

<b>Staying Healthy</b>		
	<b>Comment</b>	<b>Rating</b>
<p>A1 Learning disabilities Quality Outcomes Framework (QOF) register in primary care</p>	<p>In Southend there is a growing awareness about the Learning Disability Community with medical professionals, the council and local service providers having a better understanding of who lives and accesses services in the town and how to meet their personal needs. In addition to meeting the minimum requirements of (QOF – The practice can produce a register of patients with learning disabilities), the Council’s Learning Disability Team has developed an integrated working practice with acute services and the borough’s main mental health lead agency, a benefit of which is to ensure Primary Care data registers are maintained. This approach is further strengthened by the provision of a Learning Disability Nurse role at Southend University Hospital which supports the Learning Disability community to access hospital services.</p> <p>In order to make best use of the QOF to better target practice level of activity there also needs to be an agreement about the use of patient identifiable data on which to perform analysis and agreement about who should do the analysis. This will be between the NHS Area Team, the Clinical Commissioning Group and the Local Authority. An agreement locally to achieve this is being sought in February 2015. The difficulty of accessing data is a common problem throughout the East of England.</p>	<p><b><u>AMBER</u></b></p>

<p>A2: Finding and managing long term health conditions: obesity, diabetes, cardiovascular disease, epilepsy</p>	<p>Public Health Southend reported on the borough’s Long Term Conditions in a published report (December 2014). This highlighted that 31% of people in Southend-on-Sea report having at least one long term condition (LTC) which is in line with the England average. However, it did not offer a comparison for people with Learning Disability.</p> <p>While data comparison is currently unavailable (and which is described in the previous section) there are numerous projects and schemes across the borough which promote Healthy Lifestyles to reduce these health problems.</p> <p>Teams of nurses are doing a lot of things to help people with learning disabilities with long term conditions, get good quality care. For instance, nurses have helped people with diabetes to get to sessions. They have also run information sessions at a number of locations on Long Term Conditions. Nurses have also made links to Specialist Nurses with regard to Long Term Conditions, for instance in epilepsy.</p> <p>So whilst Long Term Conditions are managed, some improvements need to be made in finding conditions and then better targeting improvements in Long Term Condition Pathways. Local Partners are aware of the challenges and will be addressing these. The Clinical Commissioning Group plans to make sure that patient’s Long Term Condition is recorded and that appropriate services follow.</p>	<p><b>AMBER</b></p>
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<p>A3: Annual health checks and annual health check registers</p>	<p>Local investigation within the Learning Disability Team has suggested that uptake of Annual Health Checks is higher than the number reported. Also, a few years ago we had been very high performers on this measure.</p> <p>However we do expect that the figure that will be reported to be significantly below the target.</p> <p>There are approximately 600 people diagnosed with learning disabilities in Southend-on-Sea and in 2013/14, only 27% received health checks compared with a target of 75%. This low level reflects the national and regional situation.</p> <p>As an authority we are working with CCG and health colleagues to raise awareness of both annual health checks and reporting the process. Healthwatch have also played a part in raising awareness of the issues locally as has the Area Team.</p> <p>Specialist SEPT nurses support health and care professionals to engage people with learning disabilities through health checks and more generally.</p> <p>Learning Disability nurses are working with practices to increase the number of reasonable adjustments made in practices and some practices are doing well. Improvements here will help to make the GP practice a better place for people with Learning Disabilities and their carers to come. There is a significant challenge for improving the awareness of practices.</p> <p>Improvements are also being made in developing the list to check against and making sure that the coding of people in relation to Learning Disability is</p>	<p>We will be given a RAG rating based on nationally collected data. Likely RED.</p>
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	<p>accurate. This will help to make statistics more accurate and help to focus activity better.</p> <p>As part of this, improvements will be made in knowing which children and young people have learning disabilities so that they can have a health check from the age of 14. Information and systems need to be improved to achieve this.</p> <p>In addition, the requirement for Annual Health Checks features in several provider contracts.</p>	
<p>A4: Specific health improvement targets (Health Action Plans) are generated at the time of the Annual Health Checks in primary care</p>	<p>Local practices do undertake Health Action Plans and in many cases they will be done at the same time as the Annual Health Checks.</p> <p>Learning Disabilities nurse facilitators seek to make sure that this is done by working with GP practices, Some GP practices are doing very well. The nurses have recently made sure that the expectations around Health Action Plans are consistent and that standard models are worked to. Against this background, the NHS Area Team has said that it will release a standard Health Action Plan, before April 2015, which will further help to ensure consistency in approach.</p> <p>However, success in developing Health Action Plans is not universal and we need to work better between agencies, including the area team to know accurately what each practice is doing on doing Health Action Plans and then making sure that these are done. This will increasingly require joined up action.</p>	<p><b><u>RED</u></b></p>

	<p>There are a range of effective interventions that follow the production of Health Action Plans:</p> <ul style="list-style-type: none"> <li>• Mental health needs are addressed through multidisciplinary approaches by the Learning disability team. There is intensive support from the community team and there is the option of in-patient care when required.</li> <li>• People with behaviours that challenge are offered treatment from the intensive support team, comprising psychological, behavioural and sensory interventions.</li> <li>• Swallowing difficulties (dysphagia) are effectively treated by community Speech and Language therapists. This improves life expectancy.</li> <li>• Severe postural deformities are treated by Occupational Therapists to prevent deterioration which can lead to chest infections, pain, pressure ulcers, poor digestion and ultimately reduced life expectancy.</li> </ul> <p><i>In January 2015 we consulted with 35 people with Learning Disability about their experience of the attending GP surgeries. This was part of service user views in relation to the LD SAF. This was a general question which asked: 'What is it like when you go to the doctors', and asking for good things and bad things. The overall perception of experience was very positive. Of those that answered the question: 19 said their experience was good; 3 said their experience was 'OK' and 3 said that their experience was 'Not Good'.</i></p>	
A5: National Cancer	At present, we do not know enough about the numbers of people with a Learning Disability who are undergoing Cancer Screening, and this needs to be	We will be given a RAG

<p>Screening Programmes (bowel, breast and cervical)</p>	<p>improved.</p> <p>We think it unlikely that the numbers of people with a Learning Disability and obtaining screening for Cancer will reflect the numbers being screened in the rest of the population. This is likely to be a national issue, but more analysis needs to be done locally, to make sure that where possible, parity is achieved. This means introducing appropriate Reasonable Adjustments in services and the communication about services and removing barriers.</p> <p>There are links made by Learning Disabilities Nurses both in the local hospital and in the local Community Learning Disability Team to Cancer Services, for instance, linking to the Breast Unit to help to make sure that there are reasonable adjustments. In addition nurses have also run sessions to improve the awareness of people with Learning Disabilities about cancer conditions and the importance of attendance.</p> <p>Again, a main stumbling block to better targeting improvements is the ability to exchange and use patient identifiable data. This will be addressed.</p>	<p>rating based on nationally collected data. Likely RED.</p>
<p>A6: Primary care communication of learning disability status to other healthcare providers</p>	<p>There is a Clinical Commissioning Group wide system in place that enables Learning Disability status to be flagged between providers and primary care.</p> <p>Many GPs, in the referrals they make, do identify whether someone has a Learning Disability. This is a good position but we do want to achieve more universal usage of the system.</p> <p>Part of the difficulty in making this practice more consistent is around the</p>	<p><b><u>GREEN</u></b></p>

	<p>sharing of patient identifiable data and getting an agreement about this. There will be questions about how ethical it is to pass on data when making a referral in relation to consent and capacity which needs to be considered and addressed. This is an issue which is noted by Southend-on-Sea Clinical Commissioning Group.</p> <p>The Clinical Commissioning Group will also encourage the adoption of a flagging system across a wider set of providers so that information is consistent.</p> <p>In the background to this there are a number of positive points to be made about communication locally:</p> <ul style="list-style-type: none"><li>• There are teams across both health and social care whose responsibility it is to ensure people with learning disability benefit from reasonable adjustments and a high quality of care. A key example of this success is the Learning Disability nurse at Southend University Hospital who has embedded a Care Passport into practice so that there is an appropriate level of care going through the hospital system.</li><li>• Southend Council has continued to offer a Learning Disability service where other authorities have achieved savings. This ensures that there is a dedicated team championing the rights of the community and promoting best practice accordingly.</li><li>• Communication is generally improved by the role of SHIELDS, who are people with Learning Disabilities who are self advocates. SHIELDS have</li></ul>	
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	<p>helped to make known to public audiences, including with GPs, what people with Learning Disabilities experience in Annual Health Checks.</p>	
<p>A7: Learning disability liaison function or equivalent process in acute setting</p>	<p>Southend University Hospital NHS Foundation Trust employs a full time Learning Disability Nurse Specialist. The nurse makes sure that when people with Learning Disabilities visit the hospital, they get appropriate care.</p> <p>The nurse and appropriate service leads receive regular data in regards to people with Learning Disabilities activity within the hospital. This enables the planning of services and care to be implemented on a daily basis. The Specialist Learning Disability Nurse reports to the Associate Director with responsibility for the hospital Safeguarding team and also Associate Director for performance that is also the chair of the hospital's learning disability committee. This is monitored through regional self-assessment and the trusts on going learning disability action plan. The chair through the hospital's clinical assurance committee feeds up progress from the LD committee / action plan to the Executive board. The also Learning Disability Nurse completes a quarterly policy compliance audit, which is fed back to the learning disability committee and feeds into the overall action plan.</p> <p>Future plans and service developments are regularly discussed and planned at the learning disability committee. The Learning Disability Nurse also regularly attends the Learning Disabilities Partnership Board.</p> <p>A video has been made by people with a Learning Disability about their experience at Southend Hospital which showed how effective services are.</p>	<p><u>GREEN</u></p>

	<p><i>In January 2015 we consulted with 35 people with Learning Disability about their experience of the attending the local hospital. This was part of service user views in relation to the LD SAF. This was a general question which asked: ‘What is it like when you go to the hospital’, and asking for good things and bad things. The overall perception of experience was very positive. Of those that answered the question: 16 said their experience was good; 4 said their experience was ‘OK’ and 4 said that their experience was ‘Not Good’. Where the experience was good, a number talked about being helped by the LD Nurse at the hospital.</i></p>	
<p>A8:NHS commissioned primary care: dentistry, optometry, community pharmacy, podiatry</p>	<p>Some services make reasonable adjustments for people with Learning Disabilities. These are commissioned by the NHS England area team.</p> <p>Learning Disability Nurses tell us that there are a number of good examples of reasonable adjustments being made in pharmacies; dentists; and opticians. Learning Disability Nurses will help people attend universal services by arranging for reasonable adjustments to be made. This is fundamentally about removing barriers to access. Some practices are very good and take this much further. For instance, when appointments are missed by people with Learning Disabilities then the Community Team for People with Learning Disabilities is notified by some practices.</p> <p>As a locality the CCG and Local Authority want to learn more about the commissioning of universal services from the Area Team and we are in a good position to do this. We could then assure ourselves of the consistency of approach.</p>	<p><u>AMBER</u></p>

	<p>There is a Community Dental service working across Essex and local provision available at the Avro Viking Day Centre. Plans for the service in the future are being discussed with NHS England at the moment. We shall look at training for staff so they can learn how to make reasonable adjustments.</p> <p><i>In January 2015 we consulted with 35 people with Learning Disability about their experience of the attending the dentists and the opticians. This was part of service user views in relation to the LD SAF. This was a general question which asked: 'What is it like when you go to the dentists', and asking for good things and bad things. We asked the same question about visiting the opticians. The overall perception of experience was very positive. Of those that answered the question:</i></p> <p><i>For Dentists: 24 said their experience was good; 3 said their experience was 'OK' and 1 said that their experience was 'Not Good'.</i></p> <p><i>For Opticians: 23 said their experience was good; 5 said their experience was 'OK'.</i></p>	
<p>A9: Offender health and the Criminal Justice System</p>	<p>There is some good local activity to improve the health of people within the criminal justice system.</p> <p>We are one of ten local pilot areas across the country that is testing a model in relation to the Bradley Report, which looked at improving the care of people within the Criminal Justice System.</p> <p>There are a number of parts to this:</p>	<p><u>GREEN</u></p>

	<ul style="list-style-type: none"><li>• Nurses are working with people with Learning Disabilities in Southend-on-Sea police station.</li><li>• Nurses are also helping people with learning disabilities who have committed a crime in Southend-on-Sea Court. This is very good as these nurses are trained to work with people with Learning Disabilities.</li></ul> <p>We are also working with people across the wider area who commission services for people with Learning Disabilities in prison. This is the NHS Anglia Area Team. We want to find out and whether Southend-on-Sea people in prisons are having an Annual Health Check. We are in an increasingly good position to do this give our pilot status in relation to the Bradley Report.</p> <p>In addition, offenders, who do not fall within the scope of the criminal justice team, will receive support from SEPT psychiatry, psychology or nurses and therapists.</p>	
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<b>Being Safe</b>		
<p>B1: Individual health and social care package reviews</p>	<p>We estimate that 95% of health and social care reviews are done every year. We are happy with the quality of reviews as they are conducted face to face.</p> <p>The CCG monitors the care and reviews of the Continuing Healthcare patients. They make sure patients do receive a review every year.</p>	<p><u>AMBER</u></p>
<p>B2: Learning disability services contract compliance</p>	<p>Our contracts and review process ensures that services make a positive difference to people lives. There is evidence of strong reporting in contracts as well as effective communication on individual reviews that further enable us to achieve contract compliance.</p> <p>Firstly, the council and CCG contracts team have monitor meetings with commissioned services. These include unannounced visits. We also consider the feedback of social worker’s contact with clients – both in terms of social worker observations and client feedback which is considered alongside the Care Plan.</p> <p>In the NHS:</p> <ul style="list-style-type: none"> <li>• Southend University Hospital Trust has a Learning disabilities Committee and the specialist Nurse attends the Local Disability Partnership Board. The CCG attends the meetings</li> </ul>	<p><u>GREEN</u></p>

	<ul style="list-style-type: none"> <li>• The Commissioners at the CCG have contracts with providers. They monitor this every month to make sure that patients are looked after safely and that the quality of each patient’s care is good.</li> <li>• The CCG asks at meetings if reasonable adjustments are made for people with Learning disabilities.</li> <li>• The CCG reviews the CQC reports of health providers, Care Homes and agencies.</li> </ul> <p>Southend’s Vulnerable Adults Board is developing its monitoring process to strengthen the links with commissioning. The integrated Health and Social Care contracts register will further improve contract management process.</p>	
<p>B3: Monitor assurances</p>	<p>Southend University Foundation Trust report quarterly to Monitor. Monitor is an organization that looks at some health providers and checks they are providing a high standard of care.</p> <p>Monitor report on how the hospital identifies people with LD with flags on their records and pathways they use. They also report on how people with LD and their families are represented at the LD committee meeting.</p> <p>The Clinical Commissioning Group sees the reports that Monitor write.</p>	<p><u>AMBER</u></p>

<p>B4: Adult safeguarding Children's Safeguarding.</p>	<p>We assure in relation to Safeguarding in a number of ways:</p> <ul style="list-style-type: none"><li>• The Adult and Children's Safeguarding Board scrutinises the performance of services. This includes elements of LD provision – such as domestic abuse, neglect and hospital admissions.</li><li>• The Safeguarding Board has also developed a template safeguarding policy for providers to sign up to.</li><li>• The adult and childrens safeguarding boards check that everybody is doing what they should. This is across health and social care.</li><li>• The Adults and Children's Safeguarding Board does have representation from people who use services but these are not people with Learning Disabilities.</li><li>• There are things that we ask providers to do in contracts that are about safeguarding that the contracts team monitors.</li><li>• SEPT Community LD staff who visit homes will report any concerns to the social care team, Therapists highlight concerns about repeated chest infections, neglect, pressure care or dangerous manual handling.</li><li>• In Social Care we know that every provider has assured their board or leadership that quality, safety and safeguarding is a priority within all services. This is covered by the Care Quality Commission in its fundamental standards.</li></ul>	<p><u>GREEN</u></p>
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	<ul style="list-style-type: none"><li>• The specialist nurse shares any concerns with the health facilitation or crisis nurses. These concerns are shared with therapists, psychiatrists and psychologists.</li><li>• The Hospital Board receives reports about people with learning disabilities. This includes details of how many people have attended the hospital .If there has been a problem the hospital reports this, and the CCG are told what has happened. The CCG see the reports and talks to the hospital to ensure everyone is safe and well looked after.</li><li>• The Southend-on-Sea Vulnerable Adults Board (SVAB) and Children’s Safeguarding Board Quality Monitoring sub group has produced action plans in relation to Serious Case Reviews and Local Learning from experience exercises. This is where bad things have happened which we do not want to happen again. Recently there was an Older Persons Case from Surrey. Before that we learned a lot from Winterbourne View and implemented changes across health and social care to make sure that we provide services closer to people’s home and can move people out of secure hospitals when this is not the best place for them. These actions have meant changes to how providers work. Safeguarding has been important to this. The Adults, Quality, Monitoring and Audit group also does this.</li><li>• We also use the DH Safeguarding Adults Assurance Framework and report outcomes to it on a quarterly basis. For instance, at the annual report of 2013/14 we reported that roughly 1 in 3 {complaints} cases were</li></ul>	
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	substantiated.	
B5: Self-advocates and carers in training and recruitment	<p>Southend’s Learning Disability Partnership Board is an inclusive partnership which is co-chaired by the Local Authority and someone with a Learning Disability. Membership of the group includes a range of partners and self advocates and carers have been involved in developing training programmes as well as strengthening recruitment processes.</p> <p>A strong example of self advocates and carers being involved in shaping training and recruitment is through Shared Lives Services where they participated fully.</p> <p>The Shields Parliament is an independent charity in Southend which is managed by clients from the Learning Disability community, whose remit is to give people with learning disability in Southend a voice that is used to help shape future services.</p> <p>We know of a number of providers that engage people with Learning Disabilities in training and recruitment. From this effective base we want to make sure all providers are engaging people with Learning Disabilities in training. We will seek to do this by publishing good practice.</p>	<u>GREEN</u>
B6: Compassion, dignity and respect. To be answered by	<p>In most instances people in Southend are treated with compassion, dignity and respect. This is certainly the view of the Shields Parliament, users of Project 49 – including the Employability Self-Advocate group and the feedback of clients contacted through contact.</p>	<u>GREEN</u>

<p>self advocates and family - carers</p>	<p>While more needs to be done to improve the reporting mechanism, the feedback to date has been overwhelmingly positive.</p> <p><u>In social care</u></p> <p>Compassion, dignity and respect are apparent within services and it underpins training and culture of organisations. Compassion is apparent in the way that people are listened to within services such as at the Hub, and people with Learning Disabilities tell us this is the case. Shared Lives carers deliver compassion across the system by working with other providers to make sure that people choosing to move to supported living are understood and respected. This includes people whose behaviour is deemed to challenge.</p> <p><u>In universal services</u></p> <p>The libraries service is working with people with Learning Disabilities to improve services. Sports activities have been co-produced with people with Learning Disabilities.</p> <p><u>In the local NHS</u></p> <p>The Hospital has started to use an easy read Friends and Family Test and a member of staff will help the patient to complete the form, at home if they wish. The Friends and Family Test asks people whether they would recommend the hospital to their friends and family.</p> <p>If a patient complains the specialist nurse helps the patient and family.</p>	
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	<p>The hospital has an easy read leaflet for PALS and their easy read complaint leaflet is currently in draft.</p> <p><i>In January 2015 we consulted with 35 people with Learning Disability about whether people are really caring in services. From the results it was clear that many people with Learning Disability felt that they were treated with compassion. (We asked, whether, in the services that you use, people are caring). The overall perception of experience was very positive. Of those that answered the question: 16 said their experience was good; 4 said their experience was 'OK'.</i></p>	
<p>B7: Commissioning strategy impact assessments</p>	<p>We have comprehensive commissioning plans and ways of checking how services are doing. We do this in partnership with people with learning disabilities and their families.</p> <p>Many of our plans are co-produced with local people which helps us to know that we are buying the right services. For instance the Carers Plan involved people who are carers in writing it. Carers were also involved in thinking about the impact on people for things like equalities which we will check.</p> <p>We are drafting a Learning Disability Plan now and will be making sure that it is co-produced and that we check it is doing the right thing. We are doing this with people with Learning Disabilities and we want to do more with families. We are developing a communications plan for this.</p> <p>The development of this strategy will be subject to a commissioning cycle and analysis of impacts where we will ask people what difference are actions make.</p>	<p><u>GREEN</u></p>

	<p>This will enable us to continually improve what we commission.</p> <p>We see this document as a part of that process because it helps to tell us what needs to be done.</p>	
<p>B8: Complaints lead to changes</p>	<p>We are confident that all services give a considered approach to feedback and make service improvements accordingly.</p> <p><u>Across health and social care</u></p> <p>In Southend there are a number of routes to provide feedback. The borough's commissioned Healthwatch service brings together BATIAS (local advocacy provider) and Citizens Advice Bureau to support all residents to make complaints about health provision.</p> <p>In addition, the Shields Parliament is an effective voice for people with Learning Disabilities in Southend, which is collocated with Project 49 a day centre.</p> <p>For Southend it is important to consider and learn from all feedback – positive and negative. The dedicated Learning Disability team continues to support clients to improve their services. We are planning to survey all providers to understand how they respond to feedback and will be encouraging best practice.</p> <p>We are also confident that through the contracting process and assurance process that all providers are compliant in responding to complaints and feedback, and that all can become effective learning organisations. We aim to</p>	<p><u>GREEN</u></p>

	<p>help our organisation to do this by introducing the Market Relations Protocol based on Think Local Act Personal research.</p> <p><u>In the NHS:</u></p> <p>The CCG will advise a patient and their family if they wish to complain.</p> <p>The CCG will consider National information about how many people with learning disabilities complain to the Ombudsman and why. This will help us to learn and improve care for the people of Southend</p> <p>SUHFT have an easy read PALS leaflet and a draft complaints leaflet.</p> <p>SEPT has a complaints procedure and will provide an easy read information leaflet on how to complain to patients or carers. SEPT staff will assist service users to make a complaint.</p> <p>If a patient complains the specialist nurse at the hospital helps the patient and family</p> <p>The CCG can meet with the health providers to talk about patients who are not happy with their care.</p> <p><i>In January 2015, we asked people with Learning Disabilities what services were like and whether anything was done, when they made a complaint to services. Of the 22 that answered this question: 18 said that services were 'good' and 4 said that services were OK.</i></p>	
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<p>B9 Mental Capacity Act (MCA) and Deprivation of Liberty Standards (DOLS)</p>	<p>Southend-on-Sea Borough Council monitors all providers annually for compliance on MCA and DOLS. It does this through annual visits and comprehensive discussion with, including with staff, and reporting to providers. We look at policies and practices of each provider in relation to training for MCA and DOLS.</p> <p>Our approach relates to the 16 CQC Standards and its categories, including Consent. Records are kept on our visits and reports are sent to providers. Our reporting is from the Regional ADASS form.</p> <p>Each year we seek to review and monitor all providers on this basis.</p> <p>To further assist the achievement of policies in relation to MCA and DOLS, Southend-on-Sea Borough Council also provides free training to commissioned care services.</p> <p>In addition the SVAB has asked all partners of the SVAB to self-assess their agency on a wide range of outcomes and MCA and DOLS is a key feature. Southend SVAB is a co-author in the SET (Southend, Essex and Thurrock) MCA and DOLS policy and procedure, which all providers must follow. The date for submission is 31 Jan 2015 and this will become an annual feature.</p>	<p><u>GREEN</u></p>
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<b>Living Well</b>		
<p>C1: Effective joint working</p>	<p>Southend on Sea Borough Council and Southend Clinical Commissioning Group have signed up to be a Pioneer area. This means that they are agreeing to do more together including buying services together. This is called joint commissioning. Both organisations are committed to deliver their integrated commissioning work and have recently recruited a Head of Integrated Commissioning to drive this forward.</p> <p>In addition there are joint panel meetings which include safeguarding boards, transition boards and resource allocation panels which evidence this further.</p> <p>Health and social care staff are working well together. There is a health <u>and</u> social care team at the Civic Centre that work with people with Learning Disabilities and their carers together. This is the Community Team for People with Learning Disabilities.</p> <p>We are also working together for children and young people with Learning Disabilities. This is described later in this document.</p>	<p><u>GREEN</u></p>
<p>C2: Local amenities and transport</p>	<p>There are some examples of ordinary places and transport services doing things so that people with Learning Disabilities and their carers can use them and get to them.</p> <p>There are:</p> <ul style="list-style-type: none"> <li>• Help cards for people with disabilities including people with Learning Disabilities for travelling on local First buses. This has helped to improve</li> </ul>	<p><u>AMBER</u></p>

	<p>access to buses.</p> <ul style="list-style-type: none"> <li>• Travel training places for people with Learning Disabilities. These help people to improve their confidence. This is done by Education services at the council and by Turning Tides. (Turning Tides are an organisation that helps people get the services that they need.)</li> <li>• There are changing places toilets at 3 locations in Southend-on-Sea. These help people to travel where they want to.</li> <li>• Easy Read documents help people to use services. For instance there are different Easy Read guides for people to use Southend-on-Sea libraries.</li> </ul> <p><i>In January 2015 we asked people with a Learning Disability what Transport was like in Southend-on-Sea. Of those who answered the question, out of 35: 20 said that transport was good; 2 said that it was OK; and 2 said that it was 'not good'. Shields reported to us that there have been cases of harassment on public transport which is why we decided at the Learning Disability Partnership Board to give ourselves an AMBER rating.</i></p>	
<p>C3: Arts and culture</p>	<p>There are things to do for people with a Learning Disability which are <u>for</u> people with a Learning Disability and there are events that are welcoming to people with a Learning Disability which are not just for people with a Learning Disability. These are well publicised.</p> <ul style="list-style-type: none"> <li>• The Music Man, (Southend Mencap) works with people with learning disabilities on music and performing plays.</li> </ul>	<p><u>GREEN</u></p>

	<ul style="list-style-type: none"> <li>• People with Learning Disabilities have taken a part in community events. People with a Learning Disability took part in the Olympic Torch Relay at City Beach. They were from Kingsdown School. It was a community wide event.</li> <li>• People are also helped to take part in events like going to see a band or go to the pub.</li> <li>• Local cinemas make reasonable adjustments for people with disabilities and let people know this.</li> </ul>	
<p>C4: Sports and leisure</p>	<p>People with learning disabilities can get involved in sports and leisure.</p> <p>Southend has a broad and comprehensive sports offer which run from numerous bases across the town. Some are funded direct by the council, others through grants and private businesses. As a borough we are proud of our inclusivity which includes inclusive clubs like yacht clubs, accessible parks, music groups, and accessible sports clubs.</p> <ul style="list-style-type: none"> <li>• Many people with Learning Disabilities at different levels of severity get involved in cycling at the local sports centre. This is called ‘Just Ride’.</li> <li>• Some are part of walking groups. A lot of people know about these so they can take part. They know about them through day activities which reach a lot of people and their carers. Many of the walking activities are</li> </ul>	<p><u>GREEN</u></p>

	<p>also in the centre of town and so are accessible.</p> <ul style="list-style-type: none"> <li>• There are sports activities at the local sports centres. All 4 sports centres in Southend-on-Sea are accessible and have easy read guides. There are a range of organisations including Mencap that run activities at the sports centres.</li> <li>• People with Learning Disabilities can get involved in all general activities at sports facilities. There is an advantage card for cheaper entry.</li> <li>• Supported holidays are available to choose for people with a Learning Disability. For instance, people with Learning Disabilities went on holiday to Bournemouth in Christmas 2014 from Spencer House, which is primarily for people with mild to moderate learning disabilities.</li> </ul> <p><i>In January 2015 we asked people with a Learning Disability about whether sports centres were easy to use. 24 people responded to this question. 22 said that services were 'good', and 1 said that services were OK, and 1 said that services were 'not good'.</i></p>	
<p>C5: Employment</p>	<p>Southend Council has two dedicated employment officers working within the Learning Disability Team. The core function of this officer is to support clients into employment by raising awareness among employers as well as increasing employability training.</p> <p>The council work closely with partners including the Job Centre Plus,</p>	<p><u>GREEN</u></p>

	<p>businesses and local education providers to raise awareness of employment opportunities for vulnerable groups. Furthermore there have been several events hosted by partners to address these challenges – Lancaster School, Project 49 and Job Centre Plus over recent months.</p> <p>We have had an action plan developed from our strategy, to help us know how to help people with Learning Disabilities to get a job. This has helped us to do the right things. As a result of this there are a higher number of people with Learning Disabilities in a job than other areas of the country. ASCOF figures for 2013/14 show that the numbers of people with a Learning Disability is higher in Southend-on-Sea than the England average, the regional average and our Local Authority comparator set.</p> <p>This is a very good basis for further more targeted development and we aim to enhance our approach further by improved strategic working with partners.</p>	
<p>C6: Preparing for adulthood</p>	<p>Southend has a dedicated Transitions service which is supported by the newly appointed Children’s and Transitions Strategy and Commissioning Manager.</p> <p>There is some work to help children become adults. Health and social care and education at the council are a part of this. Children and adult services are also part of this.</p> <p>Southend has a clear Multi-agency Transition Protocol which sets out clear expectations and responsibilities. Engagement begins at age 14 and Transition staff meet regularly to discuss the needs of clients. There is governance through the Multi-agency groups and partners run their own transition events.</p>	<p><u>GREEN</u></p>

	<p>Multi agency Authorisation Panel (adults) and Acute and Complex Panel (Childrens) where Continuing Care is discussed.</p> <p>Education, Health and Care have worked together to develop a transitions plan for young people. This helps children and young people get what they need when they need it as they become adults.</p> <p>All services are working together to make a 'Local Offer' which lists services for children, young people and their families across Education, Health and Care. This is coming together and is on the SHIP Website.</p> <p>We are working in partnership in a number of ways. We have established a Special Education Needs Board which has membership education, health and social care.</p> <p>We will soon finish doing Education, Health and Care Plans for children and young people who can have one. Health, Education and Social Care at the council are working together on this.</p>	
<p>C7 People and families get involved in planning services and making decisions.</p>	<p>People and families are involved in planning and making decisions about services.</p> <ul style="list-style-type: none"> <li>• People and families are involved in shaping services through having a personal budget and self-directed support. 39% of people known to social services have a personal budget/direct payment.</li> </ul>	<p><u>GREEN</u></p>

	<ul style="list-style-type: none"> <li>• People and families have helped to shape services through influencing what services are offered. For instance:  In sports and leisure services people with Learning Disabilities were involved in planning what is offered at the local sports centre.  People with Learning Disabilities were also part of the steering group to develop ‘Just Ride’. This is a scheme for people with disabilities to enjoy cycling.  Library services are also working with people with Learning Disabilities to improve services.</li> <li>• People and families will be involved in shaping the Learning Disability plan for Southend-on-Sea  SHIELDS have been involved in shaping the draft plan and there will be more co-production with people with learning disabilities and their carers.</li> <li>• People and families are a part of the Learning Disability Partnership Board which will have a voice in talking about services. Commissioners across health and social care want to listen to what people say and be led by people and families.</li> </ul>	
C8 – How	We think that we may be Green but we do need to check this with Family	<u>GREEN</u>

<p>satisfied are Carers that their needs are being met?</p>	<p>Carers. We will be doing this over the next few months.</p> <p>In a survey in 2014 we have asked carers - not just carers of people with a Learning Disability about whether they are satisfied.</p> <p>67% were satisfied with the support received.</p> <p>We want to get better at asking carers face to face because surveys do not always capture what people really think. We will be asking carers of people with a Learning Disability, this question specifically.</p> <p>When changes are made to services we seek to co-produce approaches with Carers. For instance, when we considered relocating day activities from the Avro Centre, we carefully considered the needs of Carers.</p>	
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