CONSULTATION QUESTIONS

Progress and Challenges

Q.1 Do the findings of the evaluation broadly reflect your views about services for people with learning disabilities/carer?

Yes ☒ No ☐

Please provide any comments, evidence and/or examples here

Yes the Scottish Borders Learning Disability Service does agree that the findings of the evaluation largely reflect our views.
- Past ten years have been good but still a long way to go.
- Fear re impact of current financial situation – don’t want things to go backwards to less person centred and more institutionalised care.
- Greater consideration should be given to future demand, taking account of the increasing numbers of people with a learning disability who require support.
- Greater consideration should be given to the needs of Family carers who are living longer
- Greater consideration should be given to the increasing health needs of people with a learning disability as they grow older and live longer.
- Welfare reform is a significant challenge
- Need for clear strategic direction and lead from Scottish Government for next ten years.

Q.2 Can you give examples, either locally or nationally, of what you think has worked well over the last 10 years of The same as you?

Please provide any comments and/or examples here

- Development of SCLD – in terms of provision of National Steer and implementation of Same as You? recommendations. However not sufficient monies invested by Scottish Government in this body to work consistently and widely on a National basis.
- Implementation of a Clear set of Values and Principles which now underpin all Services in Scotland.
- Underlying common practice approach of Accessible information – but still considerable work to be done locally and nationally
- Development of Local Area Coordination as the Community
response to people and their families, seeking local solutions to their needs and aspirations.

- **Health Improvement and Health inequalities** agendas have brought about some more equitable access to Health Services and a greater opportunity to be healthy and well through equal access to Sport and Leisure.
- **Transition from Children Services to Adult Services** has been highlighted as a critical time to get it right. However there remains much work to be done to get it right for everyone, in particular those people with complex needs.
- Improved support to people with complex needs and their family carers – for example with development of PAMIS.
- **Long stay hospitals** have been closed
- **Managed Care Networks** have been a valuable development. In South East Scotland the work ongoing is vibrant and progressive. Strategic planning across the SEAT MCN area is evident. For example, the Models of Care Project has provided a focus and structure for strategic development.
- More people live in their own community
- In Scottish Borders we have active links with Primary Health GP practices. This is a real opportunity to **improve access and knowledge across Primary Health Services**. - local
- We have a dedicated Liaison Nurse in place to support and enable access to all levels of Health Service in Scottish Borders. This post has Improved/ raised profile of PWLD - local
- **Changes to day services**, more community presence and increased capacity building - local
- **Autism and dementia screening** - local
- More **inclusion** in mainstream provision e.g. schools
- Frameworks for **positive risk taking** more developed - local
- **Adult protection** - greater awareness, knowledge and confidence
- People returning to local communities from out of area – e.g. Intensive supported living service for people with forensic needs - local
- **Supported employment / Work opportunities** - Ways2Work Service have award winning achievements – local
- establishment of **Social Enterprises** providing work and training opportunities local and national (Kingsmeadow Catering, Green Team, Book Donors, Border Links)
- people who use services and parent and carers delivering training to social care and health workers – local and national (CTS)

Q. 3  Can you give examples of issues in current work and/or policies that still need to be addressed?

- **Positive Risk Management** needs to be embedded across all sectors of Service provision. In Scottish Borders, we have a local joint policy, yet patchy sign up in practice. Perhaps Scottish Government has a role to stress the need to support people with their
risk taking more proactively.

- Full sign up to the re-ablement and independent living agenda across all sectors.

- Access to the Provision of the breadth of Models of Care in each Region – from LAC through to Supported Living and Assessment and Treatment Inpatient Service and Specialist Forensic Inpatient service. As such, people will remain in or as close to their own community. In Scottish Borders we have had no inpatient service since 2007, but have invested in supporting the person in their own home through difficult times. This is not always successful and sometimes an assessment and treatment inpatient response is needed. In these instances, we look to our Managed Care Network partners for a resource, not often with success, as beds tend to be filled by their own local people. As such we have had to look to private hospital care which can take the person far from their community and family. Hence having no Inpatient assessment facilities locally forces people out of area. The South east of Scotland has developed a Models of Care report which details a revised tiered approach to service provision. The Scottish Borders is a key partner to the developing work with the MCN area. The outcome for people will be ideally improved access to the right services at the right time as close to home as possible.

- In Scottish Borders, we have an integrated Learning Disability Service, with NHS Borders and Scottish Borders Council Social Work Services having a Joint Manager and co-located Service base in Melrose. We lack though an integrated pooled budget and as such tensions still arise about each agency’s interpretation of joint funding. Perhaps the Social Care and Health integration agenda will address this.

- Improved access for People with a learning disability and Older age needs to mainstream services/opportunities e.g. people with dementia

- The experience of the parent with a learning disability in terms of parent assessment and support to parent effectively. Improved Support for Families. Parents who have a learning disability mostly do not have a good experience - there being a lack of investment of resource in supporting people to parent.

- People with Autism – the SAY? has confused the expectation of where people with high functioning needs sit within Services. As such any future Learning Disability strategy should focus on Autism for people with learning disability.

- Health Screening – more work to be done with primary care

- Transitions – good practice guidance to achieve consistency across Scotland

- Work Opportunities for People within large employer agencies – for example Local Authority and NHS. Development of National policy on job opportunities might progress this.

- Further Education Colleges have reduced the opportunities for people with a learning disability. National policy would set out the parameters and expectations

- Skills development for supporting End of Life Planning

- Review of Emergency Placement resource
• Availability of Housing for People with Specialist Needs. Although opportunities are improving, Core and Cluster needs to be the preferred model. Supporting people monies supported single tenancies with 24 hour support as a model – this is no longer sustainable.
• Real Choice for People who supports them and who they live with.
• Transport – good transport systems locally which enable independent travel. Also suitable adapted transport.
• Supporting and enabling the person and their family to be proactive in future Planning
• Reviews which offer a streamlined pathway for the person and their family
• National good practice guidance/policy on use of Motability transport for person in receipt of this benefit for daily living and access to services.
• Consistency of use of Adult with incapacity legislation across Scotland. Support to adhere to least restrictive principles set within Act.

Good Practice – Organisations

Q. 4 Can you provide examples of what you have done over the last 10 years, within your organisation, to improve services and access to services within your local area?

1. Development of the Local Area Coordinator Service and more recently the further development of the Community Link Workers to support the LAC role
2. Integration of NHS and Local Authority Social Work services in 2006, with multi professional provision. Co-location to provide more streamlined and accessible service to people.
3. Within this a Governance Structure which is inclusive of people with a learning disability and family carers. Recently reviewed the further development of our Citizens Panels will offer people and family carers a greater voice within their communities.
4. Development of a multi agency Transitions procedure – albeit this needs further investment to achieve a clear and positive pathway for all, regardless of level of need.
5. In Scottish Borders, all large institutions were resettled in the early 1990s. We have taken this a step further and have been reprovisioning Registered Residential homes into Supported Living opportunities, where people will be supported in their own tenancies in a Core and Cluster model of support.
6. Development of a Forensic team within our Community teams which will offer the skill and experience to people with a learning disability who are in contact with the Criminal justice system.
7. We have also commissioned an Intensive Support service to support people who are offenders on the edge of Criminal behaviour in both a core and cluster Supported living Service in two towns in the Borders and Outreach to those living with their families.
8. Ways2 Work is the Scottish Borders Supported Employment
Service for people with a learning disability. A successful and cost effective service to enable people to be in employment

9. Developed strong links with the Third Sector providers locally through a Providers Group and individual working relationships. This includes Self advocacy services and Family Carer support services.

10. A redesign of Day Services locally to provide a range of Day Opportunities in each local community focused on people with complex needs.

11. Making Choices Keeping Safe – The development of policy and practice guidelines supported by an inclusive steering group and staff training to support people with LD in the area of relationships and sexual health

12. Scottish Borders has an SDS pilot which has informed an agreement from the council to support the roll out of Self Directed Support across all client groups. Continued roll out for people with a learning disability will happen through the Day Opportunities individual Outcomes focused reviews underway.

13. Development of Intensive Interactive Communication approaches which support communication for people with complex and profound needs.

14. Investment in Advocacy services for people with a learning disability

15. Development under Equally Well monies to develop local access for people with a learning disability to sport and leisure – Development under Equally Well monies to develop local access for people with a learning disability to sport and leisure

A ‘Give it a try’ event was held in September 2009 where 32 adults with a LD came along to a multi sports festival run in partnership with BSLT and Borders Disability Sports to try out many different sports and physical activities – indoor and outdoor activities to get a taste for exercise and physical activity being fun.

**A time limited Physical activities Grant Scheme** was established where local groups in the Scottish Borders could bid via the Health Improvement Strategy group for access to some of the Equally Well money. Successful bids included money to purchase a ramp for a local bowling club to enable better access to the indoor bowling green. Money to Interest link to establish a local 10-week taster dance sessions for 6 young adults with LD to try out Hip hop and other styles of dance.

**Football skills group** for people with a learning disability in Hawick. Weekly sessions with 10-12 participants, focusing on skills and fitness, plus working with numbers and colours.

Work to extend football skills groups for people with learning disabilities into other parts of the Scottish Borders is ongoing in partnership with BSLT and the Scottish Football Association.

**Recreational Rebound** – Therapeutic use of a trampoline for people with a learning disability. Course set up in September 2010 in partnership with BSLT and Sense Scotland, held at The Gytes leisure centre in Peebles. Course has been running at capacity
(10 service users) since start-up and was funded to run again after the pilot finished, from 15/9/11 to 31/3/12. Work with partners is ongoing to expand Rebound into the central and Eastern Borders.

**Walk-It Leader training** – training staff and people with a learning disability to lead local walking groups in partnership with Scottish Borders Council Pathways to Health Coordinator and NHS Midlothian. Training involves assessing and grading walks for suitability form people with a learning disability, and producing a guide. Local Walk-It groups are encouraged to apply for grant funding to help make their walks more accessible to people with a learning disability.

**Gym taster sessions** in partnership with BSLT. Additional coaches were on duty funded through the Equally Well money to provide 1:1 coaching for people.

**Eyemouth swimming pool** – in partnership with BSLT, installation of an internal tracking hoist system to improve access to the pool for people with a learning disability, and creation of a dedicated disability changing area with improved facilities.

**Kelso swimming pool** – installation of new hoist equipment to improve access to the pool for people with a learning disability, as part of the upgrade project being led by BSLT.

**Gym for Garvald group** – Training and support was provided for BSLT staff to enable them to set up and run a series of keep fit classes for people with a learning disability.

16. Development of a Dementia Care Pathway – a multi-disciplinary care pathway involving psychology, psychiatry, nursing and OT assessing people with Down’s syndrome at risk of developing dementia
17. GP Links Workers promoting access to Health Services
18. Liaison Nurse to promote access to Health Services
19. Employment funding has been mainstreamed
20. Introduction of new Providers to the area to offer experience and more choice
21. Local Autism diagnostic pathway
22. Dedicated Learning Disability Dysphagia Service
23. Dedicated Learning Disability Review Officers
24. I’ll show You Symbol dictionary for making information accessible
25. Adult Protection training and awareness raising for all
26. Health Champions Course at Borders College - for people with a learning disability to champion Health matters in their own community.
27. A partnership approach to developing an Outcomes Approach to work with people with a learning disability.

**Good Practice - Individuals**
Q.5 What have you done, as an individual, to make positive changes within your local area?

I have answered this on behalf of many individuals.

- Place the person with the learning disability at the centre of all the work we do.
- Consistently examine my value base to ensure positive approaches based on the Same as You? Principles are in my practice
- Motivate and challenge other professionals can colleagues outwith the Learning Disability Service to think differently towards people with a learning disability e.g. Older people services, employers, Health Services, local shopkeepers etc.
- Listen carefully to the voices of people with a learning disability and their family carers and encompass these views in strategic planning and development
- Support the development of local opportunities for people.

Future Priorities - Healthcare

Q.6 What still needs to be done to ensure that people with learning disabilities have access to better and more appropriate healthcare?

- Approach the access to and equality of access to high quality health services at grass roots, namely in Primary healthcare services in GP practices. - More education for GP’s re needs of PWLD
- Increase the knowledge and understanding of Learning Disability across all Health practitioners and Health services – including Hospital care. - on what having a LD means and implications for supporting pwl and enabling them to access services
- Ensure all health services and information sheets are in accessible form.
- Invest in local Learning Disability Nursing to ensure consistency of service to all.
- Transport for pwl to get to appointments – particular local issue re accessing therapeutic services only available in Central Borders
- Annual proactive health checks for pwl – breast, bowel, lung, testicular
- ‘Mainstreaming’ LD training in general health and Social Work training
- Need to develop a wider range of psychological therapies for PWLD. It is not about better care it is about equality in care and the barriers which hinder this happening.
  Some of these barriers are:
  - Health checks for pwl are important and research has found this, but does not seem to be followed through in policy.
  - Support staff understanding and identifying signs and symptoms of ill health.
  - Due to the above health services being accessed later leading to
a delay in interventions and resulting in poor prognosis.
- Issues around AWIA are still an issue and clear guidance for medical staff is required.
- Requires the Government to be more clear with health boards around LD and what needs to be in place.
- The QOF target for LD was stopped and nothing replaced it, so GPs are only obligated to provide care there is nothing around the extra health needs of this client group within the QOF to ideally take a preventative stance rather than a reactive one, ie bullet point 2.
- Specific heat targets for learning disabilities.

**Future Priorities - Education**

**Q.7 What still needs to be done to ensure that people with learning disabilities have access to better educational opportunities?**

- Mainstreaming education for people with a learning disability is not necessarily the solution. Locally there has been a disinvestment in Additional Needs Assistants. As such students with a learning disability do not have equity of access to learning. Greater investment in supports to young people in education would be beneficial.
- Investment in Further Education opportunities – not disinvestment as seems to be the current practice of Colleges. Develop real pathways for people which result in valuable experiences and positive outcomes – not just ways of filling in time for a few years.
- More thought to be given to real inclusion in Colleges
- Colleges need to make provision for people with more profound and complex needs.
- More detailed assessment around learning Disability by Children’s’ Services to enable smooth transition to Adult Services.
- Adult education appropriate and accessible for PWLD – e.g. adult literacy

**Future Priorities – Independent Living**

**Q.8 What still needs to be done to ensure that people with learning disabilities are able to live independently?**

- Development of National tariffs of Support service rates, as is currently happening in relation to Castlebeck services through Scotland Excel.
- Investment in Telecare - Assistive Technology – to maximise a person’s independence
- Embedding the Outcomes approach to enable flexibility of response from Commissioned services and so greater independence and self reliance.
• Develop flexibility within commissioned support services to support people to maintain friendships and relationships.
• Investment in supporting young people in Transition to develop skills to access local transport. We have developed a Community Link worker team to support LACs in this work.
• Review and revise the basis upon which support services are commissioned to enable flexible responses, rather than rigid hours of support.
• Scottish Borders is currently progressing a partnership review of all Short Breaks/respite services with a view to having a menu of options available for people.
• Planning with family carers for a time when parent may no longer be able to care. More work is needed here.
• Hate crime and Harassment – training and support to care staff and pwld to develop skills to better understand what the crime is and take action against it
• Enhanced understanding by general population re what it means to have a LD. General acceptance of people as individuals
• Greater understanding and support for helping people to develop and maintain friendships and relationships
• More resources to help people make the transition to independent living – dev of skills – opportunities to experience different opportunities.
• People with sensory/ complex needs need specialist accommodation and skilled support.
• Commissioned services outcomes for people and support people in activities that develop independence and promotion of skills.
• Managing risks re use of social media – guidance needed
• Rights versus risks – People with mild learning disability – letting people take risks to help them to learn.
• Finding more effective ways to help people with their finances
• Addressing peoples loneliness – LD dating agencies and buddyng
• Social Experiences.

Future Priorities – Employment

Q.9 What still needs to be done to ensure that people with learning disabilities have access to better employment opportunities?

• Development of employment opportunities within NHS Boards and local Authorities. Scottish Borders Council is looking to develop a single skilled and knowledgeable approach to Supported Employment for all client groups, which will offer a one stop shop, advice, signposting and employment support. In so doing it is
expected that Scottish Borders Council and NHS Borders will open up employment opportunities and be a role model to local businesses.

- Welfare Reform – consideration of needs of people with a learning disability with regard to accessible information, access to benefits
- Local transport networks do not necessarily support people in their employment and this issue needs to be taken to a Corporate level
- Development of Social Enterprises – funding issue
- More relevant college courses
- Development of the project SEARCH approach to providing work training and jobs

**Future Priorities**

**Q.10 What other future priorities do we need to focus on?**
**(Please list these in order of importance with the most important first)**

- Funding and resources for the next 10 years?
- Implementation of Welfare Reform in a way which takes account of the needs of people with a learning disability
- Development of models of care for people with complex and profound needs
- Support for parents who have a learning disability
- Transitions – especially children to adulthood (and when people retire)
- Schools need to get better at supporting people who are different and value diversity stop labelling ‘naughty’ children.
- Development of psychological therapies
- Further investment in Local Area Coordination by the Scottish Government
- Further Development of Integration agenda for Learning Disability Services
- Tackle harassment/bullying - Respect agenda