

EXECUTIVE SUMMARY
REPORT TO THE BOARD OF DIRECTORS – 20 JUNE 2012

Subject:	Learning Disability Annual Report 2012
Supporting Director:	Professor Hilary Chapman, Chief Nurse / Chief Operating Officer
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Status¹	N

PURPOSE OF THE REPORT:

To provide the Healthcare Governance Committee with an update on performance and service developments across the Trust with regard to the support of people with a learning disability.

KEY POINTS:

- The Trust has reviewed the recommendations put forward by Sir Jonathan Michael in *'Healthcare for All'* (2008), all of which were subsequently accepted by the Government and detailed in *'Valuing People Now'* (2009) and is able to evidence systems that are in place to enable the Trust to understand and meet the specific needs of people with a learning disability.
- There are several ongoing developments, which will enhance the care delivered to people with learning disabilities whilst they are accessing our services.

IMPLICATIONS²

Achieve Clinical Excellence	Clinical outcomes for people with a learning disability can be sub-optimal, when compared with the general population.
Be Patient Focused	People with a learning disability often complain of a poor experience when accessing health services.
Engage Staff	Important to engage staff on improving care for this group of patients.
CQC Outcome	1 – Respecting and involving people who use services 4 – Care and welfare of people who use services

RECOMMENDATION(S):

The Healthcare Governance Committee is asked to note the contents of this report.

APPROVAL PROCESS

Meeting	Presented	Approved	Date
TEG			28 March 2012
Healthcare Governance Committee			28 May 2012
Board of Directors			20 June 2012

¹ Status: A = Approval
A* = Approval & Requiring Board Approval
D = Debate
N = Note

² Against the three pillars (aims) of the STH Corporate Strategy 2008-2012

1. INTRODUCTION

Following the report '*Death by Indifference*' (Mencap, 2007), which centred on the deaths of six people each with a learning disability – deaths that both the families involved and Mencap believe were the result of failings in the NHS, Sir Jonathan Michael was asked to review the acute medical care of people with a learning disability. His subsequent report '*Healthcare for All*' (2008) set out ten key recommendations all of which were subsequently accepted by the Government and detailed in '*Valuing People Now*' (2009).

The purpose of this report is to provide an update on performance and service developments across the Trust with regard to the support of people with a learning disability, with particular reference to the recommendations in '*Healthcare for All*' that apply to providers.

2. PROGRESS ON THE HEALTHCARE FOR ALL RECOMMENDATIONS AT STH

Significant steps have been taken within the Trust to support the care of people with learning disabilities in line with the ten key recommendations which were initially set out in '*Healthcare for All*' (2008).

Although there has been no systematic monitoring on a national basis to ensure that these recommendations have been implemented, the Trust still actively works to achieve these principles of good practice.

Recommendation 1: Those with responsibility for the provision and regulation of undergraduate and postgraduate clinical training must ensure that curricula include mandatory training in learning disabilities. It should be competence based and involve people with learning disabilities and their carers.

Over the last eight years the Trust has been actively involved in training programmes, which were developed by people who have a learning disability and their carers. However, although the two day course proved very successful, it was an onerous undertaking for people with learning disabilities who were involved in delivering the programme. In addition, the Trust Department/Directorates also found it increasingly difficult to release enough staff to participate in the course.

Therefore, it was decided that a different type of training was required and an e-learning training programme was developed. The e-learning programme includes video clips of people with a learning disability and their carers sharing their experiences and recommending good practice. The uptake of this course is monitored monthly and the course content is regularly reviewed to ensure it remains pertinent.

Also with the introduction of the Central Training Need Analysis there is a requirement that all staff undertake associated basic awareness training in the Mental Capacity Act, Deprivation of Liberty Safeguards and Consent. This can be undertaken at induction or on line training is available.

The Trust worked alongside Sheffield Hallam University to ensure that the care of people with a learning disability was included within the curriculum for Pre-Registration Health Care workers. Areas such as advocacy, learning disability within society, research and community care are covered within the course. Students are also required to produce a reflective piece of work on caring for someone with learning disability this is necessary to meet the EU Directives for pre registration training.

Recommendation 2: All healthcare organisations should ensure that they collect the data and information necessary to allow people with learning disability to be identified by the health service and their pathway of care tracked.

Sheffield has excellent information about the learning disabled population, which is helped by the maintenance of the Learning Disability Case Register. From this, we know that the number of people with a learning disability is increasing and set to rise further over the next decade. A key increase is among young people with complex needs reaching adulthood. This knowledge is influencing the work undertaken within 'transition' from Children's to Adult Services and a study day was held last year focusing on this issue. There has been a 25% overall increase in the number of people with a learning disability over the last 10 years and a rise of 120% within this of young people with profound and multiple impairments.

The Sheffield Case Register database has been downloaded into the Trust Patient Administration System, Patient Centre and therefore, once the details of a person with learning disability are entered, an alert highlights that this person has a learning disability.

From Patient Centre the Trust can monitor admission / attendances.

	2010/2011	2011/2012
In-patient admissions	1205	614
Patient Numbers	437	470
Out-patient attendances	1419	3587

The numbers of people with a Learning Disability treated by the Trust demonstrates a significant difference between the years 2010/2011 and 2011/2012 in terms of in-patient and out-patient activity although our patient numbers remain similar, on average 453 patients per year. However further work needs to be undertaken to understand the changes. It could be suggested that the number of out-patient attendances have increased as a consequence of the annual health checks that are provided by GPs through a Directed Enhanced Service which has addressed some of the unmet health needs of people with learning disabilities. Also it could be considered that we have decreased the number of readmissions as a result of better discharge planning, care closer to home and there has been a considerable amount of work carried out within Sheffield to prevent avoidable admissions to hospital.

Specialities that have a significant number of in-patients with a learning disability are chest medicine, gastroenterology, and general medicine.

Analysis of a range of data sources has, in part, influenced the introduction of a preventative programme of work that has been developed around:

- Cervical screening.
- Eye care and vision work.
- Dentistry.
- Hearing services.

The ability to identify patients with a learning disability can allow 'reasonable adjustments' to be carried out. These may include longer and more accessible appointments and accessible information for the person with a learning disability such as 'easy-read' information.

Other pertinent data collection includes:

- Complaints - 9 in total (April 2011 – March 2012)
- Incidents - 13 incidents (April 2011 – March 2012)

These are the number of incidents that have occurred as a direct consequence of the person having a learning disability.

- Deprivation of Liberty Safeguard - no patients with Learning Disability have required this intervention.

Recommendation 3: Family and other carers should be involved as a matter of course as partners in the provision of treatment and care, unless good reason is given, and Trust Boards should ensure that reasonable adjustments are made to enable them to do this effectively.

The Trust has examples of good practice, where hospital staff are working and supporting family carers.

Examples are:-

- Carer Audit (2010).
- Established networks within the Learning Disability Forums, that can provide specific feedback e.g. carer representatives.
- Meetings are encouraged prior to elective admissions to enable 'reasonable adjustments' to take place.
- '*Caring for a person with Learning Disability-guidance for nursing staff*' gives specific guidance for supporting carers and relatives. This can be accessed on the Learning Disability intranet site.
- Guidelines for admission/discharge, care pathways, nursing care guidelines, which give specific advice on 'caring for the carer'.

Recommendation 6: Section 242 of the National Health Service Act 2006 requires NHS bodies to involve and consult patients and the public in the planning and development of services. All Trust Boards should ensure that the views and interests of people with learning disability and their carers are included.

A key priority for services across the city of Sheffield is to listen to what people with a learning disability and their families say about health services and systems. There has been investment of time and resources into improving communication channels.

Sheffield Teaching Hospitals is represented at the Learning Disability Partnership Board, Joint Disabilities Local Implementation Team meeting, Complex Needs Group and Improving Health Group. All these groups have an objective to improve the care of people with a learning disability and this partnership works to enable the Trust to influence issues related to health and receive feedback from people, who use our services.

The Trust continues to involve people with learning disability. We currently have a database that enables us to consult with service users on projects and initiatives.

To gain views from patients with a learning disability, we also have our feedback leaflet 'Tell us what you think' in an easy reading format.

Recommendation 7: All Trust Boards should demonstrate in routine public reports that they have effective systems in place to deliver effective, ‘reasonably adjusted’ health services for those people, who happen to have a learning disability. This should include arrangements to provide advocacy to all those who need it and arrangements to secure effective representation on PALS from all client groups which include people with learning disabilities.

The CQC began, but then abandoned an audit of physical healthcare of people with a learning disability using NHS services. However, the Parliamentary and Health Service Ombudsman (2011) recommended that all NHS and social care organisations in England should:

- Review the effectiveness of the systems they have in place to enable them to understand and plan to meet the full range of needs of people with learning disabilities in their areas.
- Review the capacity and capability of the services they provide.

To achieve this, the Trust has ensured:

- Data collection which is monitored and reviewed.
- Partnership working with NHS Sheffield (NHSS) and the Joint Learning Disability Services.
- National reports on caring for people with a learning disability are reviewed and our services assessed against them.
- Link staff throughout the Trust including the Patient Services Team.
- The Trust has a user group data base for Patient & Public Involvement that includes some representation from adults with learning disabilities

The services are then monitored through:

- Annual Report for the Trust Healthcare Governance Committee
- Healthier Communities and Adult Social Care Scrutiny Committee.
- ‘Mock’ CQC inspection process to assess compliance with equality and human rights.
- Annual update to NHS Sheffield.
- Yorkshire and Humber SHA Annual Health Self Assessment Framework (SAF). Sheffield was the only area in the region to achieve green rating in all 4 priority targets last year and has maintained its position in this year’s rating.

The Trust also uses the Independent Mental Capacity Advocate Service (IMCA Service) which not only supports adults with mental capacity issues but also in supporting patients in the decision making process of their care.

4. FUTURE SERVICE IMPROVEMENT

4.1 Research

The Trust is working in partnership with Sheffield Hallam University in undertaking research to explore the barriers and challenges for patients with Autism to engage in healthcare services. The Trust has to date been involved in the development of the study’s objective and project framework.

The Trust will host research into ‘*Improving hospital care for people with profound intellectual and multiple disabilities (PIMD)*’. It is envisaged that the outcome of this research will allow the Trust to recognise gaps in our understanding of the specific obstacles to the provision of high

quality personalised care for patients with PIMD and influence our redesign of services. Any changes that will be made in light of the study's recommendations will be published on the Improving Health and Lives Learning Disabilities Public Health Observatory website.

4.2 Education

The Trust will be a key member of the Sheffield Care Trust Autism Steering Group. It is envisaged that this partnership will improve the care of patients and families in line with the Autism Act (2009), which requires health and social care services to make reasonable adjustments under the Equality Act (2010). The care that patients with Autism experience was a key objective within the Operating Framework (2010).

4.3 Communication

The Hospital Passport is to be launched in Sheffield in spring 2012. This is a communication tool which provides basic but important information about the patient, and their health and support needs to ensure that the person with a learning disability gets appropriate care whilst in hospital.

5. **CONCLUSION**

People with a learning disability have a right to the same quality of healthcare as those without a learning disability. With this in mind, the Trust must continue to take forward initiatives that improve the experience of people with learning disability and their families, particularly that of addressing issues/complaints which arise, promoting awareness of 'reasonable adjustments' and never becoming complacent in the care of vulnerable people.

6. **REFERENCES**

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Michael, J (2008). Healthcare for all: report of the independent inquiry into access to healthcare for people with learning disabilities, London: Department of Health.

Parliamentary and Health Service Ombudsman (2011) Report by the Parliamentary and Health Service Ombudsman on complaints about disability issues. London.