



**Report of:** SCC Lead Officer: Alexis Chappell, Director of Adult Services  
 SCCG Lead Officer: Sandie Buchan, Director of Commissioning Development

**Report to:** Joint Commissioning Committee

**Date of Decision:** 27 September 2021

**Subject:** Joint Learning Disability (LD) Strategy

Is this a Key Decision? If Yes, reason Key Decision:-	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
- Expenditure and/or savings over £500,000	<input type="checkbox"/>	
- Affects 2 or more Wards	<input type="checkbox"/>	
Has an Equality Impact Assessment (EIA) been undertaken?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If YES, what EIA reference number has it been given?		
Does the report contain confidential or exempt information?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Which Scrutiny and Policy Development Committee does this relate to?		
Health and Wellbeing Board		

<p><b>Purpose of Report:</b></p> <p>There is a growing number of people with Learning Disabilities in Sheffield. A joint LD strategy is required to ensure the local Health and Care system appropriately commissions and delivers services to meet need.</p>
<p><b>Questions for the Joint Commissioning Committee:</b></p> <p>The Joint Commissioning Committee are asked to note the report for discussion.</p>
<p><b>Recommendations for the Joint Commissioning Committee:</b></p> <p>This committee is asked to:</p> <ul style="list-style-type: none"> <li>• Acknowledge the content of the report;</li> <li>• Approve the development of the strategy governance structure;</li> <li>• Approve the development of the governance structure to support the development and implementation of the strategy.</li> </ul>

## Background Papers:

Lead Officer(s) to complete:-		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: <i>(Insert name of officer consulted)</i>
		Legal: <i>(Insert name of officer consulted)</i>
		Equalities: <i>(Insert name of officer consulted)</i>
		Other Consultees: Sheffield Clinical Commissioning Group: <ul style="list-style-type: none"> <li>Sandie Buchan, Director of Commissioning Development</li> <li>Heather Burns, Deputy Director Mental Health Transformation/Head of Commissioning</li> </ul> SCC: <ul style="list-style-type: none"> <li>Alexis Chappell, Director of Adult Services</li> <li>Nicola Shearstone, Head of Commissioning for Prevention and Early Intervention – All age</li> </ul>
<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>		
2	<b>EMT member who approved submission:</b>	Sandie Buchan, Director of Commissioning Development Alexis Chappell, Director of Adult Services
3	<b>CCG lead officer who approved submission:</b>	Sandie Buchan, Director of Commissioning Development
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Joint Committee by the officers indicated at 2 & 3 above. In addition, any additional forms have been completed and signed off as required at 1.	
	<b>Lead Officer Names:</b>  Sandie Buchan  Alexis Chappell	<b>Job Titles:</b>  Director of Commissioning Development  Director of Adult Services
	<b>Date:</b> 16 September 2021	

## DISCUSSION PAPER ON THE JOINT LEARNING DISABILITY (LD) STRATEGY

### 1. Introduction/Context

- 1.1** There is a growing number of people with Learning Disabilities in Sheffield. A joint LD strategy is required to ensure the local Health and Care system appropriately commissions and delivers services to meet need.
- 1.2** Approximately 0.6% of Sheffield's population has a moderate or severe learning disability. According to the Sheffield Case Register records 3,600 people of all ages - 850 children (under 20) 2,750 adults (20+). As a city we jointly spend £84m annually to meet the needs of people with LD. Despite this People with a LD still face significant health and social inequalities. As a city we:
- Underperform on key indicators (eg; employment, uptake of annual health checks, SEND, etc);
  - Have significant operational and financial challenges across the system;
  - Require significant market development in attracting support providers with the right skills;
  - Have a lack of appropriate housing for people with learning disabilities.
- 1.3** The city currently has no overall LD strategy to shape, coordinate and prioritise work, nor a dedicated governance structure for delivering/implementing a strategy. SCC's most recent Adult LD Commissioning Strategy ran from 2015-18 and was underpinned by a major change programme, overseen by a joint LD Commissioning Board.
- 1.4** In order to ensure we address the challenges we face in meeting the needs of this vulnerable group and in a way which aligns with the strategic objectives of the Integrated Care Partnership, we require a new joint Learning Disabilities Strategy and delivery programme to develop and then enact the strategy.
- 1.5** The proposed strategy will:
- Take a long-term approach (10 years);
  - Be led jointly by SCC and SCCG and developed collaboratively with system partners, service users, their families and carers;
  - Take an all-age approach and address long standing transition issues;
  - Take a preventative approach;
  - Take a whole system approach (beyond specialist LD services) and influence other citywide programmes and strategies.

### 2. Challenges

- 2.1** Challenges facing the Health and Care system are complex and include demand growth, spend pressures, deep rooted inequalities, lack of suitable housing and a need for service modernisation.
- 2.2** It is widely recognised and documented that health and care outcomes are poorer for people with a Learning Disability compared to the general public. This is linked to inequalities in wider socio-economic determinants.

### 2.2.1 Life expectancy

More likely to die of preventable disease than the general population. The median age at death for men with an LD is 60 (general population – 83) and 59 for women (general population – 86). The Sheffield *Learning Disability* Mortality Review (LeDeR) programme identified that in 2020, people from BAME groups died disproportionately at younger ages than white British people. Of those who died in childhood (ages 4-17 years), 43% were from BAME groups and 46% had profound and multiple learning disabilities.

### 2.2.2 Social inclusion

People with a Learning Disability are less likely to be 'doing alright' financially, be employed, live in a high-quality neighbourhood, feel safe outside, have close friends.

### 2.2.3 Housing

The percentage of people with a learning disability living in Sheffield's most deprived wards is more than double that in the least deprived wards. A recent housing needs analysis carried out by the Integrated Care System has highlighted significant gaps in the city's housing supply leading to a shortage over the next 10 years in meeting the housing needs for people with LD.

### 2.2.4 Health

The Sheffield LeDeR programme report 2020 identified that 44% of deaths of people with LD of reviewed cases were medically avoidable (versus 22% of the general population).

34% of deaths of people with LD were from treatable medical causes (8% in the general population).

### 2.2.5 Care coordination

12% of LeDeR reviews noted concerns about the person's death, commonly in relation to delays in diagnosis/ treatment, apparent lack of care, unsafe hospital discharges, quality of health or social care services.

13% of reviews reported problems with organisational systems and processes. Many related to poor coordination and information sharing within/ across different agencies.

## 3. What does this mean for the people of Sheffield?

**3.1** A new joint Learning Disabilities Strategy is being developed which aims to address the challenges identified. It will be all age, focus on prevention and be coproduced with service users, families, carers and other stakeholders.

**3.2** A new strategy for people with Learning Disabilities is being developed jointly between SCC and SCCG in collaboration with system partners, service users, their families and carers.

The strategy will be based on the principles of:

- Human rights
- Independence
- Choice and control
- Social inclusion

The proposed key areas of focus for the strategy are:



**3.3** A programme to oversee this work is being developed and will consist of representation from service users, health and care commissioners and providers, education, employment and housing. The programme will report to the Director of Adult Social Care, SCC. The next phase of work will include:

- Establishment of the programme and governance;
- Development of an approach to ensure user voice is at the heart of developing the strategy.

#### **4. Reasons for Recommendations**

This committee is asked to:

- Acknowledge the content of the report;
- Approve the development of the strategy governance structure;
- Approve the development of the governance structure to support the development and implementation of the strategy.

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