

## **Disability Planning Framework 2013-16**

### **Introduction**

The term disability covers a broad range of conditions including physical impairment, learning disability, acquired brain injury, sensory impairment and autism spectrum disorder. There are many common issues across these groups but also many differences, this presents a challenge to joining up the planning approach to disability.

Within NHSGG&C a specific learning disability forum is now in place which will take forward the strategy for adult learning disability services across the board area. There a range of planning arrangements in place across local authority areas for wider disability groups.

### **The National Context**

#### **The Same as You Evaluation 2012**

This is a report which looks at impact of the national review of learning disability from 2000. Key message is that while much has been done to integrate people with a disability in communities, there remains much more to do to achieve the aims set out in the original document.

#### **Strengthen the Commitment**

This report aims to ensure that people of all ages have access to expert learning disability nurses and their families and carers get the support and care they need. It also seeks to make best use of learning disability nurses through the entire NHS and Social Care system.

#### **Personalisation and Self Directed Support**

The personalisation agenda and Self Directed Support (SDS) are key drivers which will shape future development of care services in Scotland. SDS and personalisation put service users at the centre of their own planning with support from the people who care for them and about them.

#### **HEAT Target for Psychological Therapies**

This will ensure that people with disabilities have access to psychological therapies within 18 weeks of referral. This is a particular issue for people with a learning disability.

### **The Local Context**

#### **Adult Support and Protection**

There is an ongoing commitment to ensure NHSGG&C staff are appropriately trained and are confident to act as required to protect and support adults with disabilities.

#### **Health Needs Assessment for People with Learning Disabilities**

This review of the health of people with learning disabilities across NHSGG&C was carried out in 2010/11 and made 28 recommendations. These recommendations will be carried forward by the learning disability forum.

#### **The LD Strategy**

This strategy is in place to establish a clear position on the function and purpose of specialist adult learning disability service and a strong sense of the unique contribution of specialist practitioners in helping people with learning disabilities achieve a good quality of life.

#### **Welfare Reform**

Glasgow has a high number of recipients of welfare benefits. This reform will change the assessment process for disability benefits and will potentially have a significant impact in Glasgow.

<b>Early Intervention / Prevention</b>		
<b>Outcomes</b>	<b>Change of development required</b>	<b>Measures</b>
The recommendations of the Health Needs Assessment are progressed	Implement the recommendations regarding increasing the uptake of screening among people with LD	Increase in screening uptake
People with disability are included in HI activity	HI programmes of activity take account of needs of people with a disability  Routine identification of needs of people with a disability and referral to relevant HI services	Evidence of inclusive provision for HI within development plan
CIS funding is used to ensure carers are better supported in their caring role	Work with GPs and other services to identify carers and refer them to local services for support  Provide training for carers to increase their confidence in helping the patient to self-manage their care  Link with local carer services/advocacy services to support carers in the SDS process	Increase in referrals to carers services Increase in carers assessments  Training provided
<b>Shifting The Balance of Care</b>		
<b>Outcomes</b>	<b>Change of development required</b>	<b>Measures</b>
More people with a disability live independently/ less people in hospital or institutional care	Reduce long term beds and shift to a social care model with enhanced support  Influence local housing associations to increase the availability of accessible housing	Reduction in use of long term beds/ care home placements  Reduction in average no. of days delayed in hospital /discharges of individuals with complex physical disability

<b>Improving Quality and Efficiency</b>		
<b>Outcomes</b>	<b>Change of development required</b>	<b>Measures</b>
<p>More effective use of specialist services</p> <p>Mainstream services are better able to meet needs of patients with a disability.</p> <p>Patients with a disability have an improved experience of mainstream health services (acute and primary care)</p>	<p>Take forward programme of work set out in the LD strategy to develop clear pathways identifying the roles and contribution of mainstream and specialist services.</p> <p>Train staff in mainstream services to increase their confidence and capacity to work with patients with LD. Acute care staff access the better together programme patient stories; e learning tool and training DVD</p> <p>Development of agreed acute liaison roles within acute care</p> <p>Carers are supported through the acute care journey</p> <p>The LD LES is commissioned and supporting IT screens changes implemented</p> <p>Accessible information for all services</p> <p>Maximise opportunities to improve accommodation and make facilities DDA compliant</p>	<p>Numbers and types of staff accessing Disability Awareness training.</p> <p>General health liaison service roles developed and implemented</p> <p>Carers steering group established and care pathway developed</p> <p>IT reporting framework</p> <p>Use of local capital funds to improve access for people with a disability</p>
<p>Staff understand their role in relation to adult support and protection</p>	<p>Provide training in adult support and protection to all relevant staff</p>	<p>Numbers and types of staff receiving ASP training</p> <p>Increase in ASP referrals</p>
<p>Better transition from children's to adult</p>	<p>Improve the transition from children's</p>	<p>Reduction in numbers of young adults</p>

services	disability services to adult services	receiving services from children's services
Improved performance information	Develop an effective information system to support performance amendment and service improvement	Relevant data
<b>Tackling Inequality</b>		
<b>Outcomes</b>	<b>Change of development required</b>	<b>Measures</b>
Gender based violence experienced by people with a disability is better recognised and support provided	Implement the sensitive enquiry protocol for all patients, including those with a disability	GBV referrals
LD among prisoners is better recognised and support provided	Prison health services to diagnose LD among prisoners	Numbers of prisoners identified with LD.
People with a disability are supported to maintain employment and/or engage with employability /financial inclusion services	Services to support patients with a disability to engage with employability/ training/ financial inclusion services	Referrals made and levels of uptake
Services are inclusive for all disabilities	The needs of people with different disabilities (e.g. sensory impairment, physical disability, frailty and LD ) are taken into account by mainstream services	EQIA of service change when necessary  Evidence of improvements in access to people with range of disabilities