Learning Disabilities Strategic Action Plan

Organisation	Hywel Dda University	Date of Report	15 th April	Report Prepared By	Lisa Bassett-Gravelle, Head
	Health Board		2024		of Service for Adult Mental
					Health Inpatient Wards and
					Learning Disabilities

The Welsh Government's new strategy <u>Learning Disability Strategic Action Plan 2022 to 2026 | GOV.WALES</u> (the successor to the Improving Lives Programme) outlines the priority areas that will strengthen services and subsequently improve the lives of people with learning disabilities. The delivery of these priority areas involves collaborative working across NHS Wales, Regional Partnership Boards, Public Service Boards, Local Authorities and the third and private sectors. NHS organisations are required to evidence how they are contributing towards the priority areas of the strategy and in particular, the areas and key actions outlined in this reporting template.

Reporting Schedule: Progress is to be reported bi-annually. This form is to be submitted on:

- 16 October 2023 (covering the period 1 April 2023 to 30 September 2023)
- 15 April 2024 (covering the period 1 October 2023 to 31 March 2024)

Completed form to be returned to: <u>hss.performance@gov.wales</u>

Update on the actions implemented during the <u>current operational year</u> to deliver the Learning Disability Strategic Action Plan 2022-2026 priorities (legacy actions from the Learning Disabilities Improving Lives Programme).

Implementing the recommendations of the comprehensive review of adult in-patient learning disability services.

Key Actions:

- **1.** Reducing reliance on medication to manage challenging behaviour.
- 2. Improving access to community based early intervention and crisis prevention.
- 3. Increasing community based provision enabling individuals to move on from in-patient units as soon as it is safe for them to do so.

4. Ensure all in-patients are regularly assessed for discharge to "step down" care and discharge plans are actioned within 7 days.

Achievements	Risk to Delivery	Corrective Actions
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The psychiatry team continue to undertake psychotropic medication audits to ensure levels of medication prescribed are monitored. The Advanced Nurse Practitioner (ANP) role supports psychiatry clinics to monitor and review use of psychotropic medication.

Work continues to progress the LD Service improvement Programme (LDSIP) which includes the development of a progressive and robust operational, strategic and professional plan for the service as a whole, to enable future growth and development. The service development is being fully coproduced with people with lived experience and carers. Additional support is being provided by local People First organisations, with the strategic alignment being supported by Improvement Cymru colleagues. Two main workstreams have been established as follows:

 In patient - a key element of the LDSIP is to review the long-term hospital environments to ensure that patients are moved on to less restrictive settings and this workstream will look at the LD Service Specification and include an inpatient pathway.

The ANP training programme is 2 years in length which requires consideration when managing service capacity and demand.

Recruitment of qualified LD Nurses and Allied Health Professionals continues to be challenging. The service continues to work with workforce colleagues to develop sustainable workforce and recruitment models. We are continuing to recruit Band 5 Nurses through streamlining, with additional training and support being provided. We continue to support and promote 'grow your own' opportunities to encourage support workers to undertake LD Nursing training opportunities.

• Community – this workstream will	
oversee the review of the current	
Community Team Learning Disabilities	
(CTLD) and develop a new Well-being	
and Early Intervention Team,	
including service eligibility criteria,	
workforce and training. This work will	
define the new community service	
model, which will form part of the	
new LD Service Specification. This will	
include more robust crisis prevention	
pathways, including links with adult	
mental health.	

Implementation of the Welsh Governments' "Reducing Restrictive Practise Framework".

Key Action:

1. Promote the use of evidence based interventions, e.g. Positive Behavioural Support (PBS) in all settings. Ensure restrictive practise used is proportionate, compliant with the framework and is recorded and monitored.

Achievements	Risk to Delivery	Corrective Actions
The Health Board has a Reducing Restrictive		
Practice (RRP) team who ensure Positive		
Behavioural Support (PBS) is included in the		
training package it provides to the LD		
workforce.		
Additional RRP training is made available to		
all teams as and when required and raises		

awareness of restrictive practice and applicable legal frameworks for its use.	
RRP practice leaders have been identified in all clinical settings where restrictions are most commonly utilised which is helping to shift the cultural change required.	

Develop integrated housing, health, social care models and guidance, learning from previous examples that provide accessible services for vulnerable people especially those with a learning disability. Utilise the new Regional Integrated Fund.

Key Action:

 As a member of the Regional Partnership Board drive integrated services across health, housing, social services and the third sector. People with a learning disability are one of the key priority groups for funding under the Regional Integrated Fund.

Achievements	Risk to Delivery	Corrective Actions
We continue to work collaboratively with	Appropriate local housing stock continues	The Health Board will continue to work
the West Wales Care Partnership (WWCP)	to be challenging due to increased costs,	collaboratively with the RPB to progress
to ensure priority for the development	environmental limitations and length of	RIF projects and achieve sustainability.
supported housing options for vulnerable	time to purchase/build, which can impact	
people including those for learning	on capacity.	
disabilities and more complex health needs.		
A regional Capital Working Group (multi-	RIF grant funding is not sustainable, the	
agency) for Accommodation has been	current financial climate is making it	
established as part of this work.	increasingly difficult to secure sustainable	
	core funding to offset the reducing grant,	
Regional Improvement Fund (RIF) monies	which makes exit planning from specific	
has been awarded for a number of LD	projects difficult to maintain.	
specific projects such as the progression		

project which is a regional collaboration
between the 3 LA's and the Health Board to
provide co-ordinated progression reviews of
individuals with Learning Disabilities placed
in residential or institutional inpatient care.
The main focus is on out of area placements
with a view to repatriate to local
accommodation based options. The project
also helps to inform the development of
capital projects by identifying potential
placement and accommodation needs.

Primary Health Care: Improve the take up and quality of annual health checks to identify and address health needs (target: 75% of all individuals registered with their GP practise who have a diagnosed learning disability are to have an annual health check).

Key Actions:

- 1. Strengthen the role of community learning disability teams to support delivery of the annual health checks (primary care cluster level).
- 2. Establish a community learning disability link nurse for every primary care cluster.

Diels to Delivery	
Risk to Delivery	Corrective Actions
LD Community Services do not currently	Improvement Cymru colleagues are
have adequate budgets and workforce to	supporting the Health Board in
meet the demand for a community	transforming our community services
learning disability link nurse for every	through the development of the Learning
primary care cluster.	Disability Service Improvement
	Programme. In line with this, we are
	reconfiguring services to increase
	have adequate budgets and workforce to meet the demand for a community learning disability link nurse for every

The enhanced payment for GPs to	Community Nurse capacity to ensure direct
undertake Health Checks continues to	links with GP Clusters and work to
impact positively on the numbers	maintain the increased Annual Health
undertaken.	Check uptake. In the interim our
	Community Team Managers attend all GP
Between 1st April to 31st December 2023	Cluster link meetings to ensure Health
(Q1 – Q3) a total of 528 Annual Health	Check discussions/issues are raised and
Checks have been undertaken across	actioned across the Health Board footprint.
Pembrokeshire, Ceredigion and	
Carmarthenshire. This is a significant	
increase from 2021/22 Annual Health Check	
returns of 180.	
We are currently working with GP	
colleagues across all three Local Authority	
areas to identify areas with low uptake in	
Annual Health Checks to undertake targeted	
interventions/engagement, with the	
expectation of undertaking an additional	
120 Health Checks in quarter 4 (January –	
March 2024).	

To ensure reasonable adjustments are made for people with a learning disability accessing mainstream NHS services.

Key Actions:

1. Establish sustainable models of learning disability champions and learning disability liaison nurses.

2. Ensure system flagging to identify patients with a learning disability and increase the use of the health passports.

3. All staff in a public facing role to undertake the mandatory Paul Ridd Foundation Level Training.

Achievements	Risk to Delivery	Corrective Actions
A MH&LD Liaison Service is operational		
across the 4 District General Hospital sites.		
The service has developed a comprehensive		
training package and provides training		
through the Health Board Skills 2 Care		
training. The service is working to develop		
LD champions across the health board to		
ensure that will be a LD champion in all		
wards and departments.		
In line with the LD SIP transformation		
programme the MH&LD Liaison Service is		
being reviewed to ensure alignment with		
the LD Strategic Action Plan.		
Liaison nurses ensure Health Profiles are in		
place for people admitted to our hospitals,		
with a flagging system integrated into		
WPAS.		

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Achievements	Risk to Delivery	Corrective Actions
Paul Ridd training is mandatory training for		
all MH&LD staff and is monitored via ESR.		