

Joint Health and Social Care Self-Assessment Framework – Learning Disabilities

THE MEASURES

Section A - Staying Healthy

Section B – Being Safe

Section C – Living Well

Winterbourne View Final Report Annex B (WBV)

Adult Social Care Outcomes Framework 2013-14 (ASCOF)

Public Health Outcomes Framework 2013-2016 (PHOF)

The Health Equalities Framework (HEF) An outcomes framework based on the determinants of health inequalities (HEF)

National Health Service Outcomes Framework 2013-14 (NHSOF)

The Context

The Joint Health & Social Care Learning Disability Self-Assessment Framework has been developed to align as consistently as possible with some key national policy and guidance in direct response to the consultation undertaken 2012-2013.

The Self-Assessment Framework is a tool best employed and applied alongside the following vital policies and guidance documents;

- Winterbourne View Final Report
- Adult Social Care Outcomes Framework 2013-14
- Public Health Outcomes Framework 2013-2016
- The Health Equalities Framework (HEF) An outcomes framework based on the determinants of health inequalities
- National Health Service Outcomes Framework 2013-14
- 6 Lives Report

Completing the Framework



1. Guidance pack: This explains the rationale and the processes. It tells localities what needs to be done, by whom and the local timeframes for completing the self assessment framework.

Learning Disabilities Performance and Self Assessment Framework
The Targets, Key Indicators and Progress Criteria (2013)

Target	Indicator	Indicator 1	Indicator 2
1. Target 1: To improve the quality of care and support for people with learning disabilities in the community.	1.1. To improve the quality of care and support for people with learning disabilities in the community.	1.1.1. To improve the quality of care and support for people with learning disabilities in the community.	1.1.2. To improve the quality of care and support for people with learning disabilities in the community.
2. Target 2: To improve the quality of care and support for people with learning disabilities in the community.	2.1. To improve the quality of care and support for people with learning disabilities in the community.	2.1.1. To improve the quality of care and support for people with learning disabilities in the community.	2.1.2. To improve the quality of care and support for people with learning disabilities in the community.
3. Target 3: To improve the quality of care and support for people with learning disabilities in the community.	3.1. To improve the quality of care and support for people with learning disabilities in the community.	3.1.1. To improve the quality of care and support for people with learning disabilities in the community.	3.1.2. To improve the quality of care and support for people with learning disabilities in the community.

2. The Benchmark – Measures & Data: This revised tool provides each local area with a nationally agreed benchmark to help assess their progress. The advantage of a national tool is that this makes regions and localities comparable and allows the Public Health Observatory to analyse national data. The tool has been developed in partnership and consultation with all regions, commissioners and people with learning



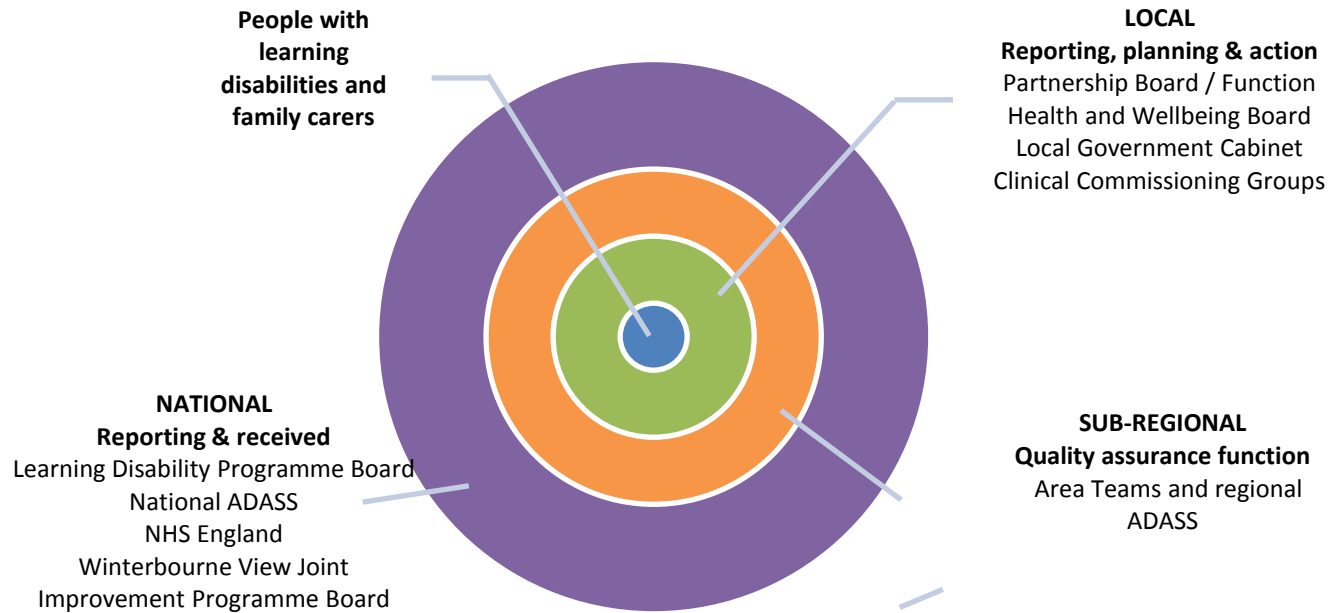
3. The evidence tool: Following consultation in 2012 – 2013, we have requested that the Improved Health and Lives observatory create an online feedback form which will allow easier and coordinated submission of responses and evidence.

Traffic Light Rating System

RED	In order to rate yourself RED, you must meet the criteria described under this heading
AMBER	In order to rate yourself AMBER, you must meet the criteria described under BOTH the RED and AMBER headings
GREEN	In order to rate yourself GREEN, you must meet the criteria described under the RED, AMBER and GREEN headings

The Proposed Governance

This year there is a huge change in the health and local authority structures nationally. The governance structure is outlined here:



THE FRAMEWORK MEASURES

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A1	A1	LD QOF register in primary care	The numbers of people on Learning Disability (LD) and Downs Syndrome Registers reflect the requirements outlined in QOF	Learning Disability and Down Syndrome Registers reflect prevalence data but are not stratified in every required data set (e.g. age / complexity)	Learning Disability and Down Syndrome Registers reflect prevalence data AND Data stratified in every required data set (e.g. age / complexity / Autism diagnosis / BME etc.)	WBV Action 26. WBV Action 27. PHOF 3 PHOF 4 NHSOF 1.7 NHSOF 4a

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A3	A2	<p>Screening People with learning disability are accessing disease prevention, health screening and health promotion in each of the following health areas: Obesity, Diabetes, Cardiovascular disease Epilepsy</p>	<p>Evidence that people with learning disability are accessing disease prevention, health screening and health promotion in each of the following health areas: Obesity, Diabetes, Cardiovascular disease Epilepsy but NO COMPARATIVE DATA of the population that do not have a learning disability</p>	<p>Comparative data in some of the health areas listed in the descriptor at LOCAL AREA TEAM/CLINICAL COMMISSIONING GROUP level</p>	<p>Comparative data in all of the health areas listed in the descriptor at each of the following levels;</p> <p>LOCAL AREA TEAM</p> <p>CLINICAL COMMISSIONING GROUP</p> <p>INDIVIDUAL GP PRACTICE</p>	<p>WBV Action 26. WBV Action 27. ASCOF 1A PHOF 3 PHOF 4 NHSOF 1a & b NHSOF 1.1-1.5 NHSOF 1.7 NHSOF 2.3i & ii NHSOF 4a & 4.4</p> <p>HEF Genetic & Biological Indicators - 2A Health Checks</p> <p>HEF Genetic & Biological Indicators - 2B Long Term Conditions</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5D Health screening / promotion</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A4 A5	A3	Annual Health Checks and Annual Health Check Registers	Registers not validated since set up. 25% of people with learning disability on the GP DES Register had an annual health check.	Registers Validated within past 12 months 50% of people with learning disability GP DES Register had an annual health check.	Validated on a minimum of an annual basis and process in place for all people aged 18 or over to be put on register. 80% of people with learning disability GP DES Register had an annual health check.	HEF Genetic & Biological Indicators - 2A Health Checks HEF Genetic & Biological Indicators - 2B Long Term Conditions

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
	A4	<p>Health Action Plans are generated at the time of Annual Health Checks (AHC) in primary care and these include a small number of health improving activities. Refer to RCG guidance around health action plans.</p>	<p>No evidence that the Annual Health Check and Health Action Plans are integrated.</p>	<p>GP Annual health check data indicates that a Health Action plan has been completed, directly as a result of an AHC, in the current year for 70% of patients.</p>	<p>GP Health Action Plan (HAP) contains specific health improvement targets identified during the AHC for 50% of patients (to be captured through AHC template)</p>	<p>WBV Action 26. WBV Action 27. ASCOF 1A PHOF 3, 4 NHSOF 1a & b NHSOF 1.1-1.5, 1.7 NHSOF 2.3i & ii NHSOF 4a & 4.4</p> <p>HEF Genetic & Biological Indicators - 2A Health Checks 2B Long Term Conditions 2C Care planning / Health Action Planning</p> <p>HEF Communication Difficulties and Reduced Health Literacy Indicators 3E Understanding Health Information and Making Choices</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A7	A5	<p>Screening Comparative data of people with learning disability vs. similar age cohort of non-learning disabled population in each health screening area for :</p> <ul style="list-style-type: none"> a) Cervical screening b) Breast screening c) Bowel Screening (as applicable) 	Unable to produce data for pwld in each and every screening group a, b & c.	<p>Numbers of completed health screening for eligible people who have a learning disability; AND Some comparative data but not for every screening group requested.</p>	<p>Numbers of completed health screening for eligible people who have a learning disability in every screening group; AND Comparative data of screening rates in the non LD population for every screening group; AND Scrutinised exception reporting and evidence of reasonably adjusted services</p>	<p>WBV Action 26. WBV Action 27. ASCOF 1A PHOF 3 PHOF 4 NHSOF 1a & b NHSOF 1.4 NHSOF 1.7 NHSOF 4a & 4.4 HEF Genetic & Biological Indicators - 2A Health Checks</p>
	10					

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A2	A6	Primary care communication of LD status to other healthcare providers	There is no LOCAL AREA TEAM/CLINICAL COMMISSIONING GROUP wide system for ensuring LD status and suggested reasonable adjustments are included in the referrals	There is evidence of a LOCAL AREA TEAM/CLINICAL COMMISSIONING GROUP wide system for ensuring LD status and suggested reasonable adjustments if required, are included in referrals. There is evidence that both an individual's capacity and consent are inherent to the system employed	Secondary care and other healthcare providers can evidence that they have a system for identifying LD status on referrals based upon the ld identification in primary care and acting on any reasonable adjustments suggested. There is evidence that both an individual's capacity and consent are inherent to the system employed	ASCOF 1A NHSOF 3a & b NHSOF 3.6
	11					

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A10	A7	<p>Learning disability liaison function or equivalent process in acute setting:</p> <p>e.g. lead for Learning disabilities</p> <p>Known learning disability refers to data collated within Trusts regarding admission – HES data.</p>	<p>No designated learning disability liaison function or equivalent process in place in one or more acute provider trusts per site</p>	<p>Designated learning disability liaison function or equivalent process in place and details of the provider sites covered has been submitted.</p> <p>Providers are not yet using known activity data to effectively employ LD liaison function against demand.</p>	<p>Designated learning disability function in place or equivalent process, aligned with known learning disability activity data in the provider sites and there is broader assurance through executive board leadership and formal reporting / monitoring routes</p>	<p>ASCOF 1A</p> <p>NHSOF 3a & b</p> <p>NHSOF 3.6</p> <p>NHSOF 4b</p> <p>NHSOF 4.1-4.3, 4.5, 4.7, 4.8</p> <p>NHSOF 5</p> <p>HEF Genetic & Biological Indicators - 2D. Crisis / emergency planning and hospital passports</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
A8	A8	<p>NHS commissioned primary and community care:</p> <ul style="list-style-type: none"> • Dentistry • Optometry • Community Pharmacy • Podiatry • Community nursing and midwifery <p>This measure is about universal services NOT those services specifically commissioned for people with a learning disability.</p>	<p>People with learning disability accessing/using these services are not flagged or identified.</p> <p>There are no examples of reasonable adjusted care</p>	<p>Some of these services are able to provide evidence of reasonable adjustments and plans for service improvements.</p>	<p>All people with learning disability accessing/using service are known and patient experience is captured</p> <p>All of these services are able to provide evidence of reasonable adjustments and plans for service improvement</p>	<p>WBV Action 26. WBV Action 27. WBV Action 35. ASCOF 1A PHOF 3 PHOF 4 NHSOF 2.3i & ii NHSOF 4a & 4.4</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5A Organisational Barriers</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
B4	A9	Offender Health & the Criminal Justice System	<p>There is no systematic collection of data about the numbers of people with LD in the criminal justice system.</p> <p>There is no systematic learning disability awareness training for staff within the criminal justice system.</p> <p>The local offender health team does not yet have informed representation of the views and needs of people with learning disability</p>	<p>An assessment process has been agreed to identify people with LD in all offender health services e.g. learning disability screening questionnaire.</p> <p>Offender health teams receive LD awareness training to know how best to support individuals to meet their health needs</p> <p>AND</p> <p>There is easy read accessible information provided by the criminal justice system.</p>	<p>Local Commissioners have good data about the numbers /prevalence of people with a learning disability in the CJS. Local commissioners have are working with regional, specialist prison health commissioners</p> <p>Good information on health needs of people with LD in local prisons /wider criminal justice system and a clear plan on how needs can be met.</p> <p>Prisoners and young offenders with LD have had an annual health check, or are scheduled to have one within 6 months (either as part of custodial sentence or following release , as part of GP health check cycle). They are offered a Health Action Plan.</p>	HEF Deficiencies in Service Quality and Access Indicators 5C Transitions between services
	14					

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C9 B3	B1	<p>Regular Care Review - Commissioners know of all funded individual health and social care packages for people with learning disability across all life stages and have mechanisms in place for on-going placement monitoring and individual reviews.</p> <p>Evidence should describe the type (face to face or telephone etc.)</p>	Less than 90% of all care packages including personal budgets reviewed at least annually	Evidence of at least 90% of all care packages including personal budgets reviewed at least annually	Evidence of 100% of all care packages including personal budgets reviewed at least annually	<p>WBV Action 34. WBV Action 58.</p> <p>WBV Action 42</p> <p>ASCOF 4A & 4B.</p> <p>HEF Genetic & Biological Indicators - 2C Care Planning / Health Action Planning</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5C Transitions between services</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C12	B2	Contract compliance assurance – For services primarily commissioned for people with a learning disability and their family carers	<p>Less than 90% of health and social care commissioned services for people with learning disability have;</p> <ul style="list-style-type: none"> - had full scheduled annual contract and service reviews. - Demonstrate a diverse range of indicators and outcomes supporting quality assurance 	<p>Evidence of at least 90% of health and social care commissioned services for people with learning disability have;</p> <ul style="list-style-type: none"> - had full scheduled annual contract and service reviews. - Demonstrate a diverse range of indicators and outcomes supporting quality assurance <p>Evidence that the number regularly reviewed is reported at executive board level in both health & social care.</p>	<p>Evidence of 100% of health and social care commissioned services for people with learning disability have;</p> <ul style="list-style-type: none"> - had full scheduled annual contract and service reviews. - Demonstrate a diverse range of indicators and outcomes supporting quality assurance <p>Evidence that the number regularly reviewed is reported at executive board level in both health & social care</p>	WBV Action 35.

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C2 A9	B3	<p>Assurance of Monitor Compliance Framework for Foundation Trusts</p> <p>Supporting organisations aspiring towards Foundation Trust Status</p> <p>Governance Indicators (learning disability) per trust within the locality</p>	<p>Commissioners do not assure themselves of the ongoing compliance, via monitor returns and EDS, for each foundation trust</p> <p>OR</p> <p>For non-foundation trusts, commissioners are not aware of the trusts position in working towards monitor & EDS standards and foundation trust status</p>	<p>Commissioners review monitor & EDS returns of foundation trust providers</p> <p>Evidence that commissioners are aware of and working with non-foundation trusts in their progress towards monitor level & EDS compliance.</p>	<p>Commissioners review monitor returns and & EDS review actual evidence used by Foundation Trusts in agreeing ratings</p> <p>Evidence that commissioners are aware of and working with non-foundation trusts in their progress towards monitor level & EDS compliance.</p>	<p>ASCOF 4A & 4B</p> <p>HEF Genetic & Biological Indicators - 2D. Crisis / emergency planning and hospital passports</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C3 C5 C11 C12	B4	<p>Assurance of safeguarding for people with learning disability in all provided services and support</p> <p>This measure must be read in the context of an expectation that ALL sectors, Private, Public and Voluntary / Community are delivering equal safety and assurance.</p>	<p>No Board Assurance and Learning points not identified</p> <p>Action plan(s) either not in place, or not yet discussed with partners</p>	<p>Regular Board Reporting and key points and lessons learned are included in action plans</p> <p>Evidence that Learning Disability Partnership Board(s) and/or health sub group(s) involved in reviewing progress</p> <p>The provider can demonstrate delivery of Safeguarding adults within the current Statutory Accountability and Assurance Framework includes people with learning disabilities. This assurance is gained using DH Safeguarding Adults Assurance (SAAF) framework or equivalent.</p> <p>Every learning disability provider service have assured their board that quality, safety and safeguarding for people with learning disabilities is a</p>	<p>Evidence of robust, transparent and sustainable governance arrangements in place in all statutory organisations including Local Safeguarding Adults Board(s), Health & Well-Being Boards and Clinical Commissioning Executive Boards</p> <p>The provider can demonstrate delivery of Safeguarding adults within the current Statutory Accountability and Assurance Framework includes people with learning disabilities. This assurance is gained using DH Safeguarding Adults Assurance (SAAF) framework or equivalent.</p> <p>Every learning disability provider service have assured their board and others that quality, safety and safeguarding for people</p>	<p>WBV Action 34 WBV Action 57. WBV Action 58 ASCOF 1A ASCOF 4A & 4B NHSOF 5 HEF Social Indicators - 1F Safeguarding</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
	B4 Cont			clinical and strategic priority within all services.	with learning disabilities is a clinical and strategic priority within all services. Key lessons from national reviews are included. There is evidence of active provider forum work addressing the learning disability agenda	

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C13	B5	Training and Recruitment – Involvement	No evidence of commissioning and provider practice that demonstrates involvement of people with learning disability and families in the recruitment and training of staff	<p>LD specific services: evidence of 90% of services involving people with learning disability and families in recruitment/ training and monitoring of staff.</p> <p>Some evidence of universal services embedding LD awareness training and making reasonable adjustments for people with a learning disability and family carers to access and use the services.</p>	<p>LD specific services: evidence of 100% of services involving people with learning disability and families in recruitment/ training and monitoring of staff including advocates.</p> <p>Strong evidence of commissioners specifically raising the need for LD awareness training and reasonable adjustment within universal services in line with consultation by people with a learning disability and family carers. Strong evidence of universal services embedding LD awareness training and making reasonable adjustments for people with a learning disability and family carers to access and use the services AND of universal service providers sharing good practice and experience.</p>	ASCOF 3A – D

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
	B6	<p>Commissioners can demonstrate that providers are required to demonstrate that recruitment and management of staff is based on compassion, dignity and respect and comes from a value based culture.</p> <p>This is a challenging measure but it is felt to be vital that all areas consider this.</p>	<p>No evidence of commissioning practice that drives providers to demonstrate compassionate care and value base recruitment & management of the workforce</p>	<p>LD Specific Provision: Some evidence of commissioning practice that drives providers to demonstrate compassionate care and value base recruitment & management of the workforce</p> <p>No clear evidence of this approach in relevant universal services</p>	<p>Clear evidence of commissioning practice that drives providers to demonstrate compassionate care and value base recruitment & management of the workforce</p> <p>Evidence of this approach in relevant universal services</p>	<p>WBV Action 36</p> <p>ASCOF 3A - D</p> <p>HEF Social Indicators - 1F Safeguarding</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
New	B7	Local Authority Strategies in relation to the provision of support, care and housing are the subject of Equality Impact Assessments and are clear about how they will address the needs and support requirements of people with learning disabilities.	Not all strategies are up to date and there are not Equality Impact Assessments in place for every strategy.	Up to date Commissioning Strategies and Equality Impact Assessments are in place.	Evidence of Commissioning Strategies and associated Equality Impact Assessments being presented to people who use services and their families and clear plans in place for the development of Care, Support and Housing for people with learning disabilities based on evidence of current and future demand.	WBV Action 36 ASCOF 3A - D

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C14	B8	Commissioners can demonstrate that all providers change practice as a result of feedback from complaints, whistleblowing experience	No evidence of commissioning practice that demonstrates changed practice as a result of complaints and whistleblowing	Evidence that 50 % of commissioned practice and contracts require evidence of improved practice, based on the use of patient experience data, and the review and analysis of complaints. There is evidence of effective use of a Whistle-blowing policy where appropriate.	Evidence that 90 % of commissioned practice and contracts require evidence of improved practice, based on the use of patient experience data, and the review and analysis of complaints. There is evidence of effective use of a Whistle-blowing policy where appropriate.	WBV Action 35 WBV Action 36 ASCOF 4A & 4B HEF Social Indicators - 1F Safeguarding HEF Deficiencies in Service Quality and Access Indicators 5F Non Health Services

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C4 C8	B9	Mental Capacity Act & Deprivation of Liberty	There is no evidence that organisations routinely check implementation of MCA guidance relating to decision making, capacity, and restrictions	There is limited evidence that the implementation of MCA guidance relating to decision making, capacity, and restrictions is checked within contract monitoring and commissioning.	All appropriate providers have well understood policies in place and routinely monitor implementation of these in relation to, the Mental Capacity Act (including restraint, consent and deprivation of liberty). The provider can evidence action taken to improve and embed practice where necessary.	HEF Deficiencies in Service Quality and Access Indicators 5B Consent

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C15	C1	Effective Joint Working	<p>There is no evidence of integrated governance structures such as Section 75 or 37 agreements. There are no joint commissioning functions in place.</p>	<p>Commissioners can provide evidence of integrated governance structures. Monitoring is undertaken jointly and key partners are involved at Partnership Board level.</p> <p>Joint commissioning functions are in place.</p>	<p>There are well functioning formal partnership agreements and arrangements between health and social care organisations.</p> <p>There is clear evidence of pooled budgets or pooled budget arrangements, joint commissioning structures, intentions, monitoring and reporting arrangements.</p>	This is a key requirement of WBV

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
New	C2	Local amenities and transport	No examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully and build / maintain social networks e.g. support to use local transport services, Changing Places in shopping centres, Safe Places.	Local examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully and build / maintain social networks e.g. support to use local transport services, Changing Places in shopping centres, Safe Places.	Extensive and equitably geographically distributed examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully and build / maintain social networks e.g. support to use local transport services, Changing Places in shopping centres, Safe Places and evidence that such schemes are communicated effectively.	<p>ASCOF 1A</p> <p>HEF Social Indicators - 1D Social Contact</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5F Non Health Services</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
New	C3	Arts and culture	No examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully e.g. cinema, music venues, theatre, festivals.	Few examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully e.g. cinema, music venues, theatre, festivals.	Numerous examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully e.g. cinema, music venues, theatre, festivals and that the accessibility of such events and venues are communicated effectively.	<p>ASCOF 1A</p> <p>PHOF Objective 1</p> <p>HEF Social Indicators - 1B Employment, meaningful activities and engagement</p> <p>HEF Social Indicators - 1D Social Contact</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5F Non Health Services</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
New	C4	Sport & leisure	No examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully e.g. local parks, leisure centres, swimming pools, walking groups etc.	Local examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully e.g. local parks, leisure centres, swimming pools, walking groups etc.	Extensive and equitably geographically distributed examples of people with learning disability having access to reasonably adjusted facilities and services that enable them to participate fully e.g. local parks, leisure centres, swimming pools, walking groups, designated participation facilitators with learning disability expertise etc. and evidence that such facilities and services are communicated effectively.	<p>ASCOF 1A</p> <p>PHOF Objective 1</p> <p>HEF Social Indicators - 1B Employment, meaningful activities and engagement</p> <p>HEF Social Indicators - 1D Social Contact</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5F Non Health Services</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
New	C5	Supporting people with learning disability into and in employment	No data and commissioning intentions in place	<p>Relevant data available and collected. The targets nationally and locally determined (See ASCOF) have been met for people with learning disability supported into employment in the past 12 months</p> <p>AND</p> <p>Employment activity of people with learning disability is linked to data</p>	<p>Relevant data available and collected. The targets nationally and locally determined (See ASCOF) have been met for people with learning disability supported into employment in the past 12 months</p> <p>Employment activity of people with learning disability is linked to commissioning intent for future services</p> <p>Commissioning is clearly linked to proportionate local need.</p>	<p>ASCOF 1E – 1H</p> <p>PHOF Objective 1</p> <p>NHSOF 2.2</p> <p>NHSOF 2.5</p> <p>HEF Social Indicators – 1B. Employment, meaningful activities and engagement</p> <p>HEF Social Indicators - 1D Social Contact</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
B3 C10	C6	<p>Effective Transitions for young people</p> <p>A Single Education, Health and Care Plan for people with learning disability</p>	<p>No evidence of a Single Education, Health and Care Plan for people with learning disability</p> <p>Little or no evidence of transition planning or structures to support effective transitions in health & social care</p>	<p>Evidence of at least 50% of people with learning disability has a current and up to date Single Education, Health and Care Plan by 2014.</p> <p>There is evidence of effective plans, strategy, service pathways and multi-agency involvement across Health and Social Care</p>	<p>Evidence of 85% of people with learning disability has a current and up to date Single Education, Health and Care Plan by 2014.</p> <p>There is evidence of well-established and monitored strategy, service pathways and multi-agency involvement across Health and Social Care. There is evidence of very clear transition services or functions that have joint health & social care scrutiny and ownership.</p>	<p>ASCOF 1A</p> <p>PHOF Objective 1</p> <p>HEF Deficiencies in Service Quality and Access Indicators 5C Transitions between services</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
	C7	Community inclusion and Citizenship	<p>No reference to indicators of social exclusion, hate & mate crime, natural support or isolation of people with learning disability in Joint Strategic Needs Assessments or Public Health data.</p> <p>No clear commissioning intentions or action plans that address the social inclusion and citizenship needs of people with a learning disability</p>	<p>Some evidence of data and findings of social exclusion, hate & mate crime, natural support or isolation of people with learning disability in Joint Strategic Needs Assessment.</p> <p>Clear commissioning intentions or action plans that address the social inclusion and citizenship needs of people with a learning disability, including the support of friendship development and maintenance</p>	<p>Clear commissioning intentions or action plans that address the social inclusion and citizenship needs of people with a learning disability, linked to data and Joint Strategic Needs Assessments.</p> <p>Commissioning intentions and processes are aligned across both health & social care, supported by joint commissioning arrangements.</p> <p>Clear evidence of strong consultation with local communities in developing what it means to be a citizen</p>	<p>WBV Action 57. WBV Action 42.</p> <p>ASCOF 1A ASCOF 3D</p> <p>PHOF Objective 1</p> <p>HEF Social Indicators – 1A Accommodation</p> <p>HEF Social Indicators - 1B Employment, meaningful activities and engagement</p> <p>HEF Social Indicators - 1D Social Contact</p> <p>HEF Social Indicators - 1F Safeguarding</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
C10	C8	<p>People with learning disability and family carer involvement in service planning and decision making including personal budgets</p> <p>This measure seeks to stimulate areas to examine what co-production means and demonstrate clear and committed work to embedding this in practice.</p>	<p>There is no evidence that people with learning disability and families have been involved in co-production of service planning and decision making.</p>	<p>Clear evidence of co-production in all learning disability services that the commissioner uses to inform commissioning practice.</p> <p>Inconsistent or no evidence of co-production in universal services</p>	<p>Clear evidence of co-production in universal services that the commissioners use this to inform commissioning practice</p>	<p>ASCOF 1A</p> <p>ASCOF 1D</p> <p>ASCOF 1I</p> <p>ASCOF 3A – D</p> <p>ASCOF 4A & 4B</p> <p>NHSOF 2.4</p> <p>HEF Social Indicators - 1C Financial Support</p>

2011-12 SAF	2013 REF	MEASURE	RED	AMBER	GREEN	The reporting requirements and outcome frameworks that the measure helps you address or where you will find evidence;
New	C9	Family Carers	<p>Commissioners do not have clear information on the numbers of registered carers in the locality.</p> <p>There is little evidence of formal arrangements to allow carer voice to shape commissioning intentions and provider delivery</p>	<p>Commissioners have clear information on the numbers of registered carers in the locality including the number of carers offered and in receipt of a carers assessment.</p> <p>There is clear evidence of a carers strategy and that this has been consulted upon.</p> <p>There is clear evidence that providers of LD services involve family carers in service development.</p>	<p>Commissioners are using needs assessment information relating to carers to shape services and provide a range of support.</p> <p>There is clear evidence of a carers strategy that has been co-produced with family carers and that this has been consulted upon.</p> <p>There is clear evidence that providers of LD services involve family carers in service development. There is clear evidence that such involvement has led to service improvement.</p>	HEF Social Indicators - 1D Social Contact