

Subject:	The Big Health Check For People with Learning Disabilities		
Date of Meeting:	14th November 2011		
Report of:	Director Adult Social Services/Lead Commissioner for People Chief Operating Officer NHS Brighton and Hove		
Contact Officer:	Name:	Diana Bernhardt	Tel: 29-2363
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Key Decision:	No	Forward Plan No. N/A	
Wards Affected:	All		

FOR GENERAL RELEASE.

1. SUMMARY AND POLICY CONTEXT:

- 1.1 Sir Jonathan Michael's report 'Healthcare for All' 2008 highlighted the inequality people with learning disabilities face in accessing healthcare services. The report's recommendations were incorporated into the Valuing People Now White Paper 2009 and the NHS Annual Operating Framework requires Primary Care Trusts (PCTs) to submit an annual 'Big Health Check' return of progress made to improve access to healthcare.
- 1.2 This report summarises the PCT's 3rd return submitted to the South East Coastal Strategic Health Authority (SHA) Self Assessment on 5th September 2011. The return is an update on the previous annual submission in November 2010. The return has been subject to validation by the Strategic Health Authority, and written confirmation should be received shortly.

2. RECOMMENDATIONS:

- 2.1 That the Joint Commissioning Board notes the contents of the 'Big Health Check' (South East Coastal Learning Disabilities Self Assessment Framework Feedback) for 2011.
- 2.2 That the Joint Commissioning Board notes the contents of the Big Health Check attached as Appendix 1 of this report and approves the actions set out in 3.7 of this report.

3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

- 3.1 Reducing the health inequalities experienced by people with learning disabilities is a key national priority for the NHS “Everyone can expect to live healthy lives with the appropriate support from a personalised and fair National Health Service that ensures the most effective treatments within a safe system.”¹
- 3.2 However, most people with learning disabilities have poorer health than the rest of the population and are more likely to die at a younger age. There is clear evidence that their access to the NHS is often poor and characterised by problems that undermine good personalised access to health services, respect for their dignity and safety²
- 3.3 As a consequence of the Governments response to “Healthcare for All”, the NHS Operating Framework requires SHA’s, PCTs and provider trusts to pursue service improvements and deliver action plans to achieve improvements in relation to :
- **Top Target 1** Moving out of hospital units
 - **Top target 2** Addressing Health Inequalities
 - **Top Target 3** Making Sure People are Safe in NHS Services
 - **Top target 4** Make progress on “Valuing People Now”
- 3.4 Each top target is scored according to an evidence based self assessment of current performance against each objective to provide an aggregate score for each Top Target using a traffic light system that indicates:
- Red= no or poor progress against the standard.
 - Amber= some progress against the standard with an action plan in place for improvement.
 - Green= Standard achieved or good progress against the standard with a plan in place to achieve the standard within the year.
- 3.5 Following the Big Health Check submission 2010, the following priority actions for NHS Brighton and Hove identified by the SHA with progress achieved is set out below. Specific progress has been achieved in 6 indicators. All criteria are either rated ‘Amber’ or ‘Green’ and Top Targets 1 and 2 are now assessed as ‘Green’. :

Top Target 1 – Overall Performance rating ‘Green’

Improve information of people living in Assessment & Treatment or other independent or NHS settings. Develop local provision for people whose behaviours challenge services and establish local network of providers to support best practice in reducing challenging behaviours.

Progress Additional review of people’s needs to further improve discharge planning undertaken. Service Level Agreement established between PCT and LA to undertake assessment and reviews on PCT’s behalf. Select provider list (framework agreement) established to provide challenging behaviour services. Local network will be established with select and existing providers to promote best practice.

Top Target 2 Overall Performance rating has improved from ‘Amber’ to ‘Green’. Increase access to mainstream health promotion, involving people with learning

¹ Lord Darzi: “High Quality care for All” (2008)

² Mencap Report “Death by Indifference” (2007)..

disabilities and their families in developing and planning services. Expand healthy eating choices and cookery skills project.

Progress New contract to involve people in planning of services. Healthy eating choices and cookery skills project established with Food Partnership. Sussex wide cervical screening protocol for GP practices. Oral Health Promotion team to staff in residential & supported living services. Thumbs Up campaign to improve access to mainstream community services includes dentists and opticians. Needs assessment of special care dentistry January 2011. As a result 3 indicators (2.4, 2.7 and 2.9) have moved to performance rating 'Green' and 2.6 has moved from 'Red' to 'Amber'.

Top Target 3 Overall Performance rating remains at 'Amber'
Continue with Mental Capacity Act and Deprivation of Liberty training ensuring more people receive training. Ensure learning and improvements are consistent across all health services.

Progress Recommendations regarding Six Lives being implemented within NHS provider Trusts. Brighton and Sussex University Hospital prioritises include refresh of policies and training relating to Mental Capacity Act and Safeguarding. As a result 3.3 has moved from Amber to Green

Top Target 4. Overall Performance rating remains at Amber
To have completed Joint Strategic Needs Assessment (JSNA) for learning disabilities, to have implemented actions to improve health transition pathway and development of a local autism strategy.

Progress LD JSNA complete. Autism strategy well developed in partnership with stakeholders. Transitions health pathway being developed and health planning completed at least 1 year before transition. As a result 4.4 has moved from performance rating 'Red' to 'Amber'.

3.6 The report based on the PCT's submission to the SHA is attached as Appendix 1. A table setting out the PCT's performance against the Four Top Targets since 2009 is set out in Appendix 2.

3.7 The following priority actions are proposed for next year:

- Complete Autism Strategy (JCB February 2012)
- Review arrangements for the review and monitoring of specialist LD placements
- Continue work with Reducing Reoffending Board to increase awareness and improve communication with people with Learning Disabilities and those with Autistic Spectrum Condition.
- Use the feedback from people with learning disabilities and carers to make further improvements in health services
- Embed work to further reduce health inequalities through reasonable adjustments in mainstream commissioning using information on JSNA, particularly ensuring links with older people's commissioning
- Sign up to the National Charter for Inclusion and Charter Challenging Behaviour Foundation
- Further work with social care providers to increase take up of Health Action Plans and preparation for people going into hospital

4. COMMUNITY ENGAGEMENT AND CONSULTATION

- 4.1 The Big Health Check self assessment has been completed in conjunction with the Learning Disability Partnership Board. Meetings have also been held with family carers and people with learning disabilities and feedback regarding health services has been obtained via questionnaire.

5. FINANCIAL & OTHER IMPLICATIONS:

5.1 Financial Implications:

There are no direct financial implications arising from this report. The areas for improvement as detailed in Appendix 1 will be addressed through the budget strategies for 2011/12 and subsequent years within the resources available.

Finance Officer Consulted: Michelle Herrington

Date: 22/9/11

5.2 Legal Implications:

Service provision and monitoring of the same for the Learning Disabled population falls within the s75 arrangements agreed between the PCT and Brighton and Hove City Council; JCB is the appointed decision making body for the purpose of s75 arrangements. The body of this report sets out comprehensively the government requirements for the South East Coastal Learning Disabilities Self Assessment Framework Feedback for 2011 and the reasoning for the same. There are no specific legal or Human Rights Act implications arising from this report.

Lawyer Consulted: Sandra O'Brien

Date 22/9/11

5.3 Equalities Implications:

As this is an update, rather than policy changes, an Equality Impact Assessment has not been carried out. Nevertheless, the aim of the self assessment framework is to reduce health inequalities for people with learning disabilities.

5.4 Sustainability Implications:

There are no specific Sustainability Implications of this report.

5.5 Crime & Disorder Implications:

There are no specific Sustainability Implications of this report.

5.6 Risk and Opportunity Management Implications:

There are no direct management implications of the report. If the action plan is not implemented, there is a risk that the benefits to people with learning disabilities of improved health will not be achieved.

5.7 Corporate / Citywide Implications:

Implications as this contributes to people's general health and well being.

5.8 Public Health Implications:

The aim of the Big Health Check is to assess how far local health services are making reasonable adjustments for people with learning disabilities and autism. The types of reasonable adjustments expected are those required under the Equalities Act 2010 which requires the NHS along with all other public bodies to make reasonable adjustments to reduce or remove physical or other barriers and to provide additional support if necessary.

6. **EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 The submission of the Big Health Check is a performance requirement of the National Operating Framework therefore no alternatives options have been explored.

7. **REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 For Joint Commissioning Board Members to note the self assessment of current performance and progress made and in relation to the Four Top Targets.
- 7.2 For Joint Commissioning Board Members to agree the actions in 3.7 of this report for NHS Brighton and Hove over the coming year.

SUPPORTING DOCUMENTATION

Appendices:

1. Brighton & Hove Learning Disabilities report- September 2011 APPENDIX 1.
2. Performance against the Four Top Targets since 2009 is set out in Appendix 2.

BACKGROUND DOCUMENTS

3. Brighton & Hove Learning Disabilities self assessment report- September 2011

