Dorset ICS Long Term Plan: Learning Disability and Autism

<u>Ref</u>	Long Term Plan Aspiration	Programme of Work	Planned Delivery date	NHSE/I support require/requested
1.	We will improve uptake of the existing annual health check in primary care for people aged over 14 years with a learning disability, so that at least 75% of those eligible have a health check each year.	Improving the uptake of annual health checks is a key area of work for the Dorset LD Health Action Group. Activities include work by experts of experience with local GP practices to support awareness of the required reasonable adjustments and improve accessibility to a health check. We are also working with the local LD forums to promote health checks to their members. We will work with care providers to ensure a question about uptake of health checks by their residents/service users is regularly monitored. A number of Primary Care Networks have also identified LD health checks as one of their priorities within Locality Improvement Plans	TBC	Request to NHSE/I to share good practice and areas of success to inform local interventions
2.	We will also pilot the introduction of a specific health check for people with autism , and if successful, extend it more widely.	We will await guidance from national/regional colleagues about how this new initiative can be progressed	tbc	Guidance around implementation
3.	We will expand the Stopping over medication of people with a learning disability autism or both and			

	Supporting Treatment and Appropriate Medication in Paediatrics (STOMP- STAMP) programmes to stop the overmedication of people with a learning disability, autism or both.			
4.	We will accelerate the LeDeR initiative to identify common themes and learning points and provide targeted support to local areas. And we will continue to fund the Learning Disabilities Mortality Review Programme (LeDeR), the first national programme aiming to make improvements to the lives of people with learning disabilities.			Support is required to understand the best means of creating a sustainable approach to LEDER
5.	Sustainability and Transformation Partnerships (STPs) and integrated care systems ICSs will be expected to make sure all local healthcare providers are making reasonable adjustments to support people with a learning disability or autism	The need to ensure reasonable adjustments is enshrined within local service specifications. Training and support is offered locally through a 'Quality Checkers' programme. Mystery Shopper exercises are also undertaken to inform areas of need. Each of the local acute hospitals has an LD lead to promote compliance	Ongoing	
6.	Over the next five years, national learning disability improvement standards will be implemented and will apply to all services funded by the NHS. These standards will promote greater consistency, addressing themes such as rights, the workforce, specialist care and working more	Once standards are published we will respond accordingly	tbc	Publication of standards to inform requirements

	effectively with people and their families.			
7.	By 2023/24, a ' digital flag ' in the patient record will ensure staff know a patient has a learning disability or autism.	We will link with national developments to support implementation of a 'digital flag'	2023/24	To keep local system informed of developments
8.	We will work with partners to bring hearing, sight and dental checks to children and young people with a learning disability, autism or both in special residential schools.	We will commit to incorporating routine questions around health screening within the annual reviews undertaken by the Looked After Children Team	2021/22	To support more responsive commissioning of services for hearing, sight and dental checks
9.	Together with local authority children's social care and education services as well as expert charities, we will jointly develop packages to support children with autism or other neurodevelopmental disorders including attention deficit hyperactivity disorder (ADHD) and their families, throughout the diagnostic process.	We will commit to commencing a review of current provision to fully understand gaps with a view to co-producing a diagnostic pathway for children with autism or other neurodevelopmental disorders		Dedicated financial resource to support development of new diagnostic pathways Sharing of best practice
10	Over the next three years, autism diagnosis will be included alongside work with children and young people's mental health services to test and implement the most effective ways to reduce waiting times for specialist services	Linked to point 9. Children and young people's mental health services are currently offering support for autism diagnosis for children with a co-existing mental health presentation. Development of a co- produced diagnostic pathway will encompass this element		

11	By 2023/24 children and young people with a learning disability, autism or both with the most complex needs will have a designated keyworker , implementing the recommendation made by Dame Christine Lenehan.	All Children and young people with complex needs currently have a named professional		Clarity on the role and responsibilities of the 'designated keyworker' and how this aligns with other exiting roles
12	By March 2023/24, inpatient provision will have reduced to less than half of 2015 levels (on a like for like basis and taking into account population growth).	Dorset will work to reduce the number of inpatients to: Adults – 16 Children & Young People – 2 To achieve this we have developed a local risk register of individuals deemed at risk of admission and will work with existing and new care providers to increase availability of care packages to meet the needs of complex cases. As a system we are continuing to work on developing the local crisis response and intervention offer	2023/24	Support to facilitate regional conversations to consider optimal scale, configuration and location of commissioned beds. Support to ensure all stakeholders are engaged within the development of NCM provider collaborative where specialist commissioning of in-patient beds is being devolved
13	We will work with the CQC to implement recommendations on restricting the use of seclusion , long-term segregation and restraint for all patients in inpatient settings, particularly for children and young people.	We will explore piloting of the use of national tools building on other existing approaches linking to the requirement to quality assure providers through 6-8 weekly visits. We also add this to the standing agenda for monthly cohort review meetings		
14	We will review and look to strengthen the existing Care, Education and Treatment Review (CETR) and Care and Treatment Review (CTR) policies, in partnership with people with a learning disability, autism or both,	We review existing protocols and practice in light of emerging guidance to ensure process meet all necessary standards and requirements		Support peer review of processes across the South West

	families and clinicians to assess their effectiveness in preventing and supporting discharge planning.			
	Local Objectives	Action required to meet target	Planned Delivery date	NHSE/I support require/requested
15	We will further our understanding of the needs of the people with a learning disability and Autistic people – including admission patterns, health disparities, health inequalities and collaborate with all stakeholders to improving the lives of people in the SW Reduce LOS for anyone in specialist hospital including use of 12-point discharge	Process is embedded in existing discharge planning and forms part of the content of the monthly cohort review meetings	March 2020	
16	Enhance local employment opportunities for people with a learning disability and/or autism in the South West	Through our 'Pathways to Employment' programme we will create new employment pathways to enable people with a learning disability and/or autism to obtain meaningful paid employment that supports independent living	March 2020	
17	People with the most complex needs will be offered improved access to care in the community, allowing more people to live in or near their own homes and families	Working across health and social care, we will seek to use community assets to inform local community development that aligns with and supports an intensive offer to people with the most complex needs. Insights and learning from	2023/24	

		CTR/CETRs will used to inform future service development	
both, v	e with a learning disability, autism or will be offered the opportunity to have onal health budget (PHB), where		