make sure that people with learning disabilities will have more choice about where they live and the support they get
- The Bill of Rights will be launched. There will be an event to make sure everyone knows about the Bill of Rights. Everyone will be sent a copy who needs one
- The People's Union will do a presentation to let people know what they think of the Government's Green Paper called "Independence, Well-being and Choice"
- "How do I complain and have my say" leaflet will be sent to everyone who needs one

### **Person Centred Planning**

- To test the "Life Books" with at least 6 people. These are person centred plans.
- To train at least 3 out of 10 staff in Herefordshire in Person Centred working. They will use a pack designed and agreed by the group
- The same form will be used for assessments by all the workers in the Adult Integrated Learning Disability Service. This will be person centred and called The Single Support Needs Assessment

### **Supporting Carers**

- Every older family carer should have a plan in case of emergency.
- Respite care must be well-planned and meet the needs of the family as well as the service
- There should be good plans for day opportunities. The needs and wishes of the service user and their families need to be looked at when making these plans

The Family Carers Network will be checking to see how well these targets work

### **Health**

- Make sure that all people who have a learning disability have a GP and that GPs know all the people who have a learning disability in Herefordshire
- People who have high support needs should all be offered a health assessment and a Health Action Plan within 1 year
- All health information leaflets should be available in easier-to-understand leaflets

### **Housing**

- We need up-to-date information about people's housing needs so we can make a good plans for housing in the future
- All people with learning disabilities should be able to tell the Council about their housing and support needs. This information can then go into the Learning Disability Housing Plan
- We need to make sure that there is good advice and guidance about housing for people with learning disabilities and carers. To make sure this happens we need to work with all the different organisations that provide housing.

### **Fulfilling Lives**

- Make sure that Fulfilling Lives group is fully involved with the Modernisation of Day Opportunities Plan. This is the plan that should make more choices about what people with learning disabilities do with their days
- To agree the rules of how the Fulfilling Lives group will work with the Change Manager. The Change Manager is the person who needs to make sure the plan works
- To make sure that service users get the chance to say what they want to happen to day opportunities at the Stakeholder Day in March

### **Work**

- To make sure the All-Set Consortium starts meeting again.

These are the people who work to make sure that support in training and work opportunities get better for people with learning disabilities.

- To make sure that more people with learning disabilities get paid work by July 2006
- To find an Employment Champion for the Partnership Board. This will be someone who speaks up about jobs for people with learning disabilities

### **Quality**

- Set up a Quality Network Consortium to make sure that everyone gets the same good services. The Quality Network Consortium will be a group made up of lots of organisations who provide services
- To find out how services are working by using "My Life". This is a good way of checking if services are working. It was made by **BILD** (British Institute of Learning Disabilities)
- When we have found out how services are doing we can see which are good or not so good. We can then do things to make things better

### **High Support Needs**

- To find out how many people with high support needs have a communication profile. We will then set a target to make sure there are more people with one by the end of 2006
- To find out how many people with high support needs have had a physiotherapy assessment. We can then set a target to make sure there are more people with one by the end of 2006
- The High Support Needs group will make a plan of how they will check things are getting better

### **Workforce and Planning**

- The Partnership Board is waiting for someone to get the job of Workforce Development Officer before it can start on this work

### **Partnership Working**

- To organise the Valuing People Stakeholder Day in March 2006 to find out if things are getting better for people with learning disabilities in Herefordshire
  
- To make sure that people with learning disabilities get support to be involved with Partnership Board work.  
This should be done in 2 ways:
  1. make sure there is enough time and money for support
  2. the People's Union should become an independent group
  
- Make sure that all the groups come to the Partnership Board meetings to tell them about the work they have been doing

Pictures by CHANGE Picture Bank

## **Appendix 10**

### **Definition of a learning disability**

1. “Significantly impaired intelligence” = reduced ability to understand new or complex information, learn new skills
- +
2. “Impaired social functioning” = reduced ability to cope independently
- +
3. Manifested in childhood, and having a lasting effect on development

## Appendix 11

### Learning Disability Services – baseline description of service provision.

Service	Service Users	Number of Places available	Description
<b>Accommodation and Support</b>			
Care homes –in Herefordshire	159 Herefordshire clients	285 registered places	Local Authority (31 places at Ivy Close and Southbank Close), + all Private and Voluntary homes places registered for LD or LD 65+ (254 places). Note the high number from other areas.
Care homes outside Herefordshire	32 Herefordshire clients		18 places spot purchased within 20 miles of border, and 14 more than 20 miles.
Care home – nursing	2	14	Martha Trust
Adult Placements	55	56	Local Authority scheme for all client groups. The numbers indicated are for LD only.
Supported Lodgings	25	25	
Supported living – intensive	19		Contracts with Milbury Care and MacIntyre.
People living in their own homes with or without support	79		LA Community Support Service, and Supporting People funded support.
Care Home respite: – Windsor Place, Leominster - Ivy Close, Hereford, - Southbank Close Hereford	46	12 beds  + 3 interim (emergency respite) beds	All LA provided.
<b>Day Opportunities</b>			
<u>St. Owens Centre</u>	65	Average 45/day	Hereford - local authority <ul style="list-style-type: none"> <li>• offers a service to people with more complex needs.</li> </ul>
<u>Tanbrook Centre</u>	15	15	Hereford – Aspire (voluntary agency) service <ul style="list-style-type: none"> <li>• To provide a service for people with a learning</li> </ul>

			disability who are ageing.
<u>Widemarsh Workshop</u>	77	average 43/day	Hereford – local authority <ul style="list-style-type: none"> <li>Provides training in employment related skills for people with disabilities in a sheltered environment. Majority of service users have an assessed learning disability.</li> </ul>
<u>SCORE</u>	15	3/day	Hereford – TACT (voluntary agency) <ul style="list-style-type: none"> <li>A sports inclusion project but now has a wider range of activities including work</li> </ul>
<u>Workmatch</u>	25 places per day to people with a learning disability.	Provides 70 training places per day to a broad range of people.	Hereford – local charity <ul style="list-style-type: none"> <li>Workmatch has a service level agreement to provide employment and training for people with learning disabilities.</li> </ul>
<u>Marshfields</u>	58	38/day	Leominster - Local Authority – A range of community based projects
<u>Southbank Resource Centre</u>	9	5/day	Hereford - originally managed by the PCT until April 2002, and now managed by Local Authority.
<u>Ryefields Centre</u>	70	41/day	Ross-on-Wye – Local Authority. <ul style="list-style-type: none"> <li>Enviroability, a charitable company limited by guarantee. The primary aim being to provide and promote projects which benefit the community:</li> </ul>
<u>ECHO</u>			Leominster – voluntary agency. ECHO offers a range of activities, predominantly in the North of the County. 21 different activities.
<u>The Houghton Project</u>			Independent - a working farm,

### Assessment, Care Management, Health and Community Support

Staff categories	Whole Time Equivalents	Ratio to known service users (531)
Managers	1.0	1:531
Development workers PCP, Individualised budgets, projects	3.0	1:177
Nurses	4.4	1:121
Social Workers (including Assistant social worker	4.5	1:118
Psychologists	2.2	1:241
Reviewing Officer	0.8	1:664
Community Support Workers	3.5	1:152
OT	1.0	1:531
Physiotherapist & assistant	1.3	1:408
Speech Therapist	0.5	1:1,062
Psychiatrist	1	1:531
Admin Support	4.8	1:111
<b>Total</b>	<b>28</b>	<b>1:19</b>

## References

---

<sup>i</sup> Valuing People: A New Strategy for Learning Disability for the 21<sup>st</sup> Century: Implementation Guidance. Department of Health, LAC(2001)23, 31 August 2001

<sup>ii</sup> Valuing People: A New Strategy for Learning Disability for the 21<sup>st</sup> Century: A White Paper  
Department of Health, Cm 5086, March 2001

<sup>iii</sup> Improving the Life Chances of Disabled People,  
Department for Work and Pensions, Department of Health, Department for Education and Skills, Office of the Deputy Prime Minister, January 2005

<sup>4</sup>Independence, Well-being and Choice: Our vision for the future of social care for adults in England  
Department of Health, Cm6499, March, 2005.