

DUDLEY MBC & DUDLEY PCT
LEARNING DISABILITY STRATEGY
ACTION PLAN

SUB – GROUPS OF THE LEARNING DISABILITY PARTNERSHIP BOARD

1. Involving People (Advocacy; communication; PCP; public information; website ; complex needs)
2. Carers
3. Housing
4. Health
5. Opportunities, Jobs and Learning (to include Day Services and Transport)
6. Diversity and Relationships
7. Keeping Safe
8. Joint Commissioning Group

MANAGERS - DMBC

LS LINDA SANDERS
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SC SUE CLOSE
BC BRENDAN CLIFFORD
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08-01-2009

SECTION 1 : INVOLVING PEOPLE

Overall Objectives :

All people and their families will benefit from Valuing People Now.

All people with learning disabilities and their families will have greater choice and control over their lives and have support to develop person centred plans.

All people with learning disabilities can speak up and be heard about what they want from their lives – the big decisions and the everyday choices. if they need support to do this, they should be able to get it.

Lead manager : Ann Parkes

LDPB Sub Groups – Involving People; Carers; Opportunities

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
The Partnership Board has a strategy for person-centred planning	1.1	Partnership Board to develop person centred planning strategy in light of the forthcoming person centred planning guidance.	AP	December 2009.	
		Partnership Board to ensure that by 2012 all young people with statements of Special Educational Need who have learning disabilities have person centred reviews from age 14 to 19 that actively involve the young person and their family.	MS	2012	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
More people have person centred plans	1.2	New targets to be set for reviewing officers	AP	June 2009	Target set for PCPs for 2009-2010 (75) to include: Young people in day centres (25) External placements. (16) Communication Strategy group have started this work
		Modified version of PCP to be adopted for clients not facing major life decisions/changes		April 09	
		Negotiate assistance from other agencies e.g. Dudley Advocacy		Feb 09	
		Produce a definition of all plans		Feb 09	
		Produce a PCP pathway		Feb 09	
		Develop a Person Centred ICI	MS	March 09	
		Amend Review forms to ensure record of PCP/CP kept on SNR	MS	March 09	
PCPs focus on meeting people's aspirations	1.3	Refresh training for Social Workers/Nurses on PCPs	AP	June 2009	Audit of staff already trained instigated
		Quality audit of PCPs			

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
People with complex needs are fully involved in service development	1.4	<p>Complex needs champion appointed to LDPB</p> <p>Partnership Board to develop its own equalities schemes to show how it is implementing and monitoring equalities legislation.</p> <p>Day centres to review how people with complex needs are engaged</p> <p>Commissioners and service providers to address the recommendations of the Mansell report and to include people with complex needs in the development of self-directed services in their area.</p>	<p>RC</p> <p>RC</p> <p>SC</p> <p>JP</p>	<p>March 2009</p> <p>December 2009.</p> <p>March 2009</p> <p>December 2009.</p>	Champion appointed Nov 2008.
<p>More people with complex needs have a communication passport.</p> <p>The standard of information contained in communication passports is acceptable.</p> <p>Communication passports are used effectively.</p> <p>People who use a communication book are appropriately supported</p>	1.5	<p>Audit use of Communication Passports by means of questionnaire to all organisations who have had staff trained</p> <p>Review purpose and design of CPs</p> <p>Staff/carers briefings on use of communication passports/communication books to be arranged</p>	<p>AI/SB</p> <p>AP</p> <p>PW</p>	<p>March 2009</p> <p>March 2009.</p> <p>February 2009</p>	<p>Questionnaire being sent to all organisations who have had staff trained</p> <p>Will be part of PCP benchmarking activity</p> <p>Target agreed for number of</p> <p>100 new communication passports with priority groups.</p>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>More carers have a carers assessment</p> <p>Carers assessments are reviewed</p>	1.6	<p>Target agreed for carers' assessments/ and 2009-2010 (120).</p> <p>Audit training of LD staff</p>	AP	<p>Immediate</p> <p>June 2009</p>	<p>Carers' assessment target for 2008-09 will be achieved. Carers assessment review process used in OPPD Division to be adopted.</p>
<p>Carers are fully involved in service development</p>	1.7	<p>Partners in Care group to be established.</p> <p>Consultation workshops with carers to be arranged on day services and housing</p> <p>Review Carer representation on sub groups of LDPB</p>	AP/CR	<p>March 2009</p> <p>January 2009</p>	<p>Meeting held to re-form carers' group on 21st Nov.</p> <p>LDPB agreed new configuration and member ship of sub-groups on 5th Jan.</p>
<p>There is a full range of public information leaflets in accessible format in hard copy and on the website to explain what services are available</p>	1.8	<p>Audit what is currently available – locally & nationally</p> <p>Agree 'topics' for leaflets; write leaflets and consult.</p> <p>Publish final versions</p> <p>Amend existing social care leaflets in accessible format</p> <p>Launch LDPB website</p> <p>Partnership Board to develop an information strategy to publicise the availability of advocacy regionally and locally and share best practice.</p>	<p>AP</p> <p>RC</p>	<p>June 2009.</p> <p>February 2009</p> <p>December 2009.</p>	<p>All managers submitting proposals to SR</p> <p>Meeting 12/1/09 to finalise website content.</p>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>The Dudley Autism Strategy is fully implemented</p>	1.9	<p>Let contract for health assessment and diagnosis.</p> <p>Commission specific services and resources from independent sector providers to create services to meet individual needs using personal budgets.</p> <p>Alternative premises to be identified for the No Limits Project.</p> <p>Work with New Deal, Job Centre Plus disability employment agencies and statutory and private sector employers to find more jobs for people with ASC.</p>			
<p>A user-led organisation is set up in Dudley which makes sure support is available for people with learning disabilities and their families.</p>	1.10	<p>Open discussions with Dudley Voices for Choice and Action for Disabled & Carers</p>	TI		
<p>Local involvement networks (links) will encourage engagement of Partnership Board and people with learning disabilities in their activities.</p>	1.11		BC		

SECTION 2 : UNDERSTANDING THE NEEDS/SHARING AND USING INFORMATION MORE EFFECTIVELY

Overall policy objective: to ensure effective commissioning in a way that best supports the right outcomes for people with a learning disability and their families.

Lead manager : Richard Carter

LDPB Sub-Group ; Joint Commissioning Group

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
SNR is used to its full potential to inform commissioning	2.1	Agree content and format of management reports from SNR.	RC		Content agreed and first quarterly report to be produced for January 2009.
Data quality on SNR is improved; the system is safe and robust	2.2	Mechanisms to be put in place to prompt staff to update SNR. Update log to be included in the system. Cover to be built in for SNR co-ordinator when sick/on leave	CE/AP	March 2009	Second post now filled – so cover should be available once new staff member fully trained. Revised instruction issued to staff re updating SNR

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>Learning Disability Strategy and Commissioning Strategy clearly identify gaps in services.</p> <p>The strategy includes a section dedicated to people with learning disability and complex needs</p>	2.3	<p>Conclude consultation on commissioning strategy and publish final version.</p> <p>Draft revised Learning Disability Strategy in line with Valuing People Now.</p> <p>Consult on revised Strategy</p> <p>Publish a combined Learning Disability Strategy /Commissioning Strategy.</p> <p>Accessible version to be produced.</p>	<p>JP</p> <p>RC</p> <p>RC</p> <p>RC</p> <p>RC</p>	<p>January 2009</p> <p>Feb 2009</p> <p>Feb 2009</p> <p>March 2009 (Cabinet)</p> <p>April 2009</p>	<p>Feedback on Commissioning Strategy collated at end November ready for presentation to LDPB in January.</p>
<p>Providers including smaller providers are involved in shaping future services</p>	2.4	<p>Communication/consultation meetings with providers to be organised on a more regular basis, via Provider Forum and WMCA.</p> <p>Head of Commissioning to attend Provider Forum</p> <p>Review involvement of providers in LDPB subgroups</p>	AP	January 2009	<p>Communication 'calendar' agreed for meetings with providers.</p> <p>Agreed by LDPB January 2009.</p>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>Information from reviews is used systematically to inform commissioning.</p>	2.5	<p>Audit current usage of review feedback form; check information is being recorded</p> <p>Copies of back page to be sent to Julie Cox</p> <p>Work with MIT to ensure SWIFT /AIS will record unmet need</p> <p>Commissioning team to produce quarterly analysis of information extracted from reviews, to coincide with quarterly reports from SNR.</p>	JP	February 2009	<p>Julie Cox has done this and findings will inform work led by Mandy Sharman on updating review form/ICI etc</p> <p>First analysis will be produced in March 2009.</p>
<p>Establish links with SSA to ensure improved planning for people with complex needs in SSA commissioned placements</p>	2.6	<p>Audit number of cases in which SSA involved</p> <p>Develop a clear case management protocol with PCT/SSA/CTLD for people using SSA commissioned services</p>	<p>DG/SR</p> <p>AP/JP</p>	<p>January 2009</p> <p>March 2009</p>	Completed.
<p>There is a comprehensive range of data sets and reporting mechanisms for Learning Disability Services across the Council and PCT</p>	2.7	Action plan to be developed for two National Indicators	AP/MIT	March 2009	

SECTION 3 : ASSURING HIGH QUALITY PROVIDERS; DEVELOPING INCENTIVES

Lead manager : John Povey

LDPB Sub-group : Involving People; Complex Needs

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Service users and carers are involved in the monitoring of internal and external social care services	3.1	<p>Cost work & commission from VfC</p> <p>Work with VfC to develop model based on Quality Network</p> <p>Advertise for and appoint service users and carers to take part in contract monitoring visits for a fixed fee.</p> <p>Consideration should be given to whether we should have a reciprocal arrangement with another self advocacy group eg Sandwell</p> <p>3 inspections to be carried out with expert by experience in 2009.</p> <p>Audit the outcomes of experts by experience & report to LDPB.</p>	<p>JP</p> <p>JP</p> <p>JP</p> <p>JP</p>	<p>March 2009</p> <p>March 2009</p> <p>March 2009</p> <p>September 2009</p> <p>December 2009</p>	
Financial incentives are in place for providers in recognition of high quality or innovative services	3.2	<p>Assess cost impact of replicating OPPD model which links to star rating</p> <p>Assess cost implications of applying care cost calculator to all existing providers</p>	<p>JP</p> <p>JP</p>	<p>January 2009</p> <p>January 2009</p>	Assessment completed.
Providers' performance improves; there are no 'no star' services in Dudley.	3.3	Analyse LAMA data to identify poor performers	JP	January 2009	Initial analysis completed.
Services for people with complex needs and challenging behaviour have been reviewed	3.4	Review to be included in the review of the Learning Disability Strategy	AP	March 2009.	

SECTION 4 : HEALTH CARE

Overall policy objective: all people with learning disabilities get the healthcare and the support they need to live healthy lives.

Lead manager : Carol Richardson

LDPB Sub-group : Health

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
PCT and Dudley group of Hospitals address the recommendations in <i>Healthcare for All</i> and the government's response, particularly in ensuring that reasonable adjustments are made to all health services to reflect the specific needs of people with learning disabilities.	4.1	<p>Partnership Board and PCT to ensure people with learning disabilities and their family carers are partners in improving healthcare for people with learning disabilities.</p> <p>All relevant bodies to follow the guidance and/or use toolkits around health services for people with learning disabilities. This includes the <i>Specialist Learning Disabilities Commissioning Guidance 2007</i> and world Class Commissioning guide for people with learning disabilities published alongside this strategy and guidance on mental health, health action planning and health facilitation.</p> <p>PCT and DGH develop disability equality schemes to include specific action to address health inequalities facing people with learning disabilities.</p> <p>PCT to support local services to address good practice for local services, as outlined in <i>Healthcare for All</i>.</p>	SR/CR	December 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>The health and care needs of people with a learning disability are met when they go into hospital</p>	4.2	<p>Dudley Group of Hospitals to be requested to produce an action plan from their review of practices in the light of Death By Indifference & Health Care for All Reports</p>	Sue Roberts	Nov 2008	Action plan requested
		<p>Commissioners to discuss via Quality Review meetings Individual patient experiences as a regular item on the agenda.</p>	Sue Roberts/Neill Bucktin	Jan 2009	Specific case examples requested from the LDSHS team for discussion
		<p>Review of the development of joint funded post for a Hospital Liaison Nurse for patients with LD in line with Good Practice in learning disability nursing. A post of a liaison nurse be established within the hospital to work with the patients and staff to ensure the needs of patients with learning disabilities are being addressed</p>	Sue Roberts/Neill Bucktin	Jan/Feb 2009	Evidence/validation of improvements to be obtained from other Trusts who have established these posts

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
<p>The health and care needs of people with a learning disability are met when they go into hospital</p>	<p>4.2(cont'd)</p>	<p>Joint working with DGH and Learning Disability Specialist Health Team at Acute Liaison Group meeting</p> <p>Improve the Care Pathway for patents from Primary to Secondary care and back to Primary care. With proactive liaison with GP surgeries by CTLD nurses (in line with Good Practice in learning disability nursing providing appropriate clinical intervention and support of the DES) to obtain information re clients being referred to DGH, then to provide support</p> <p>Other actions:</p> <ul style="list-style-type: none"> • Policies, procedures and training to be reviewed and an action plan to be developed to address the support needs of patients with special needs (i.e learning disabilities). • Within the patient data recording, a system must be developed to identify patients who have a learning disability and may need additional support whilst accessing care. 	<p>PALS Officer DGH + Jacqui Howells, Health Facilitation coordinator + GM for LDSHS</p> <p>Commissioning + Snr Nurse from PCT and LDSHS</p>	<p>March 2009</p> <p>Jan – March 2009</p>	<p>To be developed to ensure the reporting arrangements are via the Health Sub Group of the PCT</p> <p>Review of Bench marking against Good Practice in learning disability nursing.</p>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
<p>The health and care needs of people with a learning disability are met when they go into hospital</p>	<p>4.2(cont'd)</p>	<ul style="list-style-type: none"> • On admission of a patient with special needs (learning disabilities) information to be obtained from the patients family, carers, Health Action Plans or their communication passport relating to the patients communication, feeding and mobility support needs and kept on the ward to support their care plans. (see draft of LD ward care plan supported for introduction at Acute Liaison group) • On admission the patient with special needs (i.e learning disabilities) be allocated a key worker on the ward/admission area to support the patient and ensure their needs are met • Two days post admission the service PALS Co-ordinator to visit the patient to establish if their needs are being met and to facilitate any outstanding issues 			

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
<p>The exact number of active health action plans is known.</p> <p>Health Action Plans are regularly reviewed and are up-to-date.</p> <p>Health/social care professionals are aware how these plans are to be used.</p>	4.3	<p>Primary Care working Group to develop and manage the review of the SNR + Read Code cross match information to establish information of health action plans</p> <p>Directed Enhanced Services will facilitate Health Screening which highlights risks to health, these are then developed by the clients carer/support staff into an Action Plans + recording on SNR</p> <p>Health Action plans will be discussed at client reviews with CTLD worker Information from reviews fed to SNR</p> <p>All transition plans and year 9 reviews where appropriate to contain a section on health needs and start the development of a health action plan.</p>	<p>Carol Richardson/Ann Parkes</p> <p>Commissioners/Sue Cooper</p> <p>MS</p>	Dec 08 – Feb 2009	Process of accessing information on health action plans being reviewed via the LD Primary Care Sub
<p>Annual health screening is being achieved</p> <p>The PCT has accurate data on how many people have been screened</p>	4.4	<p>Directed Enhanced Services are being commissioned by PCT with Multi-Professional Training for primary care delivered by the LDSHS team</p> <p>Commissioners will receive information via DES and SNR will be used to cross reference data</p>	<p>Commissioners</p> <p>Commissioners/SNR</p>	<p>January – Feb 2009</p> <p>Feb 2009</p>	All GP practices signed up to the DES will receive Multidisciplinary training

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
The capacity of the of the Health facilitation team has been reviewed and its work has been prioritised	4.5	Options review being undertaken by HF team for service redesign Commissioners to review options.	GM/Snr Nurse for LDSHS + HF team Commissioners	Jan – March 2009	
The clinical skills of community nurses in the Nurses in the CTLD team are being used effectively.	4.6	Review of CTLD Nursing to develop the service in line with Good Practice in learning disability nursing	Commissioning + Snr Nurses from PCT and LDSHS	Jan – March 2009	Review of Bench marking against Good Practice in learning disability nursing. With proposal for development report
The mental health needs of people with learning disability are being met. Council and PCT staff receive appropriate training.	4.7	Ongoing training being developed to address identified training needs	GM from LDSHS (Carol Richardson) + Lead officer for LD Social Care (Ann Parkes)		Training programme has been arranged.

SECTION 5 : WORK, EDUCATION, TRANSPORT AND OPPORTUNITIES

Overall policy objectives

More people with a learning disability have a personal budget .

All people and their families to have a fulfilling life of their own, beyond services, that includes opportunities to work, study, and enjoy leisure and social activities.

More people with learning disabilities are supported into paid work, including those with more complex needs.

By 2011, people with learning disabilities will be able to use public transport safely and easily and will feel confident about doing so

Lead manager : Ann Parkes

LDPB Sub Group : Learning, Jobs and Opportunities

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Day Service Strategy agreed by Cabinet in 2007 is reviewed in the light of (a) Joint Review findings and (b) sale of Audnam/Grange House	5.1	Agree way forward with Director and Cabinet member to include re-provision of Lower Gornal and one other centre.	RC	January 2009	Outline report to Cabinet agreed with Director and Cabinet Member.
			RC	March 2009	
		Report to Cabinet	AP	December 2009	
The management team in Day Services is restructured to deliver the change programme	5.2	Restructuring proposals to be agreed. HR process to be determined New appointments to be made	RC/ AP	January 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Staffing establishment in Day Services is restructured to deliver the change programme	5.3	HR process to be determined Introduce progression for support workers Review all DCO posts	RC/ AP	From March 2009	
The range of community based services/satellites is increased. More people with complex needs have access to these activities.	5.4	DACHS Community Centres manager to be co-opted on to Day Service project team Identify dedicated staff to focus on community capacity building. Identify numbers of people with complex needs currently accessing community activities Further develop PULSE and Signpost	AP AP RC AP	January 2009 January 2009 December 2009	Manager agreed. Completed
More of the service is delivered by external providers	5.5	Encourage increased take-up of innovation grant	JP	June 2009	
People with learning disability and complex needs are involved in decisions re their care plans. Care Plans reflect people's aspirations and preferences	5.6	Audit of care plans to be undertaken Directorate Transforming Social Care strategy to include implementation of person centred planning, support planning and carers' impact assessments for all adults with complex needs or where changes are planned in their support or services.	DS Managers TI	June 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Everyone with learning disability and complex needs has been offered a direct payment or personal budget	5.7	Identify which clients already have DP Write to those who do not have a DP with information Programme in meetings/reviews with clients and carers	CE/SR/DG TMs TMs	January 2009 January 2009 February 2009	
Take up of Personal Budgets increases as an alternative to day centre attendance	5.8	Awareness raising events for stakeholders Audit records to ensure DP are offered Liaise with MIT to ensure SWIFT/AIS will capture data	TI LD managers	March 2009 March 2009	
The experiences of people who use direct payments influence future commissioning practice	5.9	Analysis of how DPs are spent to be undertaken	DP Team	March 2009	
Consistent good quality electronic recording is in place.	5.10	Audit records Audit staff training achieved Reconsider allocation of staff across existing services	DG/SR	January 2009 January 2009 March 2009	Audit completed.

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
People with a learning disability are able to use public transport more easily	5.11	<p>Continue to develop independent travel.</p> <p>Partnership Board to engage with local transport plans to ensure the effective inclusion of people with learning disabilities.</p>	<p>SC/APd</p> <p>APd</p>	<p>December 2009.</p> <p>December 2009.</p>	
The Council and its partners will include leisure and social activities in developing person centred approaches and planning for people with learning disabilities and their families.	5.12	Further efforts to be made to improve access to leisure facilities for people with a learning disability	RC	December 2009	
More people with a learning disability have paid work	5.13	<p>Ensure LAA target is met by March 2010</p> <p>Appoint second job coach</p> <p>Work with local agencies and providers to achieve better co-ordination of employment schemes</p> <p>Encourage Council and NHS to employ more people with a learning disability.</p> <p>Explore options to bring in additional funding</p> <p>Review existing funding to employment organisations.</p>	VW/AP	<p>March 2010</p> <p>June 2009.</p> <p>December 2009.</p> <p>December 2009.</p> <p>December 2009.</p> <p>December 2009.</p>	

SECTION 6 : HOUSING AND SUPPORT

Overall policy objective: all people with learning disabilities and their families have the opportunity to make an informed choice about where, and with whom, they live.

Lead Manager : Paul White

LDPB Sub-Group : Housing

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>The Council knows how many people with a learning disability need a home of their own</p>	<p>6.1</p>	<p>Joint Strategic needs assessments to identify the housing needs of people with learning disabilities to inform strategic planning, including the number of people with learning disabilities living with family carers over 70 and those with complex needs.</p>	<p>BC/AP</p>	<p>December 2009.</p>	
		<p>Programme of targeted reviews to be carried out with people living in residential care to identify those who could/want to move to independent accommodation</p>	<p>Reviewing Officer</p>	<p>September 2009.</p>	
		<p>Work with people still living with families to establish if that is the person's preferred option and to instigate plans accordingly.</p>	<p>CH/MS</p>		
		<p>Housing 'waiting-list' to be formalised to ensure clients are matched quickly to available properties.</p>	<p>JS – AST</p>		
		<p>Wherever possible, transition plans and year 9 reviews to address future accommodation choices</p>	<p>MS</p>		
<p>More people receiving personal budgets and direct payments to increase their choice and control over where they live and with whom;</p>	<p>TI</p>				

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
There is an adequate supply of suitable accommodation	6.2	<p>Housing strategy to reflect local population housing needs, including those of people with learning disabilities.</p> <p>Directory of available properties to be maintained with Housing Strategy team.</p> <p>Care managers to have an increased focus on home ownership and assured tenancies as a model for housing and support</p>	<p>AL</p> <p>AL</p> <p>CH/MS</p>		
The three residents of Mere Road are resettled by the due date of March 2010.	6.3	<p>Funding agreement to be negotiated with PCT</p> <p>Suitable properties to be identified.</p> <p>Contract for care and support to be let</p> <p>Residents to move</p>	<p>RC/AP</p> <p>JP/HSG</p> <p>JP/AP</p> <p>JS - AST</p>		
Glebelands is re-provided as supported living	6.4	<p>Residents who want to leave to be found suitable alternative accommodation</p> <p>Contract for care and support to be let</p>	<p>JS – AST</p> <p>JP/AP</p>		

SECTION 7 : DIVERSITY AND RELATIONSHIPS

Lead Manager ; Ann Parkes

LDPB Sub-group : Diversity and Relationships

Overall policy objective: people with learning disabilities have the choice to have relationships, become parents and continue to be parents, and are supported to do so.

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPMGR	TIMESCALE	PROGRESS REPORT
The needs of lesbian, gay, bisexual and transgender people are recognised in commissioning strategies.	7.1	To be included in revised Learning Disability Strategy	RC	March 2009	Agreed by LDPB in January 2009. Actioned
		Remit of Ethnicity sub-group of LDPB to be widened to include Diversity	RC	January 2009	
		Sexuality to be logged on the SNR	CE	January 2009	
All relevant bodies ensure that they are using accessible information when supporting parents with a learning disability and that their services are accessible, as required by disability discrimination legislation.	7.2	Review existing public information to ensure it is accessible for parents with a learning disability	Jenny May	December 2009.	
Local authorities use personal budgets and direct payments to support parents with a learning disability	7.3	Identify which parents may wish to receive a personal budget	TI	December 2009.	

<p>Services to people in the BME community are further improved and adapted to take account of the Transforming Social Care agenda</p>	<p>7.4</p>	<p>Sustain the support given to families by Ehsas Carers, and hard to reach BME users through the advocacy & day service provided by Apna Group, which is being expanded to support a group of women who hitherto have not received mainstream services.</p> <p>Establish a community base for these groups.</p> <p>With support from the specialist transition workers, improve engagement and guidance to families with a young person in transition and in the context of personalisation.</p> <p>Provide safeguarding: information to family carers on personal relationships & capacity of disabled family member ('forced' marriage and general safeguarding issues)</p> <p>With support from the Transformation Team to educate families on personalisation, and a targeted information campaign within the BME communities about Personal Assistants and recruitment.</p> <p>Pilot a specific piece of work on PCP's for Apna Group members.</p> <p>To complete equality impact assessments as required by the Corporate Equality and Diversity Group.</p>	<p>AM</p>	<p>September 2009.</p>	
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SECTION 8 : SAFEGUARDING

Overall policy objective: people with learning disabilities will be able to lead their lives in safe environments and will feel confident that their right to live in safety is upheld by the criminal justice system.

Lead Manager : Richard Carter

LDPB Sub-group : Keeping Safe

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Interests of people with LD to be fully represented at Safeguarding Board	8.1	Establish a 'Keeping Safe' sub group of the LDPB which will have dual reporting responsibility	RC	January 2009	Group established.
All staff are familiar with the complaints procedure	8.2	Develop accessible materials to help people with learning disabilities and their families understand their rights and how to complain. Guidance on complaints and easy-read leaflet to be briefed out to teams	TMs/Unit managers/ Steve Rice	January 2009	All staff have been re-issued with a copy of complaints leaflet, which will be placed on agenda of all team meetings & minuted
The Learning Disability Board works closely with the Adult Safeguarding and Safe and Sound Boards	8.3	The two Boards will identify a hate crime lead The LDPB will identify a link-person responsible for working with the Adult Safeguarding and Safe and Sound Boards The Safe and Sound Board will ensure their response to hate crime against people with learning disabilities is mainstreamed within their response to hate crime overall.	RC/DH RC DH		

SECTION 9 : MAKING IT HAPPEN – LOCAL ACCOUNTABILITY, CAPABILITY AND LEADERSHIP

Overall policy objective: to put leadership, delivery and partnership structures in place that will make sure that the outcomes set out in this strategy are delivered.

Lead manager : Richard Carter

LDPB Sub Groups : Joint Commissioning Group

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Implement Transfer of Funding	9.1	Identify and agree sum to be transferred; report to Cabinet.	RC/AP/SR	March 2009	Progress report sent to DH in December 2008.
		Update and revise S75 agreements	RC/NB		
The Learning Disability Partnership Board is at the centre of work to deliver Valuing People Now	9.2	Close links are built between Partnership Board and the Joint Strategic needs assessment process and the Local area agreement	BC/RC		
		The Board reports annually to the Local Strategic Partnership	RC/LS		
		The Board reports annually to the Overview and Scrutiny Committee	RC		
A Review of the Board has been carried out	9.3	Review the membership and chairing of the Board	RC	March 2009	
		Review how the Board links and consults with other Boards and partners	RC		
		Ensure sufficient resources for the operation of the board.	RC		

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
<p>The workforces across public services are given the appropriate support and training to equip them with the values, skills and knowledge to deliver the <i>Valuing People Now</i> priorities for all people with learning disabilities.</p>	9.4	<p>Support organisations and training providers to continue using the learning disability qualifications and nVQs for the induction and development of workers supporting people with learning disabilities</p> <p>Partnership Board to make sure that access to the post-16 education and training sector is fully included in the local strategy for responsibilities returning to local authorities.</p>	<p>AP</p> <p>AP</p>	December 2009.	