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.

- 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

Region	Name of Lead	Email address
North West	Dave Spencer	dave.spencer@northwestjip.nhs.uk
North East	Paul Davies	paul.davies@dh.gsi.gov.uk
Yorkshire and Humber	Jenny Anderton	jenny.anderton@dh.gsi.gov.uk
West Midlands	Chris Sholl	christine.sholl@dh.gsi.gov.uk
East Midlands	Helen Mycock	helen.mycock@dh.gsi.gov.uk
East of England	Liz Williams	liz.williams@lbbd.gov.uk
London	Debbie Robinson	debbie.robinson@dh.gsi.gov.uk
South West	Sue Turner	sue.turner@dh.gsi.gov.uk
South East	Jo Poynter	jo.poynter@dh.gsi.gov.uk
	Jean Collins	jean.collins@dh.gsi.gov.uk

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.

 Name of local authority and Print 	mary Care Trust(s)
---	--------------------

Dudley MBC

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.

Dudley is one of the four Black Country Boroughs lying to the west and north of Birmingham. It is an area of significant contrasts between the more affluent south and the more deprived north. The Borough's main centres of population are the five townships of Sedgley, Dudley, Brierley Hill, Stourbridge and Halesowen.

Dudley's overall deprivation status differs little from the national average, but is concentrated in an inner urban 'core'. Dudley earnings are lower than nationally. The total worklessness for Dudley is 10% of the Borough's working age population. Dudley's economic base has undergone dramatic restructuring during the past 25 years. Dependence on manufacturing has reduced, whilst the service sector has grown. It is relatively reliant on low-pay, low skill jobs in retail and distribution. (Economic Strategy 2008)

Multiple deprivation is concentrated in a small number of neighbourhoods, a fact that tends to obscure the problem in a Borough that otherwise may appear to be relatively affluent.

The social housing stock is 22% and provided 1,855 re-let units each year. Annually 2,404 affordable housing units were needed, 549 more than re-let supply. The Councils Housing priorities in 2010-11 include progression with the regeneration of the North Priory Estate, the completion of two extra care housing schemes and progress towards a further three; construction of 32 units for people with a learning disability; and to ensure that all homes in the Councils Housing stock meet Decent Homes Standard by December 2010.

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).

From the 2004 mid-year population projections, the population in Dudley were projected to increase by only about 1% overall from 305,600 in 2005 to 309,400 in 2020. The populations aged 65+ and aged 85+ were

projected over the same period to rise by 24% and 52% respectively.

Births were projected to remain relatively static, with in and out migration although small, being the major contributor to the projected population rise.

From the Census of 2001 the black and ethnic minority (BME) population account for 6.3% of the population in Dudley, and has a much younger population profile than the white population.

In 2001 only 8% of the BME population was over 65 (compared to 17.5% in the population as a whole in 2005). Suggesting that over the next 15-20 years there will be an increasing demand for services generally applicable to older people in the BME population.

Population Projections indicate that the number of adults with a severe learning disability will rise just over 10% by 2020.

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.

The numbers of adults with severe learning disability in Dudley is likely to rise from 934 (the current number on Dudley Special Needs Register) to 1031 in the next 10 years.

There is a difference between the population of people with a learning disability served by the PCT and that served by the Council, although there is a very significant group of people who receive services from both the Council and the PCT. One of the key differences in the approach between the Council and the PCT is through the application of eligibility criteria.

Approximately 40% of people aged 40 – 49 are still living in the family home. This declines to 29% for people 50 – 59 and reduces to 11% for people in their 60s. 120 people are living with a family carer in the age range 60 – 69; 82 people are living with a carer 70 – 79; 35 are living with a carer 80 – 89; and two people have a carer who is over 90. An average of 15 young people who need ongoing support move to Adult Social Care from Children's Services each year.

A total of 86 people with a learning disability are identified as coming from a BME community. This represents 8.6% of the SNR population.

2.4 Number of adults with a learning disability who are known to services (and percentages of total population as given in 2.3)

	Number	%
Age 18 to 64	841	91
Age 65+	82	9
Male	391	42
Female	532	58

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

White 843 (91.3%); Asian or Asian British 48 (5.2%); Black or Black British 13 (1.4%); Mixed 13 (1.4%); Chinese or Other 3 (0.3%); Not Given or Not Recorded 3 (0.3%)

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

People with complex needs*	58	5.1%
People who exhibit behaviour that challenges services*	250	21%
People with learning disabilities who also have autism*	166	14%
Living with family carers aged 65+	181	61%
Who are parents	12	1.1%
Aged 18 to 25 in part-time education	N/A	N/A
Aged 18 to 25 in full-time education	N/A	N/A
Aged 18 to 25 in local education	91	52%
Aged 18 to 25 in residential education	17	9.7%

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

Health care needs are in part being met through the Directed Enhanced Service, which is bringing improvements in health screening. We are now moving forward on development of the Health Access Service which will enhance health action planning.

Accommodation needs are being met via the new house building programme (32 units for people with a learning disability); the work of the Accommodation and Support Team which helps people to move from home into supported tenancies.

Fulfilling lives are promoted through the re-provision of day centres, which offers a much wider range of community based activities and the opportunity to arrange a programme of support through a personal budget.

Employment needs are met through the job coaches who have identified more jobs, including 16 posts with the Council.

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

The main source of data is the Dudley Special Needs Register, (SNR). This register is a voluntary register on which people who use health and social care services for people with a learning disability can agree to have their personal details recorded. Improvements to the SNR following the Joint Review in 2008 include quarterly management reports; enhanced admin support; more reliable inputting of data; and updating of health screening information linked to the DES. Information from case reviews is now used more systematically to inform commissioning.

- 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)

People with LD in criminal justice system

- * LDPB is working with the Mental Health Trust to respond to the Bradley Report. A report was received at the January Board from Mental Health Commissioner who has begun a self assessment of Dudley's position in relation to the Bradley Report
- * Joint working group meets to review the implement the Green Light toolkit following a joint self assessment which was completed several years ago
- * Head of LD sits on the MH joint funding/commissioing group which seeks

to jointly address the needs of people moving through the criminal justice system

People with LD detained under the MH act

- * Head of LD sits on MH joint commissioning group which identifies funding for people within this category this ensures close links at a strategic level
- * Joint working group exists to lead implementation of Green Light
- + All people with LD & MH issues have named worker actively involved
- * quarterly meetings are held with the Regional Specialist Commissioning agency (SSA) and monthly reports are received on the progress of people who are placed out of borough by this agency
- * CTLD aims to have one member of staff trained as AMHP at any time and also 2 trained as DOLs assessors

3	Partnership Board arrangement	s				
3.1	Please give details of your Partnership B	Board.				
	Frequency of meetings					
	Bi-monthly					
	Details of sub-groups					
	The Partnership Board has the following Involving People (advocacy; commun website; complex needs) 2. Carers 3. Housing 4. Health 5. Opportunities, jobs and learning (incl 6. Diversity and relationships (including gender/relationships) 7. Keeping Safe 8. Joint Commissioning Group	icatio	n; PCP; pul	tunities)		
	Date of last review of Partnership Board arrangement					
	7 Jul 2009					
3.2	Please give details of the structure and membership of the Partnership Board.					
	Roles and representatives					
	A list of members of the Board is attach	ed.		y		
	Number of people with learning disabilities	Male	2	Female	2	
	Number of family carers	Male	2	Female	2	
	Ethnic breakdown of people with learning d	isabili	ties and fam	ily carers		
	1 service user from the BME community					

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

The Partnership Board is co-chaired by a person with a learning disability. Members of Dudley Voices for Choice take an active part in several of the Board's sub-groups and in special events organised by the Board. Induction is provided for new Board members. Group members have also been represented in national and regional group, and regularly take part in training staff in Social Care (LDQ), Police and Libraries. DVC members have also been trained to take part in evaluations of provider services, and are taking a lead in consultation with groups of service users on the reprovision of day centres.

4	Overall budget						
4.1	What is the overall budget for services for adults with learning disabilities across health and social care?						
	£ 38,274,780						
4.2	Is it a pooled budget? ☐ Yes ✓ No						
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	15,153,171	39.6				
	Nursing care	1,133,489	3				
	Supported living	6,233,085	16.3				
	Hospital care, including where known:						
	- acute hospital	0					
	- specialist inpatient services	3,986,000	10.4				
	- NHS campuses	327,000	0.9				
	Day services	4,447,616	11.6				
	Community Learning Disability Team	1,554,900	4.1				
	Advocacy arrangements and support	141,550	0.4				
	Other (please specify)						
	Short breaks;personal budgets;direct payments;adult pr	5,297,969	13.9				
4.5	Has there been an efficiency savings programs services in 2009 -10?	me in learning di	sability				
	✓ Yes No						
4.6	Is there a planned efficiency programme for 20	10 -11?					
	✓ Yes No						

5	The health of people with learning disabilities			
5.1	Have you completed the regional health self-assessment and performance framework?			
	Yes In progress No			
5.2	If you have answered in progress or no, in assessment to be completed or started.	ndicate whe	n you expec	t this
	End of March 2010 Started ✓	Complete	d	
5.3	If you have answered yes, please complete on the most recent results of that assessmen		ng summary	table based
	RAG rating	Red	Amber	Green
	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 deta needs of people known to services - from re- performance framework.			
5.5	If you have answered in progress or no, prinformation. Otherwise go straight to section		de the followi	ng
	Percentage of GP practices in your area that health checks as a Directed Enhanced Service		d up to provi	de annual
	90@Jan %			
	Percentage of adults with learning disabilities offered health checks in the year up to 31 Ma	known to learch 2010.	ocal authoriti	es who were
	13 %			

	e of adults with learning disabilities known to local authorities who health check in the year up to 31 March 2010.
13	%
	e with learning disabilities involved in learning disability awareness primary healthcare staff as specified in the DES? No
	amily carers being involved as partners in improving healthcare for h learning disabilities?
Consultation Consultation	ntative on Partnership Board and Health Sub Group tion with Carer where appropriate during care planning Carers provided by Learning Disability Specialist Health Team with Carers Groups for the Getting Ready Days
	e of people known to services who have health action plans that have wed in the year up to 31 March 2010.
IV/IX	%
What are t	he arrangements for strategic healthcare facilitation in your area?
Health Su	blished within the Learning Disability Specialist Health Service ub Group of Partnership Board has Public Health and ioners on the Group
How many	General Hospital (Acute) Trusts are there in your locality?
1	
	General Hospital (Acute) Trust Learning Disability Liaison/Facilitator (or sts are employed in your area?
1 under d	16 (17 Table 17 Table
by them hi	
by them hi	iscussion eds of people with learning disabilities and the health inequalities faced ghlighted within each Trust's Disability Equality Strategies/policies

of	as your Partnership Board taken the opportunity to comment on the performance local Trusts as part of the Care Quality Commission's (CQC's) annual health eck?
1	Yes No
	hat progress have you made on the Green Light Toolkit for access to mental alth services? What was your rating in the last CQC indicator set?
We Se	ast rating submitted and validated as Green forking Group with Mental Health Services and Learning Disability ervices providers, commissioners and Local Authority meeting bi monthly th progress in all areas for 2009/10
	a local multi-disciplinary service in place to meet the needs of people whose haviour challenges services, or is one being commissioned?
✓	Yes No
	e there prisons or young offenders institutions or other secure settings in your ea?
	Yes ✓ No
If s	o, have you met with the Prison Partnership Board? Yes No
(Si	ogress in carrying out the review recommended by the Ombudsmen's report ix Lives: the provision of public services for people with learning disabilities) and port to Boards due by May 2010.
with Ho Still He con to Ho tea Stu with Ba lea Do	ctive Joint Liaison Group with Learning Disability Specialist Health Team th Dudley Group of Hospitals + Service Users - to date achieving: ospital Computer records to flag client has a learning disability lickers to alert hospital staff on medical files ealth action cards for clients to carry with basic details of their mmunication and medical needs ospital patient care plan specifically for patients with learning disabilities be introduced on wards ospital staff to access specialist training provided by Specialist Health am at Ridge Hill oudent Nurses given additional training sessions on caring for patients the Learning Disabilities and 5 - 7 ward nurses to have additional training and people with arning disabilities supported to provide this training octors working in Dudley Group of Hospitals on Foundation Years 1 & 2
ro I	have training sessions on working with patients with learning disabilities

Emergency Department to have a Champion Nurse for Learning
Disabilities supported by the Specialist team at Ridge Hill
Emergency Department staff to have training on working with patients with
Learning Disabilities accessing the Emergency Department again
supported by people with learning disabilities
Proposal for a Learning Disability Liaison Officer post with the hospital
board for consideration for resources to fund
March 2010 Liaison Group to work through the Michael Report to ascertain
if any additional actions required

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)	9	1.6
Tenant - Local Authority / Arms Length Management Organisation / Registered Social Landlord / Housing Association	70	12.6
Tentant - Private Landlord	2	0.4
Settled mainstream housing with family/ friends (including flat-sharing)	374	67.2
Supported accommodation / Supported lodgings / Supported group home (accommodation supported by staff or resident caretaker)	84	15.1
Adult Placement Scheme	17	3.1
Approved premises for offenders released from prision 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	556	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	7	3
Acute / long-stay healthcare residential facility or hospital (eg NHS or Independent general hospitals / clinics, long-stay hospitals, specialist rehabilitation / recovery hospitals)*	7	3
Registered Care Home*	219	92.7
Registered Nursing Home*	3	1.3
Prison / Young Offenders Institution Detention Centre	0	0
Other temporary accommodation	0	0
Total	236	100
Please give additional data to show numbers:		
In residential settings (see categories marked*) in local authority area	160	
In residential settings (see categories marked*) out of area	59	
Supported to live independently (NI 136)	328	

6.3

7	Provider market	
7.1	Does your provider market reflect the needs of your current and for population? ☐ Yes ✓ No	uture
7.2	If you have answered no, in what ways does it need to change?	
	The council day centre provision will significantly reduce in the new years and people are being offered personal budgets and direct to access independent provision. Innovation grants have been of support the development of alternative provision and 2 voluntary providers are developing small scale alternative provision current people currently accessing the Council day centres are being revocated on what types of services they would like to access, the information will be used to stimulate market growth where require independent providers to develop services (especially Voluntary New providers entering the market through the approvals process being encouraged to consider the needs of people in relation to activity and gearing the services up to support people who will have personal budgets. Micro enterprises are to be developed to support a broader rang opportunities for people, in partnership with NAAPS. A post will advertised for a Micro Services Co-ordinator in February 2010. It residential provision will reduce as a result of the Glebelands ten	payments iffered to sector tly. The viewed and is ed for Sector). is are daytime ave e of be in house
7.3	What percentage of your market is:	%
	In house	6
	Voluntary	30
	Public sector	11
7.4	Do you plan to change these percentages? ✓ Yes No	-
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	rotar	70
Working as a paid employee or self-employed (30 or more hours per week)	6	50
Working as a paid employee or self-employed (16 to less than 30 hours per week)	3	25
Working as a paid employee or self-employed (4 to less than 16 hours per week)	2	16.7%
Working as a paid employee or self-employed (more than 0 to less than 4 hours per week)	1	8.3%
Working regularly as a paid employee or self- employed but less than weekly	0	0
Total	12	5.0
Working as a paid employee or self-employed and in unpaid voluntary work	2	2
In unpaid voluntary work only	107	98
Please also state the number of people in pai	d employment who v	work for:
The NHS	N/K	
A local authority	1 in 08-09; now 16	
How many people known to services are not	working?	
585		
How many people known to services who cur a week are known to want to work 16 hours a		
0		
Do you have an up-to-date local employment learning disabilities in line with Valuing Employeeple with learning disabilities?		
Do you have an up-to-date local employment		

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
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 Board funds Dudley Voices for Choice/Langstone and Apna to support people with a learning disability to be represented on the Board, on the sub-groups, at regional and national events/meetings, and with involvement in training. People with a learning disability have been trained to take part in contract monitoring visits to providers with Council staff; three of these visits have now taken place.
9.3	What is the combined local authority and NHS spend on advocacy?
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

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?

There are five places for carers on the Board, including one place for a BME carer. Carers of young people in transition and people with complex needs are represented. The Board recently held a workshop on implementing the National Carers Strategy and agreed an action plan for improving services to carers.

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)

	See 10.2 above.
10.4	How many carers' assessments were provided in the last year?
10.5	, and the same and the same to the food dutionty.
10.6	How many family carers have benefited from regular short breaks?
	149

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)?

23 %

11	Parents with learning disabilities		
11.1	How many parents with learning disabilities are currently receiving services in your area?		
	32		
11.2	Is there a joint planning process with children and family services to suppoparents with a learning disability?		
	✓ Yes No		
11.3	Are materials to support all parents produced in accessible formats?		
12	Transition		
12.1	How many young people with learning disabilities aged 13 -17 are there within your area?		
	80		
12.2	How many of those young people are placed out of area?		
	5		
12.3	How many of those young people have had person centred reviews and have a person centred transition plan?		
	80		
12.4	Are these reviews/plans focused on paid employment as an outcome?		
	☐ Yes ✓ No		
12.5	What total percentage of young people with person centred reviews have you achieved by 31 March 2010?		
	100% %		

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 No
	How does this inform commissioning?
	Current focus of person-centred planning is on people moving out of day centres. 116 reviews will have been completed by the end of February, with a further 100 to follow between March and June.
	PCP training commissioned for Team Leaders and DCOs in Day Services was completed in September. All day centre staff being trained in person centred approaches.
	Everyone who has been reviewed will have a person-centred support plan, setting out how they can spend their indicative personal budget.
	Information from the reviews is being collated to identify which services people want to use, in order to inform commissioning.
13.2	Are person centred plans being re-focused on getting a paid job as a goal?
	✓ Yes No
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?
	Work has started to support BME families to get to know about Personalisation, and assisting with the recruitment of prospective Personal Assistants who are from the local community by advertising through mail shots to families on the Ehsas carers database and local BME community organisations/places of worship. Working group also exploring pooling of direct payments for people with similar interests.
	Engagement of people with complex needs has taken place via consultation process on day services change programme. Therapy and Enabling team has completed training of staff on working with people with complex needs.
	Total communication strategy was launched on 9th October.
	Communications training provided to 120 staff since January 2009.

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

Ten people with a learning disability are already in receipt of personal budgets as a result of an In Control pilot which pre-dated Transforming Social Care. Learning from the pilot has informed roll-out of supported assessment questionnaire and RAS to the CTLD. People with a learning disability and carers are fully involved through regular meetings set up as part of day service modernisation project. In addition the TSC team has run a series of awareness raising events for all client groups.

	run a series of awareness raising events for all client groups.			
13.5	How many person centred plans include employment and accommodation?			
	All			
13.6	What is the number (and percentage) of people in receipt of direct payments and personal budgets (NI 130)?			
	1106 8.5 %			
14	Workforce development			
14.1	Does the Partnership Board have an up-to-date workforce plan? ☐ Yes ✓ No			
14.2	Can you give details of the workforce which supports people with learning disabilities in your area (from the Skills for Care National			

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

Information on LA LD workforce is in the SSDS001, submitted autumn 2009. Information (updated monthly) on VPI sector LD workforce is in the Dudley section of the NMDS-sc on Skills for Care website (www. skillsforcare.org.uk/research. Information on LD workforce also available in

Black Country Partnership for Care Workforce Strategy (2009)- drawn from NMDS-sc, SSDS001 and extrapolations from Skills for Care workforce modelling in State of the Social Care Workforce 2008. NMDS-sc for Dudley has returns for approx 70% of registered provision.

Promoting equality & diversity is one of the sections in the standard lesson plan we use for all Social Care training. Awareness training being developed and delivered to some Adult & Community Learning staff (libraries - one session per month) - delivered by people with LD via Dudley Voices for Choice, with support from staff here. Will be reviewed in 10/11 to see how it can be provided more widely.

There is input from people with LDs on the LDQ programme that we run. Input from people with LDs on the 'Positive Approach' training (a monthly course for front line care staff in a range of settings, addressing the management of behaviour through a positive approach)

There is a Joint Workforce Strategy agreed for the HIMMT which provides an overarching framework which applies to the LD workforce. In addition, work now commenced on a workforce strategy and plan for LD services in the borough. Users & Carers will be consulted in the development of LD workforce Strategy.

The Dignity Challenge and Common Core Principles are integrated into all NVQ programmes for all care staff.

Personalisation awareness provided to all staff through Leadeship Forum, Divisional Forums, Team meetings, intranet site, regular bulletins etc.

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

Develop agreed workforce strategy for LD across the whole LD workforce in Dudley

Facilitating/enabling/supporting culture change and change of attitude for staff and carers to one consistent with the values of VPN

Managing change in LD services - the change from fixed day centre and residential provision to personalised support approach

Re-skilling staff from residential and day settings to develop the role of support worker, underpinned by the appropriate occupational standards and related qualifications

Encouraging consistency across the whole workforce in the borough - PVI and LA.

15	Hate crime
15.1	Number of hate crimes/incidents reported against people with learning disabilities
	N/A
15.2	What progress have you made in strengthening the link between the Board and your local Crime and Disorder Reduction Partnership?
	The Assistant Director who chairs the Partnership Board is also a member of the Community Safety Strategic Board. The Deputy Head of Community Safety sits on the Safeguarding Vulnerable Adults Board. The Hate Crime Co-ordinator is a member of the Learning Disability Partnership Board. The Community Safety Strategy now includes vulnerable adults as a key theme. The Safeguarding Board and Community Safety Board organised a joint campaign to alert the public to the abuse of vulnerable adults.
15.3	Has your Board discussed the Cross-Government Hate Crime Action Plan* (launched in September 2009)? Yes V No
	*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?	
	The three service evaluations carried out by members of Dudley Voices for Choice (our local self advocacy organisation) between October 2009 and February 2010. Members received training before the visits. Each service was visited on three separate occasions by two members of Dudley Voices for Choice. The evaluation reports themselves are being produced by Dudley Voices for Choice. The visits identified areas of good practice and potential improvements for all three services. The visits were most informative when DVC members could talk directly with service users	
16.2	Does the Partnership Board receive reports from the Adult Safeguarding Board?	
	✓ Yes No	
16.3	Is the Partnership Board informed of poor performance by local providers (e.g. from Care Quality Commission reports)?	
	✓ Yes No	
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	
	If so, how has this informed service development and commissioning?	
	The EIA is being completed in relation to the day opportunities change programme.	

16.5	How have people with learning disabilities and family carers been involved in this annual report?		
	Dudley Voices for Choice, the self-advocacy group and the Carers Forum have had the opportunity to comment on the draft self-assessment and annual report.		
16.6	Has this resulted in improved outcomes?		
	✓ Yes No		
17	Commissioning		
17.1	Do you have a joint commissioning strategy?		
	✓ Yes No		
17.2	What improvements have been made in commissioning services for people with learning disabilities?		
	Innovation Grant to encourage providers to develop new services.		
	Changes to day services - new providers will be encouraged to provide appropriate community day time activity.		
	Kathleen House respite unit consultation/questionnaires and proposed change to individual service funds for users.		
	Experts by experience have started to review services.		
	Carers questionnaires started.		
	Mere Rd NHS Campus is being re-provider; we are contracting with a new provider for care and support for the three residents.		
	Review of SLA outcomes and quality. Resources redirected from Dudley Social Business Partnership to focus on employment targets.		
	Annual provider data sets - give overview to inform governance stats and to check against quality when monitoring.		

Newsletters to providers.

Sophisticated analysis of case reviews to inform future commissioning.

Transition data set - regular monitoring and planning with CDT/CTLD and Commissioning.

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

Accurate information about transition and future need for young people enables better planning and steer for market development.

Views of people who use services and carers feedback to providers to make necessary changes and improvements. Encourages providers to be more person centred.

Innovation grant - broader range of provision for people accessing the services, introduces people in residential homes to broader social network.

Providers are better informed.

8	Future plans and targets	
3.1	Have you agreed a local delivery plan for at least the nex ✓ Yes No	xt year?
3.2	Does it include numerical targets where relevant around the following headings?	
	✓ Yes No	
	If so, please set out against the headings below:	
	Health	150 active health ac
	Where people live	30 people to move
	Employment	42 people in paid w
	Advocacy and leadership	No numerical targe
	Family carers	No numerical targe
	Transition	No numerical targe
	Personalisation	NI 130 applies
	Workforce	No numerical targe
	Including everyone	No numerical target

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.

We currently support some 28 people with learning disabilities who are known to the council in paid work. This is more than twice the number of people in paid work this time last year.

Ten people with learning disabilities now work for the Local Authority. Ten people are paid "experts by experience" in roles such as "quality checking" services, training staff, joint chairmanship of the Partnership Board etc.

The Council have recently appointed a second Job Coach from within day

services staff.

Our Employment Liaison Officer, funded via the Lottery, has developed strong links with employers in both public and private sectors and worked hard to make the business case and social case for employing people with learning disabilities, and to signpost resources.

NAAPS will be working in Dudley to develop micro services and we hope these will help develop businesses that employ people with learning disabilities.

We have secured funding from the Strategic Health Authority to help develop self employment as an option for people with learning disabilities. We have submitted a bid to the Lottery for a Travel Buddy scheme that will pay people with learning disabilities to teach others how to make key journeys safely.

Chair of Partnership Board	
Co-Chair of Partnership Board	
On behalf of members with learning disabilities	

20 Declaration

On behalf of family carers

Date